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Abstract

Postsecondary students identified as having a disability in the United States are commonly expected to discuss the use of disability-related accommodations with faculty members. Researchers have previously used surveys and interviews to examine what students report about discussing accommodations with faculty members. However, little is known about how students advocate in the moment when communicating with faculty members about accommodations. In this study, I designed a clinical simulation to examine how 15 university students identified as having a disability engaged in and reflected upon a meeting with a standardized faculty member – an actor who I trained to communicate questions and concerns that were described as common by university students and staff members. Participants engaged in a single video-recorded simulated discussion followed by a group reflection interview and an optional individual follow-up interview in which participants watched a video of the simulation.

The results of this study illustrate approaches that students use to discuss accommodations with a faculty member, including how they frame the role of accommodations. The results also provide glimpses into how students respond to a standardized faculty member's concern about an accommodation and how students advocate for their needs. Furthermore, data from follow-up interviews demonstrate an array of tactics that participants used to manage their identity with careful consideration of issues such as power, authority, and gender dynamics within the context of a student-faculty member relationship. I conclude this study by suggesting that while self-advocacy remains important for postsecondary students identified as having a disability, the voices of participants in this study illustrate the need to reform practices that place students in a stigmatized position and demand the need for students to self-advocate in the first place.

**“Is that okay with you?”:
Examining a simulated discussion about accommodations between university students
identified as having a disability and a standardized faculty member**

By

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Dissertation
Submitted in partial fulfillment of the requirements for the Degree of Doctor of Philosophy in
Special Education Syracuse University
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Chapter One:

Introduction

In a March 2017 article published in the student-run newspaper, *The Michigan Daily*, University of Michigan students voiced frustration with the university's institutional processes for providing disability-related accommodations¹. The students expressed concern about the requirement that they register with the university's Services for Students with Disabilities office, where students are asked to provide documentation that they have a disability before they are granted disability-related accommodations. One student expressed frustration with the burden of paperwork that is necessary to complete before receiving accommodations. Another student criticized the practice of mandating that students formally register with the office, arguing that, "If you look at any history of any minority, having to register to prove you're part of that group isn't something that has been appropriate (or has gone well)" (Meer, 2017, para. 9). The same student further revealed that they² were denied accommodations by a faculty member until they were officially recognized by the university as a student with a disability, despite having an obvious need for accommodations. The student lamented that other students are often granted accommodations, such as for absences due to religious observance, without needing to provide documentation or formally register as having a particular identity (Meer, 2017).

The processes for receiving accommodations, and the critiques made by students, are not specific to the University of Michigan. Postsecondary³ students around the United States are

¹ I use the terms "disability-related accommodations" and "accommodations" throughout this dissertation to refer to auxiliary aids and services, and academic adjustments that are provided to create equal access to education for postsecondary students identified as having disabilities. Examples include modified exam administration and accessible formats of print and electronic text (Association on Higher Education and Disability, 2018).

² I use the pronouns "they" or "their" as both a singular and plural gender-neutral pronoun in several instances in this dissertation so as to avoid assumptions about individuals' gender identities. I use gendered pronouns (e.g., he/she) only when describing participants in this study who self-identified with a gender.

³ My use of the term "postsecondary" education is intended to be synonymous with "higher" education. Both terms are used in research literature to denote education beyond elementary and secondary schooling. Postsecondary

expected to disclose a disability identity and provide documentation of a disability to their college or university if they wish to gain access to accommodations (Lovett, Nelson, & Lindstrom, 2015). After being granted accommodations, students are often expected to communicate directly with faculty members about using accommodations in courses, thereby disclosing their disability for a second time (Cole & Cawthon, 2015). My experiences as an undergraduate student in New Jersey included these requirements and I share concerns raised by students at the University of Michigan. When I enrolled in college, I did so as a student who was identified at the age of five as having a learning disability and Attention Deficit Hyperactivity Disorder (ADHD), and as someone who received Special Education instruction and related services in K-12 public schools. If I still wished to receive accommodations in postsecondary education, I faced the same requirements as the University of Michigan students; I would need to register with the college's Disability Support Services office. With the support of my family, I provided satisfactory documentation of having a learning disability and ADHD, and I became officially recognized by the college as a student with a disability.

Of the several issues raised by students in *The Michigan Daily* article, the aspect most central to my own experience was interactions with faculty members. Each semester I was provided with an e-mail from the Disability Support Services office with an attached letter outlining a list of accommodations that I could access. Accommodations listed in my letter included, among others, using a laptop to type notes, access to a separate testing environment, and extended deadlines on assignments. To ensure that the accommodations outlined in my letter would truly be provided, I was told to meet each semester with the faculty member of each of the

education typically refers to two and four-year colleges, universities, vocational education, and many other forms of adult education. Given the context of this dissertation, I primarily discuss research relating to students who attend four-year colleges and universities.

courses in which I was enrolled and provide them with a copy of the accommodations letter. Otherwise, I could not be sure if a faculty member would grant an accommodation requested mid-semester, such as asking for extended time on an assignment or to use a computer to type during a test in class. The e-mail sent each semester by a staff member at Disability Support Services ended with a paragraph entitled “Self-advocacy,” which described what was expected of me in my encounters with faculty members:

At the beginning of each semester, all students are required to schedule appointments with their instructors or meet with them during office hours to deliver your accommodation letter and discuss your accommodations. The instructor is the expert on the information to be taught in the course, and you are the expert on how your disability affects you academically. Students are not required to reveal the nature of their disability but should be prepared to address their need for accommodation. This discussion, between you and your instructor, should lead to an experience where both of you feel comfortable with the accommodation process. Many problems can be avoided with clear communication between you and your instructors (M. F. Tominey, Personal Communication, January 17, 2012).

Each semester, I made appointments to meet faculty members during their office-hours of the first week of classes. I entered an academically competitive college in which the majority of students had academic records far superior to mine. Asking for accommodations made me feel like an imposter; I felt that I was asking for unusual treatment to allow me to participate in a community in which I did not really belong.

Characterizing meetings with individual faculty members is difficult because no two were the same. Yet, there were patterns. Many faculty members would smile widely, speak a

little slower to me, and assure me that they would gladly provide whatever I needed. Others reacted to me with what I perceived as skepticism, before reluctantly agreeing to provide accommodations in their courses. Then there were outliers. One faculty member studied me as I informed him of my need for extra time on assignments in his reading and writing intensive seminar. He suggested that I try to figure out what was “wrong with the wiring up there.” I presumed he was referring to my brain. In contrast, the next semester, as a different faculty member read over my letter, he told me he had already seen how capable I was from my contributions to the discussion in the first seminar session. “I think you’re going to be a star in this class,” he told me. It was my third year of college, and the first time I felt I had something to offer in a college classroom.

The nature of these initial discussions about accommodations with faculty members had significant consequences for me. When I had a positive encounter and felt that a faculty member understood and respected my needs, I felt much more comfortable keeping in frequent contact with the faculty member. I felt little apprehension requesting to utilize accommodations throughout the semester. When I had a negative encounter and felt that the faculty member viewed me as less capable, I felt anxiety and shame when, for example, I considered e-mailing the faculty member to request an additional 48 hours to complete an essay. I avoided communicating my needs for days, only falling further behind. Over time, I grew more comfortable and confident when engaging with faculty members about my need for accommodations. I talked more openly about the specific labels that qualified me for disability-related accommodations. Yet one thing never changed about these encounters with faculty members, even as I began my last semester of study: I entered each meeting with at least some

degree of anxiety and uncertainty, never quite sure how I would be received, nor how I would respond to reactions from a faculty member.

Since my undergraduate and master's studies, I have come to appreciate the significance of how my other identities have protected me when disclosing a disability. While I felt the vulnerability of disclosing a disability, I was likely to be perceived by sighted faculty members as demonstrating privileged identities such as a white, cis-gender male, heterosexual, middle-class, Judeo-Christian. Yuknis and Bernstein (2017) capture the importance of how these identities intersect with disability for postsecondary students:

Each identity falls along a spectrum of capital and interacts with other identities and the body in complex ways. For example, a person may be White, male, and have a learning disability. While the learning disability gives this individual lower academic capital (and therefore, lower status) than a person who does not have a learning disability, his Whiteness and maleness cannot be disregarded as they provide a certain amount of privilege. These characteristics interact to give the person a certain amount of status, and that status can vary depending on whether the individual is a student in a classroom, an athlete on the field, or a consumer in a shop (p. 5).

Yuknis and Bernstein's (2017) example illustrates the *intersectionality* of identities, or identity markers – characteristics which lead individuals to become perceived in association with certain identities. Crenshaw (1991) coined the term intersectionality to draw attention to how African-American women are oppressed by social and legal systems that are inadequate to address the compounding effects of their multiple social identities. Goodley (2013) describes intersectionality as “not simply about bringing together these markers but to consider how each supports or unsettles the constitution of one another” (p. 636). Recognizing the role of

intersectionality in my journey as a postsecondary student, I have become aware of how my multiple identities interacted to marginalize, but also support and privilege me.

Postsecondary students, who are positioned with multiple identities, are expected to communicate with faculty members, disclosing a disability identity and the accommodations that support meaningful participation in postsecondary education. In this dissertation study, I examine an important aspect of the experience of postsecondary students who have been identified as having a disability – one-on-one discussions between university students and faculty members about disability-related accommodations. As a researcher conducting this study, I have sat at “both sides of the table” (Smith, 2013, p. 2) of this conversation as both a college student disclosing my disability identity to faculty members, and as a teaching assistant and university instructor who has listened as students disclosed their disability identities to me.

Before discussing the problem that I aim to address in this study, I would like to point out my deliberate use of language when referring to disability. I refer to postsecondary students as a research group, and those university student participants in this study, as “students identified as having a disability” or “SID.” I use the language “identified as having a disability” rather than students “with disabilities” or students “who have disabilities” to reflect my theoretical perspective that much of disability can be understood as a socially-constructed identity. To view disability as a social construct means to explain disability as a social phenomenon that exists always within sociocultural contexts, rather than an individual characteristic (Taylor, 2006).

For example, researchers have argued that learning disabilities – one of the largest disability identity categories for postsecondary students – emerged as a political classification and are best understood as a sociocultural category of delineating difference, rather than as an individual characteristic that exists in one person and not another (Dudley-Marling, 2004;

Gallagher, 2010). Given that there is no clear definition of a learning disability, nor agreement on how it should be identified (Scanlon, 2013), describing participants as “*having* a learning disability” or being a student “*with* a learning disability” seems inappropriate; these phrases imply that learning disabilities are discrete entities.

By asserting a social constructionist view of disability and referring to students as being *identified* as having a disability, I am rejecting a medical approach to disability commonly used in research in Special Education and Psychology, in which disability is framed as a characteristic, or set of characteristics that can be verified in some individuals, but not others (Baglieri, Valle, Connor, & Gallagher, 2011). In addition, I am attempting to highlight the political dimension of disability in postsecondary education. I refer to students *identified* as having a disability to foreground that students must first be designated as having a disability by their postsecondary school in order to gain a political status that is intended to protect them from discrimination and make them eligible for accommodations in postsecondary education. As I will discuss in this dissertation, the extent to which the institutional and political identity of disability in postsecondary education align with how students identify, or with how they are described within medical discourse, varies significantly (Evans, Broido, Brown, & Wilke, 2017).

While I predominantly focus on social, cultural, and political dimensions of disability, I recognize there are many *embodied* aspects of disability. Disability can be experienced as emotional and physical pain, as challenging learning characteristics, and as a number of other lived experiences that demonstrate that disability cannot be fully understood as a purely social phenomenon. Disability is a product of the encounter of real bodily differences and limitations that become significant within a social environment that is often disabling via physical barriers, stigmatizing cultural beliefs, inflexible policies, and economic instability (Thomas, 2004). By

referring to students as “identified as having” rather than “with” or just “having” a disability, I am not denying the reality of biological or physical differences, nor the embodied aspects of disability, sometimes referred to as impairments (Shakespeare, 2010). I am also not attempting to distance the population of this study from the term disability. I recognize that some individuals prefer disability-first terminology, such as “disabled people” or “autistic person,” and that disability is a source of pride for many people (Back, Keys, McMahon, & O’Neill, 2016).

What I hope to do is to frame disability in a way that I think is most accurate for the context of this study – examining discussions about disability-related accommodations between students and faculty members in postsecondary education. When students inform their postsecondary school and eventually individual faculty members about the accommodations that they are entitled to access, they are revealing an institutionalized identity of a student who has been identified (i.e., by their postsecondary institution) as having a disability. In other words, while disability is a complex and fluid identity and reflects diverse characteristics, the common denominator when seeking accommodations in postsecondary education is that an individual has been constructed (i.e., identified) as disabled through institutional processes that makes them eligible for accommodations. Therefore, I use the term student(s) identified as having a disability (SID) when referring to students at a group level. I deliberately spell out the acronym occasionally, to remind the reader of its meaning. When reporting and discussing the results of this study, I often refer to the participants in this study as participants or simply as students.

Problem Statement

Disability-related accommodations in postsecondary education are largely delivered through what is commonly referred to as a retrofit model (Dolmage, 2017). Rather than design physical structures and classroom instruction to meet the needs of diverse students from the

beginning, retrofitting occurs by adapting or remediating aspects of the postsecondary education environment. Further, retrofitting occurs in tandem with a biomedical approach to disability, in which students are required to proactively seek out accommodations and provide documentation that they have a disability, thereby taking on the identity of a student identified as having a disability (SID) in the process (Hutcheon & Wolbring, 2012). Students have reported experiencing the structures of postsecondary disability-related accommodations as stigmatizing (Albanesi & Nusbaum, 2017) and burdensome (Burgstahler & Moore, 2009).

One element of the structure of postsecondary education in which students have frequently reported negative experiences involves communicating with faculty about disability-related accommodations. Once registered with their postsecondary school as a SID, students are commonly expected to advocate for their accommodations by communicating individually with faculty members. Communication between SID and faculty may occur over e-mail or during a one-on-one meeting in which a student shares a letter from an office at the school that outlines their granted accommodations (Cole & Cawthon, 2015). The direct line of communication between students and faculty members about accommodations ensures that faculty are aware that they have a SID in their course (Lombardi & Lalor, 2017). Yet, SID also take on an additional burden that is not required of their peers; they are responsible to work with the faculty member to facilitate their accommodations and, in the process, disclose a potentially stigmatizing identity.

Students report having negative experiences when requesting accommodations from faculty members. Some students feel that faculty are reluctant to agree to accommodations, despite the fact that the accommodation has been approved by the institution and is legally mandated (Albanesi & Nusbaum, 2017). Other students feel they are treated differently by

faculty members once they reveal their identity, such as faculty members having lower expectations for their academic abilities (Denhart, 2008). The potential for feeling stigmatized and negative experiences with faculty members may be a contributing factor to why many students choose to not disclose a disability or seek out accommodations (Lyman, Beecher, Griner, Brooks, Call, & Jackson, 2016; Newman & Madaus, 2015). Researchers have found that not accessing accommodations has consequences; students who identify with a disability but do not seek out and use accommodations are more likely to withdraw early from their postsecondary school than students who do use accommodations (Salzer, Wick, & Rogers, 2008).

It is clear that SID have reported negative experiences when discussing accommodations with some faculty members. Yet, what is not clear is how SID engage in discussions with faculty members. Research about SID experiences discussing accommodations with faculty members typically reports data collected from student interviews (e.g., Cole & Cawthon, 2015; Hutcheon & Wolbring, 2012) and survey results (e.g., Albanesi & Nusbaum, 2017; Cole & Cawthon, 2015). In both cases, students recall aspects of their experiences when engaging with faculty, including often describing negative aspects of these interactions, such as the stigma of seeking accommodations (Albanesi & Nusbaum, 2017). While these studies are important in documenting the experiences that students have, this research tells us little about how SID interact with faculty members in the moment. For example, how do SID talk about their need for accommodations? What, if anything, do they say about their specific disability identity? And how do SID respond to a faculty member's reactions or questions when discussing accommodations? Research is needed to better understand how exactly SID engage with faculty members in the moment when discussing accommodations.

To examine encounters between faculty and university SID who are seeking accommodations, I designed a *clinical simulation*. A clinical simulation is both a research method and an experiential learning approach that positions individuals in real-life situations in which they are asked to respond, as they deem appropriate, to a standardized actor who has been carefully trained to interact with each individual in the same manner (Dotger, 2015). While clinical simulations have long been used as an instructional method and assessment tool in medical education, and more recently in teacher and school leader education, I believe that a clinical simulation also offers an opportunity to understand how SID engage with faculty members in a discussion about disability-related accommodations. In this study, I partnered with university SID and staff members to design a single simulation in which SID at the same university participated in a simulated encounter with a standardized faculty member. The standardized faculty member was portrayed by actors who I carefully trained to engage with the student in a discussion about accommodations in an office-hours environment.

Research Questions

To address the need to better understand encounters between SID and faculty members, I designed a study that was guided by the following research questions:

- How do undergraduate students who have been identified as having a disability engage in a simulated discussion about accommodations with a standardized faculty member?
- How do undergraduate students who have been identified as having a disability reflect upon their participation in a simulated discussion about accommodations with a standardized faculty member?

Theoretical Foundations

My approach to this study is influenced by theoretical foundations within the interdisciplinary field of Disability Studies (Goodley, 2010). Grounding my work in Disability Studies research means rejecting a purely medicalized approach to studying and writing about disability. A medicalized approach to disability, commonly called a medical model, refers broadly to the predominant ways of understanding and responding to disability in the United States and much of the world. Linton (2010) has described a *medical model* as referring to practices and attitudes that address disability as an individual deficit; the goal when responding to disability is typically to attempt to cure, or rid the person of certain characteristics.

While medical treatments of disability have in many cases increased the well-being of people with disabilities, there are many undesirable consequences. Namely, a medical approach interprets human variation as an abnormality and locates disability in/on the person as an individual problem, while leaving important aspects unconsidered, such as addressing social barriers in the form of policies, attitudes, and physical barriers that limit participation or opportunities (Linton, 2010). Related to a medical model of disability are biomedical responses to disability, which share elements of the medical model, but also emphasize identification for the sake of organizing systems and maintaining policies. In a biomedical response, disability is addressed as an attribute of only certain individuals, and processes are set up to validate or invalidate individual disability through the application of medical knowledge (Hutcheon & Wolbring, 2012).

While the field of Disability Studies does not have a unifying theoretical framework, a common theme has been responding critically to (bio)medical approaches to disability by theorizing how disability is constructed within social contexts (Taylor, 2006). As Gabel (2005)

writes, frameworks in Disability Studies constitute “social interpretations” of disability, and to various extents examine the cultural, political and economic context that structures, or gives meaning to disability (p. 2). Social interpretations of disability represent an important departure from medicalized responses to disability in research and practice. One prevailing social interpretation is a social constructionist approach to disability – a post-modern critique of disability that rejects essentialist approaches to disability promoted within scientific and political discourse, and instead asserts that social relations construct the ever-shifting reality of disability (Corker, 2006). In other words, disability is not viewed as a quality of individuals, but rather as a phenomenon that has developed as the result of shifting cultural values, social practices and policies, and material circumstances.

Disability Studies researchers have therefore sought to provide critical analyses of disability, to demonstrate the ways in which disability is constructed within specific sociocultural and political contexts, and to examine how this construction poses barriers to meaningful social participation. Below, I describe three theoretical perspectives that specifically address disability in postsecondary education. Most, but not all, of the authors whose works I cite in the following sections explicitly identify with the academic field of Disability Studies. Each shares the commonalities of highlighting the sociocultural nature of disability and providing an alternative to medicalized approaches to explaining the existence of disability in postsecondary education.

Disability and social justice in postsecondary education. The term social justice is used widely across different educational contexts. In this study, I am influenced by a social justice approach to disability in postsecondary education, which Evans et al. (2017) describe as “beginning with the assumption that people’s abilities and rights to contribute to and benefit from higher education are not dependent on their bodies or psyches conforming to dominant

norms” (p. xii). The authors argue that normative practices, rather than individual characteristics, are an important and under-addressed aspect of how people experience disability in postsecondary education. Further, a social justice perspective, in this instance, means a belief that “barriers to success in higher education lie in the structural, organizational, physical, and attitudinal aspects of our institutions” (p. xii). Disability is framed as an outcome of an interaction between individuals and groups in specific sociocultural and political contexts, and in which some individuals are disabled by environmental barriers that exclude or marginalize. Taking a social justice approach to postsecondary education means identifying barriers to meaningful participation and success for students, faculty and staff, and working to reduce or eliminate these barriers (Evans et al., 2017).

Ableism in postsecondary education. Evans and colleagues (2017) link a social justice approach to disability to the goal of combating *ableism* in postsecondary education. Griffin, Peters and Smith (2007) define ableism as “a pervasive system of discrimination and exclusion of people with disabilities” to “privilege temporarily able-bodied people and disadvantage people with disabilities” (p. 335). While maintaining a definition focused on discrimination, others have defined ableism in terms of beliefs and attitudes. Hehir (2002) writes that ableism is reflected in the “societal attitudes that uncritically assert that it is better for a child to walk than roll, speak than sign, read print than read Braille, spell independently than use a spell-check, and hang out with nondisabled kids as opposed to other disabled kids” (p. 3). Similarly, Hutcheon and Wolbring (2012) have asserted that ableism is the belief that “certain abilities are essential” to exist as healthy and successful individuals (p. 40).

Both Dolmage (2017) and Price (2011) have recently argued that ableism is at the foundation of postsecondary education in the United States, at the core of what makes colleges

and universities the institutions that they are. Steep steps and gates have long kept people with physical disabilities away from postsecondary institutions, and narrow ideas about what constitutes intelligence or ability help to police postsecondary education, privileging certain forms of ability (Dolmage, 2017). To Dolmage (2017) and Price (2011), discrimination towards disability is not an accident, but rather a key component of the culture and ideology of postsecondary education. Disability only seldom moves beyond the periphery of postsecondary education, such as when people with disabilities are the objects of study by academics, or when students, faculty and staff are accommodated on an individual basis (e.g., students in this study who request accommodations). However, disability is rarely understood as having value in postsecondary education and instead exists in contrast to the values and culture of postsecondary institutions (Dolmage, 2017).

Disability as diversity in postsecondary education. Rather than viewing disability only as an impairment, or negative characteristic of certain individuals, I understand disability as a form of diversity in postsecondary education (Kim & Aquino, 2017). Unlike other identity categories, such as race, ethnicity, and gender, disability is not a standard element of the literature on diversity within postsecondary education. Disability exists largely outside of the construct of what it means to be a diverse postsecondary institution. Instead, within a biomedical approach, disability is commonly represented as a negative characteristic that is likely to limit students' success (Kim & Aquino, 2017).

Understanding disability as a multifaceted form of diversity that enriches postsecondary communities is a departure from a (bio)medical approach to disability. As Kim and Aquino (2017) argue, if disability is considered as a form of diversity, then disability is a potentially empowering aspect of a person's individual or group identity and can serve to forge connections

across multiple minoritized groups with which students might simultaneously identify. Further, theorizing disability as a form of diversity foregrounds sociocultural responses to disability. Consistent with a social justice approach, the focus shifts from remediating individual differences to examining how the context of colleges and university education *plan for and respond to* diversity through potentially empowering or marginalizing policies and individual and collective practices (Kim & Aquino, 2017).

On the surface, the frameworks I describe above – social justice, ableism, and diversity - appear more as ideals, rather than theoretical contributions. Yet, each of these three frameworks attempts to explain the phenomenon of disability from a social constructionist ontological perspective. As Hacking (1999) argues, the purpose of claiming that something is socially constructed is to reject entrenched beliefs that its existence, as is, is inevitable, or that an identity (e.g., gender, disability) is an essential or immutable part of a person. Applied to disability, I interpret disability frameworks of diversity, social justice, and ableism as rejecting the theoretical position that disability is an intrinsic characteristic and further, that the experiences and outcomes associated with disability are inevitable.

The frameworks I have introduced for examining disability in postsecondary education – ableism (Price, 2011; Dolmage, 2017), disability as diversity (Kim & Aquino, 2017), and a social justice approach (Evans et al., 2017) influence many aspects of this study. I discuss this influence further in subsequent chapters but will briefly outline a few examples here. Because of Disability Studies theoretical frameworks that I use, my approach in this study differs from how the intersection of disability and postsecondary education might be examined by most Special Education researchers who typically examine disability as a (bio)medical phenomenon. I choose not to frame the characteristics associated with disability as deficits that need to be remediated

(i.e., medical model), as is the norm in the research field of Special Education (Baglieri et al., 2011).

For example, in Chapter Two I cite researchers in Special Education who often describe self-advocacy as a skill or ability that SID must develop to successfully transition into postsecondary education. Self-advocacy is an important concept for this study; I believe participating in a simulated conversation with a standardized faculty member is an opportunity for SID to practice advocating for their needs. However, in taking a social constructionist approach to explaining disability, I understand a concept such as self-advocacy to be just that, a concept, or construct, rather than an ability that is deficient in some SID. Returning to Linton's (2010) critique of the medical model, a focus on identifying perceived deficits in SID (i.e., lacking the ability to self-advocate) shifts the focus away from addressing the ableism in postsecondary education, such as seeking to reform a system that asks SID to advocate for accommodations that could be built into instructional practices in the first place (Dolmage, 2017; Evans et al., 2017).

Kim and Aquino's (2017) explanation of disability as a form of diversity in postsecondary education has also influenced the way I have designed this study. If SID are a part of the diversity of students in postsecondary education, these students can be understood as similarly situated with other minority groups, who have their own 'expert' knowledge of what it means to live with one or more minoritized identities. For decades, individuals with disabilities have asserted that they possess expertise about their bodies and experiences, in an effort to take back authority from medical professionals and to ensure that the perspectives of individuals with disabilities are at the forefront on policy decisions (Charlton, 1998). In this study, I partnered with university SID to develop a simulation through the perspectives of students, who shared

their lived experiences engaging in conversations with faculty members about accommodations. While I also consulted professional literature and service professionals, I conducted a focus group in which I asked SID to help develop the simulation, in an effort to position SID as arbiters of the simulation's authenticity.

Tensions Between Clinical Simulations and Disability Studies

In addition to working through tensions about conducting a study that is framed within research in both Disability Studies and Special Education, I also encountered tensions between frameworks within Disability Studies and the design of this study – a clinical simulation. I was excited when I first encountered clinical simulations in a doctoral seminar, when I was assigned to read a study of preservice teachers participating in a simulated conversation with an actor trained to portray a paraprofessional (Dotger & Ashby, 2010). However, as I read more about the method of simulations, I began to feel tensions about how my orientation towards frameworks within Disability Studies could coexist in the same study with clinical simulations.

To begin, the term simulation has a negative connotation to many who work in the field of Disability Studies, including me. Disability simulations are a common way that teachers in K-12 and in postsecondary education teach non-disabled children or adults about the experience of being disabled (Lalvani & Broderick, 2013). Activities often involve simulating disability by placing individuals in circumstances in which they temporarily experience disability. For example, in both high school and college I was asked to wear sight-impairing goggles to simulate blindness. While the intent of these simulations is to raise awareness about disability, researchers have found that simulations actually perpetuate negative beliefs about disability, such as a tragedy or burden (Nario-Redmond, Gospodinov, & Cobb, 2017; Silverman, Gwinn, & Van Boven, 2015). I want to clarify that the simulations model I use in this dissertation is not

intended to simulate the experience of disability, nor to raise awareness of disability for the participating students or actors. Instead, I view the simulation as an opportunity for SID to be themselves, and practice engaging in what students have reported can be a difficult conversation.

Still, there are other aspects of the context created when using a clinical simulation that create further tensions and appear to contradict the social constructionist framing of disability that I use in this study. As I describe in Chapter Two, clinical simulations have long been used in medical education as a means to help medical students develop specific competencies and to assess the knowledge and skills of medical students (Barrows, 1987). However, the fact that simulations have been used in medicine does not necessitate the use of a medicalized approach when using simulations. Throughout this dissertation, I often remind the reader that while I believe SID might benefit from practicing and reflecting on their experiences in a simulated conversation with a standardized faculty member, I am not suggesting that participating SID have a skill deficit, or a specific competency which they must develop through using a simulation as an intervention. Conducting an intervention for SID seems particularly inappropriate given that a central problem reported by students in the encounter between SID and faculty members is the negative beliefs and ignorance about disability accommodations on the part of faculty members (e.g., Albanesi & Nusbaum, 2017; Hutcheon & Wolbring, 2012). Therefore, my purpose was not to assess characteristics of participants but to learn about how they engage in conversations with faculty members about accommodations and the insights students might offer when reflecting on participating in a simulated encounter.

An additional tension I found when designing this study relates to the video recordings, commonly used in clinical simulations. The university SID in this study were recorded via wall-mounted cameras as they participated in the simulation. This element of observation in clinical

simulations resembles a medical approach that risks positioning people without disabilities as experts who pass judgments about the abilities of those under observation based on pre-determined criteria, such as what is considered developmentally appropriate (e.g., Goode, 1992). In asking SID to be video recorded during the simulation, I could have observed and evaluated their behaviors against what researchers describe as characteristics of successful postsecondary students, or effective self-advocacy, such as was recently done in a study by Holzberg, Test, and Rusher (2018). However, in this study I was not interested in evaluating students based on pre-determined criteria, but rather intent understanding what SID can teach researchers about what it means to self-advocate in postsecondary education.

Further, while simulations can create an authentic environment for practice, a simulation is still an approximation of practice (Grossman, Compton, Igra, Ronfeldt, Shahan, & Williamson, 2009) and not a natural environment. Making judgments about (dis)ability using normative criteria in an unnatural context has led to a history of presumptions of incompetence by clinicians (Goode, 1992; Trent, 1994). As I describe in detail in Chapter Three, I have taken deliberate steps to deemphasize elements of judgment and the use of outsider, expert knowledge when conducting a clinical simulation. Instead, I use the method of video recorded simulations as a means to support students' shared reflection and identity development. Following Dotger's (2013) model of clinical simulations for teacher education, I created small group debriefing sessions in which SID reflected together about interacting with the standardized faculty member in the simulation. Opportunities for reflecting on a shared experience is particularly important for SID, who seldom encounter structures in postsecondary education that foster shared conversations about their identity and experiences (Kim & Aquino, 2017).

Finally, I chose to invite students back individually to watch the video of their simulation with me, to reflect upon their interaction with the standardized faculty member. My purpose was to shift the focus of my data away from evaluating SID's performance, to instead illuminate how students make sense of practicing a potentially difficult conversation. Further, post-interviews allowed SID to serve as experts of their own experiences by making interpretations, offering explanations, sharing aspects of their identity, and evaluating the value of the simulation experience. I am not suggesting that by conducting shared debriefings and post-interviews that I removed my own interpretations or judgments about the simulations; Chapters Five and Six contain results and discussion in which I make sense of what I heard and saw from participants. However, I have attempted to position SID as evaluators of their own experience and identity, and as the real 'experts' in this study.

Potential Contributions to Literature

I believe that the results of examining a simulated discussion about accommodations between SID and a standardized faculty member can contribute to at least three areas within research literature. First, researchers in the field of Special Education are increasingly emphasizing the importance of preparing students with disabilities to successfully transition from high school to postsecondary education (Newman & Madaus, 2015; Scanlon, 2008). Due to the current structures of providing accommodations in postsecondary education, researchers have argued that students with disabilities must be exposed to practices that will support them to practice advocacy, so as to increase the likelihood of a smooth transition and positive academic and social outcomes in postsecondary education (Landmark & Zhang, 2012). If participating in a simulated encounter with a standardized faculty member is deemed helpful by participants, this

example might be worthy of consideration as a transitional practice that affords an opportunity for students to practice enacting self-advocacy.

At the same time, this study has the potential to build upon and/or challenge the very idea of self-advocacy. Researchers have used several definitions and models of self-advocacy when discussing SID, postsecondary education, and transition (e.g., Holzberg et al., 2018; Test et al., 2005). By examining simulated encounters of otherwise confidential conversations, the data in this study have the potential to illuminate aspects of what it means to advocate, which have not been previously considered. The grounded theory approach I take in this study attempts to build a new theory of what it means to advocate and negotiate aspects of postsecondary education, based on how SID explain their own engagement in a simulated conversation with a standardized faculty member.

Lastly, researchers have suggested that faculty and staff who work in postsecondary education would benefit from support in responding to SID (Burgstahler & Moore, 2009; Yager, 2015), and especially to students with multiple minoritized identities (Miller, Wynn, & Webb, 2017; Yuknis & Bernstein, 2017). To the extent to which participants in this study found participating in a simulation to be a meaningful experience, future studies might consider the use of simulations as an opportunity for faculty and staff to practice responding to the needs of SID and other minoritized students (e.g., interacting with a standardized student).

Conclusion

In this chapter, I have provided a context for the problem I aim to address in this study – the need to better understand how SID engage and reflect upon discussions about disability-related accommodations with faculty members. I have introduced several frameworks for theorizing disability in postsecondary education and discussed how I use these frameworks to

explain disability as a sociocultural phenomenon and political identity, rather than as a medical problem or individual characteristic. I have attempted to build a critical framework for this study, in which I understand the context of postsecondary education as one which positions minoritized groups, such as SID, in the unenviable position of disclosing a potentially stigmatizing identity and needing to advocate for increased access to education. Finally, I have discussed tensions between my theoretical approaches to disability, and my use of clinical simulations in this study. In the next chapter, I provide a detailed literature review of research related to SID in postsecondary education, as well as a review of research about the use of clinical simulations.

Chapter Two:

Literature Review

In March 2017, the Chronicle of Higher Education published an opinion article by Gail Hornstein, a professor of Psychology at Mt. Holyoke College, entitled “Why I dread the accommodations talk” (Hornstein, 2017). Hornstein shares her experiences and perspective of the topic that is at the center of this study – discussions about disability-related accommodations between students identified as having disabilities (SID) and faculty members. Hornstein shares an anecdote of a student who brought a letter provided by the college, detailing the disability accommodations to which the student is entitled. The student also shared that she occasionally has panic attacks. Hornstein recalls that they set aside the letter, choosing to shift the conversation away from discussions about accommodations, to encourage the student to consider ways that might cope with her anxiety, in hopes that they might avoid using the accommodations granted to the student. “We as faculty members need to respond appropriately and help students to learn what’s a crisis (and what’s not),” Hornstein explains, “and to understand when it is reasonable to ask for the course structure to be changed or for expectations to be modified (and when it’s best to try to cope on one’s own)” (para. 14). Hornstein reports successful results from this encounter; the student passed the course without visiting Hornstein again to further discuss accommodations.

Three professors who identify with the field of Disability Studies wrote a joint response to Hornstein’s opinion, entitled “Why we dread disability myths” (Wood, Meyer, & Bose, 2017). The authors argue that Hornstein’s essay perpetuates longstanding discriminatory, or ableist, beliefs about disability. These include “the myth of overcoming disability (or what Hornstein labels "resiliency"), the trope of the able-savior, and the notion that disability itself is inherently

deficient and, thus, runs contrary to academic life” (Wood et al., 2017, para. 4). The authors accuse Hornstein of encouraging other faculty to “wean students off their accommodations” rather than to seek to best utilize their accommodations (Wood et al., 2017, para. 6). They argue that discouraging students from using accommodations, in favor of trying to teach students to overcome their differences, creates an even greater hostile environment for SID than they already face. Rather than interpreting Hornstein’s anecdote about the student who did not return to discuss accommodations as a success story, the authors argue that the student was likely discouraged from returning and then determined, like many students, that they would have to continue in the course without the support of their professor or accommodations.

When I read these essays, I was not surprised to read a professor of psychology (Hornstein) offering a medicalized response to disability (i.e., disability as an individual problem to fix, cope with, or overcome), and a critical response from professors of Disability Studies (Wood, Meyer, and Bose), asserting a social interpretation of disability (i.e., that discriminatory attitudes do the disabling for students in postsecondary education). Psychology is a foundational discipline for the research field of Special Education, a field whose researchers have traditionally chaptframed disability as a deficit that requires a medicalized response (Danforth & Naraian, 2015). With its roots in sociology and anthropology, and more recently in the humanities and law, researchers in Disability Studies have tended to examine social aspects of disability, to understand what peoples’ experience and perspectives reveal about disability as a political and cultural identity, rather than as a medical category (Taylor, 2006; Dolmage, 2017). Hornstein’s essay and the response by Wood, Meyer and Bose are emblematic of the differing viewpoints about how to support SID, and further, what disability has to offer in the context of postsecondary education.

This chapter is divided into two main sections. In the first half of this chapter, I review literature about disability and SID in postsecondary education. In this section, I include research that demonstrates contrasting viewpoints from researchers in Special Education, Disability Studies and related fields. In several instances, I present research, followed by critical perspectives or alternative approaches to supporting SID in postsecondary education. I also introduce research on the characteristics and outcomes of students identified as having a disability (SID) in the context of postsecondary education. Then, I discuss the meaning of disability accommodations in postsecondary education and review relevant research on the use of accommodations by SID, including the most relevant subset of research about SID for the context of this study – SID’s experiences seeking accommodations and disclosing their disability identity to faculty members. In this section, I also review research reporting the perspectives and attitudes of faculty members towards SID and accommodations. In the second half of the chapter I review research related to clinical simulations. I discuss the origins of clinical simulations, characteristics, relevant theoretical and conceptual frameworks, and how clinical simulations have been used across multiple fields.

Students Identified as Having a Disability (SID) in Postsecondary Education

The most recent demographic data suggests that between 11 percent (National Center for Education Statistics, 2016) and 14 percent (Higher Education Research Institute, 2010) of all students enrolled in postsecondary education in the United States are identified as having a disability. Before discussing this group further, I believe it is important to consider some challenges in discussing research about SID and postsecondary education. To begin, the identifier of “disability” is an ever-shifting and contentious category and membership in this group evolves through the changing determinations of medical professions and policy makers

about who ‘counts’ as being disabled (Evans et al., 2017). Disability is a political category that is socially constructed and continuously repackaged over time, though it is still often represented as a discrete identity that can be objectively verified on/in certain individuals but not others (Samuels, 2014).

As a fluid and evolving identity, disability identity includes a diverse group of people. Their experiences are influenced not only by their characteristics and the social identity associated with specific disability labels but also by numerous other social identities that intersect to shape often oppressive experiences (Kim & Aquino, 2017). The experiences and barriers to access encountered by a White, male SID who uses a wheelchair will differ from a Black, female student who is blind, which in turn will differ from an Asian transgender student who might appear able-bodied but who identifies with a ‘hidden’ disability (e.g., ADHD or a psychological disability). Even amongst students who share a common disability identity, such as a learning disability, these students represent a diverse group, whose characteristics may differ from each other in many more ways than they are similar (Evans et al., 2017).

Complicating research about disability in postsecondary education is that many students do not choose to disclose a disability when enrolled in postsecondary education, despite having previously been identified as having a disability (Newman, Madaus, & Javitz, 2016). Conversely, some students are identified as having a disability, but postsecondary education might not identify them as having a disability when asked. Some studies use self-reporting, others use categories reported by states or by postsecondary schools (Evans et al., 2017). Further, much of the research and statistics about SID do not include the emerging population of students who identify with intellectual or developmental disabilities who are attending postsecondary

education. Given the heterogeneity of disability and continuing differences in how disability is identified and classified, statistics and claims about SID as a group should be taken with caution.

There has been an increase over the past several decades in the number of students enrolling in postsecondary institutions who have been identified as having a disability. The National Center for Education Statistics (2016) estimates that the percentage of students identified as having a disability is 11.1%, almost double the population of SID two decades ago (Evans et al., 2017). The increase of SID attending postsecondary schools correlates with an increase in students identified as having disabilities in elementary and secondary education (Wagner, Newman, Cameto, Garza, & Levine, 2005). However, the overall increase of SID as a population in K-12 education is only one factor that has contributed to increased enrollment in postsecondary education.

An important set of factors that has contributed to the increase of students enrolled in postsecondary education has been legislation aimed at increasing opportunities and improving outcomes for students identified as having disabilities (DaDeppo, 2009). These policies include the Individuals with Disabilities Education Act (2004), the Americans with Disabilities Act (1990), Section 504 of the Rehabilitation Act (1975), and the Higher Education Opportunity Act (2008). The 2004 amendments to the Individuals with Disabilities Education Act (IDEA) require that postsecondary transition planning be included in the educational program for high school students eligible for Special Education. Amendments to IDEA also incorporated elements of the federal legislation – No Child Left Behind (2002) – which mandated that students with disabilities be held to the same academic standards as their peers, renewing an emphasis on high school graduation for students with disabilities (Scanlon, 2008).

Another influential policy change has been the mandate of non-discrimination on the part of postsecondary institutions. Section 504 of the Rehabilitation Act (1975) requires that institutions which receive federal funding provide reasonable accommodations for students with disabilities; the Americans with Disabilities Act (1990) mandates that colleges and universities, cannot deny students admission or participation because of their disability (Shallish, 2017). Private institutions which accept federal funding in the form of student financial aid and research grants are also mandated to not discriminate (DaDeppo, 2009). The Higher Education Opportunity Act (2008) increased access for SID by allowing students identified with intellectual disabilities to access federal financial assistance for postsecondary education for the first time (Lee, 2009).

Perhaps the single most impactful factor in the rise of SID attending postsecondary institutions is their participation in general education classes in high school (Joshi & Bouck, 2015). For SID, inclusion, which is defined as spending at least 80 percent of the school day in general education classrooms, has been associated with a two- to four-fold increase in a student's likelihood of enrolling in postsecondary education (Flexer, Daviso, Baer, McMahan Queen, & Meindl, 2011; Rojewski, Lee, & Gregg, 2015). Further, SID who received general education mathematics and language arts coursework are significantly more likely to graduate from two- and four-year postsecondary institutions (Lombardi, Doren, Gau, & Lindstrom, 2013). The importance of access to general education for students with disabilities is not surprising, as the general education curriculum often allows students the best opportunity to participate in academic instruction that is designed to prepare students for postsecondary education. However, black and Hispanic SID in K-12 have been found to have less access to general education classrooms and curriculum than their white peers (Harry & Klingner, 2014), meaning that

minoritized SID students are less likely to receive an education that could prepare them to enroll in postsecondary education.

Within the overall increase of SID in postsecondary education, students are most commonly identified in one of the three following disability categories: students identified as having Attention Deficit Hyperactivity Disorder, learning disabilities, and mental health related disabilities. I briefly describe these three categories, not only because they are the largest subsets of SID, but also because nearly all the participants in this study revealed identities that align with one of these three categories. Attention Deficit Hyperactivity Disorder (ADHD) is the most commonly diagnosed childhood disorder and is defined by the American Psychiatric Association (2013) as a developmental disorder characterized by “a persistent pattern of inattention and or hyperactivity-impulsivity” (p. 59). Students identified as having ADHD comprise between four and eight percent of all postsecondary students and between 11 and 31 percent of all SID enrolled in postsecondary institutions. Approximately 60 percent of postsecondary students who report ADHD also identify with another disability diagnosis (Evans et al., 2017). There is significant overlap in diagnoses of ADHD and learning disabilities, as well as with other mental health related disorders (Brown, 2009).

The term Learning Disability (LD) has several definitions and serves multiple purposes in the United States. First, LD, which is referred to as “specific learning disability,” is a federally recognized category of disability within IDEA (Individuals with Disability Education Act) (U.S. Department of Education, 2015). Since K-12 disability categories (under IDEA) do not apply in postsecondary education, the more relevant identifier for research in postsecondary education is “Specific Learning Disorder” (APA, 2013, p. 92). The American Psychiatric Association (APA) defines Specific Learning Disorder as an academic-based disorder. However, the most recent

definition from the APA places an increased focus on academic and social functioning, rather than on cognitive functioning (Scanlon, 2013). Students identified as having a learning disability have been estimated to represent between 19% and 31% of all SID, and between 2% and 4% of all postsecondary students (Evans et al., 2017).

While both ADHD and Specific Learning Disorder are both defined as mental disorders by the American Psychiatric Association (2013), they exist as distinct from the category of mental health in postsecondary education, sometimes referred to as psychological disability, or mental illness. Mental illness encompasses a wide breadth of labels, making the category increasingly prevalent in postsecondary education. Hunt and Eisenberg (2010) found that the most common mental health disabilities students identified with are substance abuse disorders (29%), personality disorders (17%), mood disorders (17%) and anxiety disorders (10%). Overall, students identified as having a mental health related disability make up 3%-6% of postsecondary students, and 15%-26% of all SID (Evans et al., 2017).

As the number of SID in postsecondary institutions has increased, researchers have become interested in examining the type of documentation that postsecondary schools accept as valid evidence of a disability. For example, Weis, Till, and Erickson (2017) reviewed documentation submitted by 214 undergraduate students identified as having ADHD. They found that while some diagnoses of ADHD were made based on multiple forms of data, most diagnoses were made primarily based on students' self-reports of symptoms. Lindstrom, Nelson and Foels (2015) collected data about documentation requirements from 200 universities in the U.S. The authors concluded that university requirements for documentation of ADHD were minimal and inconsistent, with little agreement across universities about what is essential to verify whether a student should be identified as having ADHD.

In another study of students identified as having learning disabilities at a small liberal arts college, Weis, Erickson and Till (2017) concluded that, for many students, the characteristics they presented in documentation did not meet the criteria for a learning disability.

For researchers who critically examine how postsecondary schools decide how and who to grant accommodations, inconsistencies and preferences for valuing student self-reporting over professional diagnoses is concerning because it threatens the scientific basis (i.e., validity) and objectivity of disability identification (Nelson, Whipple, Lindstrom, & Foels, 2014; Weis, Erickson, & Till, 2017). Efforts to revise criteria and diagnostic practices to improve the validation of medical constructs is common in medicalized approaches to disability.

Yet, from a Disability Studies perspective, concerns over validity elide the sociocultural nature of disability. For example, researchers have for decades critiqued the emergence of ADHD, arguing that it is a highly-subjective construct, which serves as a means to medicalize otherwise healthy but challenging behavior in school children (Conrad, 1975; Graham, 2010). Similarly, others have argued that learning disability has always been an ill-defined construct rather than a discrete entity (Freedman & Ferri, 2017; Gallagher, 2010), and that it emerged as a political identity, desirable for parents of white students to separate their children from other categories of disability identified more frequently for black students (Sleeter, 1986). To borrow from Samuels (2014), researchers' attempt to validate disability as a verifiable characteristic of some students and not others is indicative of pervasive "fantasies of identification," a desire to definitively categorize bodies that obscures the sociocultural and political elements that give meaning to disability.

Accommodations in Postsecondary Education

Postsecondary institutions are required to provide accommodations to students who have a documented disability to ensure equal access. The Vocational and Rehabilitation Act and the Americans with Disabilities Act have been interpreted to mean that institutions must provide accommodations to ensure access beyond academic courses, including in the areas of admissions, financial aid, housing, libraries, and others (Burgstahler & Moore, 2009). Registering as a student with a disability therefore allows access to both services (e.g., accessible transportation) and academic adjustments (e.g., a separate testing environment) that may be provided in or outside of the classroom. Typically, students must register with a school's Disability Services Office⁴ (DSO) and meet with staff members to provide documentation of their disability and determine the accommodations for which they are eligible. If an additional evaluation to document a disability is required, the burden to pay for such evaluation is the responsibility of the student, not the postsecondary school (McGregor et al., 2016). Once documentation is secured and approved, students are then typically expected to bring their need for accommodations to the attention of the faculty members of their courses and participate in facilitating the accommodations (Hadley, 2011).

The extent to which accommodations are individualized for different students is not clear. Accommodations are often communicated via standardized letters, which often contain many of the same accommodations (Orr & Hammig, 2009). Kurth and Mellard (2006) argue that accommodations are often chosen based on disability type, rather than on contextual factors or functional needs. The authors found that students in their study were satisfied with many aspects

⁴ I use the term Disability Services Office, abbreviated as "DSO" throughout the remainder of the dissertation. Disability Services Office is intended as a generic term to refer to an office or department within a postsecondary school that is responsible for addressing disability-related accommodations.

of the accommodations process, however students reported that the accommodations (e.g., separate testing environments) were inappropriate for their needs or ineffective (e.g., the use of a notetaker). Common accommodations include note-taking services and assistive technology, such as screen readers or electronic texts (Hawke, 2004). Faculty members in a study by Becker & Palladino (2016) reported the most common accommodation students requested was extended time on tests and quizzes.

Overall, the use of accommodations has been associated with positive outcomes for SID, such as increased likelihood of remaining enrolled after the first year of postsecondary education (Mamiseishvili & Koch, 2011). Students who use accommodations have been found to have higher rates of graduation than students who identify with a disability that do not use accommodations (Salzer et al., 2008). The use of testing accommodations such as extended time and modifications of testing materials have also been associated with an increase in grade point average for SID (Kim & Lee, 2016). Further, McGregor et al. (2016) found that students who receive accommodations reported increased contact with faculty and less difficulty with completing course assignments.

Some researchers writing within a Disability Studies framework are highly critical of the current structures used to provide disability-related accommodations in postsecondary education. Hutcheon and Wolbring (2012) note that a biomedical response is used to frame disability as an individual limitation that must be verified through evidence. This process can pose challenges for students who cannot afford to pay for evaluations, or whose characteristics do not meet the ever-shifting definitions of what constitutes disability within legal and medical frameworks. Further, this process requires that individuals choose between self-identifying with a disability that they

might not wish to identify with, or be faced with foregoing accommodations altogether (Hutcheon & Wolbring, 2012).

Dolmage (2017) describes how disability accommodations are delivered through a retrofit approach. Retrofitting refers to an approach in which accommodations are used to react to disabilities as individual problems, rather than to address environmental barriers that are disabling in the first place. An alternative to a retrofit approach that is frequently suggested is referred to as universal design and entails creating flexible environments that build in accommodations from the outset (Burgstahler, 2015). A common example of universal design is the architectural decision to build a ramp into an entrance of a building when it is originally constructed, rather than to build stairs, and then later retrofit the building by adding a ramp (Dolmage, 2017).

Applied to teaching and learning in K-12 and postsecondary education contexts, universal design can be used to consider how to develop instruction that will benefit the widest range of diverse learners (Scott, McGuire, & Shaw, 2003). The term “universal design for learning” was defined within the Higher Education Opportunity Act (2008) as a “scientifically valid framework for guiding educational practice” that “provides flexibility in the ways information is presented, in the ways students respond or demonstrate knowledge and skills, and in the ways students are engaged” (Smith, 2012, p. 32). Examples of universally designed teaching include providing descriptions of images on PowerPoint slides and using captioning for audiovisual material, with the assumption that all students may benefit from these practices, regardless of whether they might identify as blind or deaf (Evans et al., 2017). A universal design approach to learning in postsecondary education could also allow all individuals to access accommodations as needed, without providing documentation of a disability (Anicha, Ray, & Bilen-Green, 2017). For

example, rather than allowing only SID to access lecture notes before class, faculty members could provide notes to all students ahead of time, so students could use them as they deem best (Evans et al., 2017).

However, a challenge to the implementation of universal design is that it remains largely out of the mainstream knowledge base of faculty and staff members who could implement flexible policies and instruction (Yager, 2015). Some researchers have documented their efforts to promote the use of universal design with faculty and staff. Park, Roberts, and Delise (2017) conducted professional development over three days on the use of universal design. In their follow up, they found that many faculty who utilized universal design approaches had also internalized a social constructionist approach to disability, rather than viewing disability from a medical perspective. In another study, Embry, Parker, McGuire and Scott (2005) conducted a workshop and focus groups with disability service providers about the implementation of universal design in postsecondary education. Service providers viewed universally designed teaching strategies as beneficial to SID, including as a means to ameliorate the stigma of identifying with a disability. Others perceived universal design as way to reduce the need for accommodations and the cost and time associated with delivering disability accommodations (e.g., professors that provide notes or designate notetakers, rather than waiting for DSO to hire a notetaker). Service providers also identified several barriers to implementing universal design, such as faculty reluctance, a lack of legal mandate, and the need for more empirical evidence of its use (Embry et al., 2005).

Universal design approaches to accommodations have also been critiqued for being too broad in both their conceptualization and application. For example, universal design suggests that people with an array of needs could be universally accommodated through broad practices

that may, in fact, not be attuned to the complexity and diversity of individual needs (Evans et al., 2017). Dolmage (2017) has offered several critiques of universal design for learning, including that it is often treated as a checklist, rather than a design process, and that it oversimplifies learning needs by suggesting that approaches are universal and offer a grand solution to meeting students' needs. Further, Ostiguy, Peters and Shlasko (2016) have argued that universal design needs to more deliberately address the intersection of identities. In other words, universal design tends to focus broadly on planning for diverse abilities, but it does not consider how someone's perceived needs or abilities are always intertwined with their racial and gender identities, class, and body sizes.

To avoid universal design continuing as a de facto means to address white, male, (dis)ability, Yuknis and Bernstein (2017) have recently suggested the need to incorporate "culturally relevant disability pedagogy" (p. 12). Similar to culturally relevant pedagogy, culturally relevant disability pedagogy is the use of practices that recognize and affirm students' differences, including recognizing how their multiple identities intersect to frame their cultural experience. Planning instruction with consideration for how students' experiences are uniquely influenced by their multiple identities is particularly important given that many students of color in particular choose not to disclose a disability identity, yet they would certainly benefit from flexible environments that support their needs (Yuknis & Bernstein, 2017).

Despite the overall increase and enrollment of SID in postsecondary education, and the use of accommodations, disparities exist in postsecondary education and employment between SID and students who are not identified with having a disability. Researchers have identified disparities in completing postsecondary education as a key factor in employment rates. Graduating with a bachelor's degree is positively correlated with gaining employment for

individuals identified with disabilities (Evans et al., 2017). However, SID have a lower rate of graduation (34%) once enrolled in postsecondary education, compared with 51% of their peers who are not identified as having a disability (Newman et al., 2011). Female SID are more likely to graduate than male SID, and SID who attended high-poverty high schools, often students of color, are less likely to enroll and graduate compared with students who attended more affluent high schools (Evans et al., 2017).

Transition and Self-advocacy

Disparities in educational and employment outcomes for SID have led to an increased emphasis in research and policy aimed at supporting SID as they transition out of high school. The term transition is commonly used within Special Education research to refer to preparing SID for changes they encounter when leaving high school to enter postsecondary education, employment, and/or living independently (Scanlon, 2008). The Individuals with Disabilities Education Act (2004) requires that school professionals who work with SID create a postsecondary transition plan and outline supports and services beginning when a student turns 16 years old. Transition supports are intended to help get students “college and career ready” (Morningstar, Lombardi, Fowler, & Test, 2017, p. 79). Researchers have attempted to identify practices that can be used in high school and beyond that will support the successful transition of students into postsecondary education. Effective transition practices that have been identified include increasing family involvement, using student-focused planning, and teaching academic and social skills (Morningstar & Mazzotti, 2014; Test et al., 2009).

One reason for a focus on supporting SID transition is because the policies and processes regarding identifying disability and providing accommodations to students differs significantly between K-12 and postsecondary education settings. In K-12 schools, SID are entitled to Special

Education services as outlined in the Individuals with Disabilities Act (IDEA). IDEA stipulates that school professionals must actively seek out and identify students with disabilities. Then, Special Education service personnel must provide SID with accommodations, curricular modifications, and related instruction services, as outlined in the student's Individual Education Program (U.S. Department of Education, 2015). SID who do not qualify for services under IDEA, but who are diagnosed with a disability by a physician, may instead receive accommodations as outlined in a 504 Plan, in accordance with Section 504 of the Rehabilitation Act.

In postsecondary education, however, the aforementioned entitlement act—IDEA—does not apply, although Americans with Disabilities Act and Section 504 do. Therefore, postsecondary schools are only required by law to not discriminate against students and to provide them reasonable accommodations; schools are not required to actively identify or seek out students who may identify as having a disability. Instead, a student must self-identify and provide documentation of a disability to the school in order to be considered eligible for disability-related accommodations. Students are commonly expected to show a history of having a disability, which may include evidence of receiving Special Education services in K-12 schooling, physician or psychoeducational evaluations, and self-reporting from students (McGregor et al., 2016; Weis, Erikson, & Till, 2017). Securing accommodations may be particularly difficult for SID from families with limited financial resources, who may be less likely to provide medical documentation, provide consistent support for the student during the transition, or pay for additional supports or documentation not provided by the institution (McGregor et al., 2016).

Another reason why researchers emphasize SID's need for support in transitioning into postsecondary education is due to the differences in the academic environment and support systems compared with high school (DaDeppo, 2009; McGregor et al., 2016). In high school, students are more likely to be enrolled in smaller classes and frequently have structured student-teacher interactions. Further, while postsecondary students may receive similar accommodations to what they received in high school education (e.g., extended time for completing a test), they are no longer eligible for related services (e.g., speech/language therapy) or the comprehensive supports previously provided by an interdisciplinary team of school professionals (DaDeppo, 2009). Transition challenges may contribute to students identified as having a disability choosing smaller community colleges at higher rates than students not identified as having a disability due to the smaller class sizes and more individualized supports. However, Garrison-Wade and Lehmann (2009) suggest that supports in community colleges remain inconsistent, leading to many of the same challenges as those that occur at larger schools.

Special Education researchers commonly assert that for SID to successfully transition into a new context and often disclose a disability, they need to develop a sense of self-determination and specific self-advocacy skills. While there is no singular definition for self-determination, Field, Martin, Miller, Ward and Wehmeyer (1998) have described it as, "a combination of skills, knowledge, and beliefs that enable a person to engage in goal-directed, self-regulated, autonomous behavior" (p. 2). Field et al. (1998) write that those who are self-determined must have "an understanding of one's strengths and limitations together with a belief in oneself as capable and effective..." (p. 2). At a more basic level, Field and Hoffman (1994) proposed a model of self-determination that includes five components: know yourself, value yourself, plan, act, experience outcomes, and learn.

Self-determination is thus constructed as a characteristic rooted in certain skills and knowledge and viewed as essential for individuals with disabilities to have control in their lives, not only as students, but throughout their lifespan. Sarver (2000) found a positive correlation between self-reported self-determination and GPA in a study of university SID, leading the author to suggest that self-determination is a useful set of characteristics for academic success (Sarver, 2000). Helping students to develop characteristics of self-determination is viewed by some researchers as a key component of a successful transition from high school to postsecondary education for SID (Ankeny & Lehmann, 2011; Landmark & Zhang, 2012).

Self-advocacy has been described as a manifestation of self-determination, especially in the context of postsecondary education. Holzberg et al. (2018) characterize self-advocacy as an “individual’s ability to effectively recognize and articulate one’s needs and rights” (p. 2). The authors further assert that self-advocacy is “a key skill in facilitating transition of individuals with disabilities” (p. 2). Offering another definition, Schreiner (2007) writes that self-advocacy is “the ability to speak up for what we want and need” (p. 300). Test, Fowler, Wood, Brewer and Eddy (2005) have suggested four components of self-advocacy, including knowledge of self, knowledge of rights, communication and leadership. For knowledge of self, the authors include examples such as strengths, accommodation needs, and interests, while knowledge of rights include personal rights, knowledge of resources, and steps to advocating for change. Examples of communication include assertiveness, persuasion, and compromise. Finally, examples of leadership include organizational participation, political action, and advocating for others or for causes (Test et al., 2005).

Self-advocacy has been identified as an important skill, gained through acquiring knowledge and practicing communication, which should be taught explicitly by professionals

working with SID in secondary and postsecondary education settings. Field, Sarver and Shaw (2003) assert that self-advocacy for SID is particularly important in postsecondary because of the decreased structure and support systems when compared to high school. Further, as Sarver (2000) writes, demonstrating knowledge of one's self and rights through communication may be challenging to many students, especially those who are not used to discussing their disability and needs.

Researchers who frame disability from a medicalized perspective (often in the fields of Special Education and psychology, among others) tend to refer to students' disabilities, or lack of certain abilities (i.e., self-advocacy skills) as primary explanations for SID's challenging experiences and negative outcomes. For example, when describing students identified with learning disabilities, Weis et al. (2016) write that "Once in college, these students often continue to struggle academically. Most show normative deficits in academic skills, underlying cognitive processing problems, and difficulty completing degree requirements" (p. 684). Merchant and Gajar (1997) write that SID's high rates of dropping out of postsecondary education indicate that "they need to be taught a variety of academic and self-advocacy skills" (p. 223). Or, as Eckes and Ochoa (2005) write, "many students with disabilities leave high school without the self-advocacy skills they need to survive in college" (p. 6). When students are viewed as having a deficit in a characteristic, supporting student success is often characterized as requiring special adjustments to the environment. As Troiano, Liefeld, and Trachtenberg (2010) write, "Students with disabilities require *special* support in order to integrate academically and socially to college life," (p. 36, emphasis added). These examples are illustrative of a common theme within research that emphasizes transition as a challenge which SID must rise to meet by gaining certain knowledge, abilities, and skills (e.g., self-advocacy) that will allow them to integrate

successfully, demonstrated through characteristics and outcomes that more closely align with their peers who are not identified as having disabilities.

Perspectives within the field of Disability Studies contrast with Special Education approaches to transition and self-advocacy by shifting the focus from the impact of disability, to focus on factors in the sociocultural environment which can be enabling or disabling (e.g., Cowley, 2016). Research on transition in Special Education implicitly suggests that the postsecondary environment is fixed, and SID must learn how to negotiate this context or fail. Within Disability Studies and social justice frameworks in postsecondary education, the conditions that make postsecondary education a difficult transition are not viewed as inevitable. Instead, researchers critically examine “attitudinal, organizational, and physical barriers impeding success” and “the role of people who are not disabled in creating and maintaining social systems, policies, and norms that circumscribe the lives of individuals with disabilities” (Evans et al., 2017, p. x). For example, the extent to which faculty members are flexible and accepting when responding to requests for accommodations, or the frequency with which inaccessible campus events are held, are examples of the variability of the context into which SID transition. Or, as Taylor (2011) has suggested, the existence of Disability Studies courses at universities which teach about the sociocultural aspects of disability, can attract more SID and help build both a climate where students understand disability as a political identity and as a valued form of diversity at their school.

Within Disability Studies perspectives, addressing challenges in the context of transition requires deliberate efforts to reduce barriers to meaningful access by making changes to the environment into which SID transition. Dolmage (2017) has argued that ableism in postsecondary education is built upon practices and attitudes that maintain narrow views about

how students demonstrate ability or intelligence. Ableism is evident when disability is unexpected or unwanted, reflected in characterizations, such as the one above, that the SID require ‘special’ support to succeed. Alternatively, if SID are considered as a part of the diversity of postsecondary students, then the focus for many in Disability Studies is to critically examine how postsecondary schools respond, or fail to respond, to the diversity of their students (Kim & Aquino, 2017).

A Disability Studies framework also offers a different way of considering the construct of self-advocacy. Within Special Education research, self-advocacy is presented as a discrete set of skills, or as an *ability*. While Disability Studies researchers often acknowledge the real difference in student characteristics, a central critique within Disability Studies is of how SID are framed within Special Education as lacking abilities, or needing remediation, before they can be successful (Baglieri et al., 2011). From a Disability Studies perspective, taking the notion that people benefit from advocating for their needs, and ascribing it as an attribute that certain people lack, is indicative of a medicalized response to disability (Linton, 2010). A medicalized view of self-advocacy frames barriers to success for SID as resulting from something that they lack, rather than from a postsecondary environment that is oppressive. Wehmeyer (2015), a Special Education researcher and longtime proponent of the constructs of self-determination and self-advocacy, recently acknowledged the need to move away from a deficit view of disability, to instead understand disability as “a gap between the person’s strengths and the demands of the environment or context” (p. 21).

One way in which the needs of SID are addressed within the current approach to disability in postsecondary education is through utilizing disability-related accommodations. To conclude the first half of this chapter, I discuss one of the central factors SID experience in

accessing accommodations – disclosing a disability. The term disclosure generally refers to SID's decision, albeit a constructed decision, to reveal a disability identity. I focus on research related to postsecondary students' experiences disclosing a disability and requesting accommodations during interactions with faculty members. I also review research that examines the perspectives of faculty members towards SID and accommodations. Finally, I share critical perspectives from Disability Studies related to the issue of disclosure.

SID, Faculty Members, and Disclosure

As I have noted, a key aspect within the biomedical approach to disability and accommodations in postsecondary education is that students reveal that they have a disability and provide documentation to support their claim. The decision whether to disclose a disability and seek accommodations may have significant consequences for students. McGregor et al. (2016) found that students who receive accommodations reported increased contact with faculty and less difficulty with completing course assignments. Further, SID who utilize accommodations have been found to have higher rates of graduation than students who identify with a disability but do not use accommodations (Salzer et al., 2008). However, the number of students who identify with a disability but do not receive accommodations is significant. For example, McGregor et al., (2016) found that in a survey of almost 4,000 university students at public universities, only 33% percent of those who self-reported a learning disability were also receiving accommodations.

Some researchers have examined factors that might be discouraging students from either registering with their school's Disability Services Office (DSO), or from not utilizing accommodations after they do register. Beck, Diaz del Castillo, Fovet, Mole, & Noga, (2014) suggest that service delivery models and structures at a postsecondary institution may deter

students from registering as a SID and seeking accommodations. They argue that aspects of the process, such as completing paperwork and needing to be physically present, may discourage students from registering with a DSO. Another factor that may discourage SID from formally seeking accommodations is the grounding in the medical model often communicated by the various structures in DSOs, such as a ‘waiting room,’ the need for an appointment, and the requirement for formal medical documentation of disability (Beck et al., 2014). Beck and colleagues’ (2014) focus on making a DSO less medicalized was driven by an aspiration to make accessing accommodations and resources a more comfortable and less stigmatizing experience. Thornton and Downs (2010) offer an example of working with the DSO to shift the structures away from reflecting medicalized approaches to disability, leading to the renaming of a DSO to the university’s Disability Resource Center.

Lyman et al. (2016) interviewed SID who had registered with their school’s DSO but were not utilizing accommodations. The researchers reported several factors that participants identified as contributing to not using accommodations. For example, participants indicated their desire to only use accommodations as a back-up, and to avoid being treated differently than others. Participants also raise doubts about the usefulness of accommodations, and indicated negative experiences with faculty, including expressing fear of damaging their relationship with faculty members by using accommodations. Similarly, the SID in Denhart’s (2008) study expressed reluctance to request accommodations because of a fear of how they would be perceived by faculty members. Students’ concerns about faculty members point to another level of disclosure beyond the institutional level (i.e., DSO) – disclosing a disability identity to individual faculty members and negotiating accommodations.

As I mentioned earlier, SID are commonly expected to communicate directly with faculty members about utilizing disability-related accommodations. Shallish (2017) has likened disclosure for SID to the experiences of ‘coming out’ for Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) students. Regardless of whether students identify with a specific disability when communicating with faculty members, they are revealing a personal identity, exposing themselves to judgment or assumptions. Many LGBTQ individuals feel pressure to ‘pass’ by demonstrating normative sexual and gender identities. Similarly, the desire to be self-sufficient, or to avoid negative reactions as reported by participants in a Lyman et al. (2016) study could be understood as an attempt to pass as able-bodied.

Nevertheless, many SID do disclose their disability identity to faculty members when seeking to use accommodations. SID have reported that their interactions with faculty are generally positive and that most faculty agree to fulfill accommodation requests (Lyman et al., 2016; Marshak, Van Wieren, Ferrell, Swiss, & Dugan, 2010). Students typically meet with faculty members, making a formal request in the form of delivering an accommodations letter from their university’s DSO. Cole and Cawthon (2015) found that SID who perceive faculty members as having a more positive view towards disability were more likely to engage in conversations about their accommodations, rather than simply delivering a letter requesting accommodations.

However, students have also reported that faculty members are sometimes difficult or unwilling to fulfill students’ request for accommodations (Cawthon & Cole, 2010; Kurth & Mellard, 2006). Students in Kurth and Mellard’s (2006) study reported feeling discriminated against by faculty, interpreting faculty as perceiving them as incompetent or that they did not belong in the course. Lyman et al. (2016) have suggested that negative initial encounters with

faculty members may contribute to why SID do not communicate frequently with faculty members after initially disclosing their disability identity. SID who responded to Albanesi and Nusbaum's (2017) survey expressed that faculty member's willingness to implement accommodations varied and that faculty members sometimes did not respect the confidentiality of students' disability identity (i.e., making the entire class aware). One student also reported that faculty members "use condescending language" towards SID and "make demeaning remarks" about disability (Albanesi & Nusbaum, 2017, p. 191). Other students suggested that faculty needed training regarding disability and accommodations.

Students reporting that faculty are unaware of disability-related accommodations is not surprising given that several studies report faculty are unfamiliar with disability identities and accommodations and often have not received training about how to accommodate SID (Burgstahler & Moore, 2009; Gladhart, 2010; Sniatecki, Perry, & Snell, 2015). Faculty members may not be aware, for example, of students' desire to maintain confidentiality of their disability status, may be uncomfortable with interacting with SID, or may perceive students negatively because of their disability identity (Burgstahler & Moore, 2009). Zhang et al. (2010) have suggested that faculty members' needs for supporting SID are an institutional problem, as many faculty members in their study reported that their schools did not provide strong support for delivering accommodations.

However, studies also suggest that faculty members consider themselves to have positive attitudes toward SID and are willing to provide accommodations (Becker & Palladino, 2016; Murray, Wren, Stevens, & Keys, 2009). In a survey of 127 faculty members, Becker and Palladino (2016) found that a majority of faculty agreed that accommodations for SID are fair (80%) and a lesser majority (64%) agreed that faculty members should make accommodations to

allow SID to fully participate in postsecondary education. As one faculty member responded, “I see my role as a facilitator of their success,” while another responded that they perceived their role as making sure “the students understand the instructor is available and willing to help them succeed in the courses I teach” (Becker & Palladino, 2016). Faculty members are diverse in terms of both the attitudes they have towards disability, training or previous experiences, and willingness to accommodate SID requests.

Considering communication between SID and faculty members at a systemic level, researchers have questioned whether the expectation that students disclose their identity directly to faculty members and negotiate accommodations is itself an inappropriate, oppressive expectation (Dolmage, 2017; Hutcheon & Wolbring, 2012). Hadley (2011) has suggested that, from a student development point of view, the expectations to initiate conversations with faculty members encourage SID to grow academically and socially through developing relationships with faculty members. A student from Cole and Cawthon’s study (2015) reflected positively about the routine of discussing accommodations directly with faculty members, sharing that “it’s helped...to have the professor know me to some certain extent, so he knows that I struggle with reading, so he’s on my side to help me, he knows when I come to office hours, and when I turn in a paper, so that’s good” (p. 172).

In contrast, students in other studies have characterized the process of meeting with faculty members as negatively impacting their relationship (Albanesi & Nusbaum, 2017; Lyman et al., 2016). Discussing the process of meeting with faculty members to request accommodations, one student in a study by Lyman et al. (2016) described the detrimental impact these conversations have. The student shared that “I guess we’re supposed to, as part of the academic process, develop relationships with professors, and a good way to destroy that is to

always have to ask for accommodations” (Lyman et al., 2016, p. 130). Gabel (2010) asserts that the process of delivering accommodations by making students self-identify as having a disability is not conducive to creating meaningful participation for SID in postsecondary education.

Proving that one has a disability and then requiring that students disclose their disability not only places a burden on the individual that other students do not experience, but it also reifies the idea that disability is an essential characteristic (Gabel, 2010). In other words, the process places SID in a position in which they must present themselves to faculty members as having a deficit, rather than as needing accommodations because of the barriers in the instructional and physical environment.

In the first section of this chapter, I have reviewed research related to the population of this study – students identified as having a disability (SID) – in the context of postsecondary education. I have also provided an overview of the process with which accommodations are provided to SID, and then I discussed research about the experiences of SID when disclosing their disability identity to faculty members. Throughout the chapter I have included perspectives from researchers within the field of Disability Studies who are critical of the ways disability and accommodations are conceptualized and delivered in postsecondary education.

In the next section of this chapter, I discuss research related to the design I have chosen for this study – clinical simulations. I begin by defining what clinical simulations are by tracing their origins in medical education. I then discuss how researchers have adapted the model of clinical simulations from medical education, for use in teacher education. I describe theoretical and conceptual frameworks – including situated cognition and core pedagogy – which ground the design and intent of using clinical simulations. I provide several examples of studies in which clinical simulations have been used in teacher education, to help the reader become familiar with

the characteristics of the design of this study. Finally, I discuss some of the limitations of using clinical simulations.

Using Clinical Simulations for Research and Practice

This study is designed to use a clinical simulation to investigate how students identified with a disability (SID) engage in and reflect upon participating in a simulated discussion about disability-related accommodations with a standardized faculty member. The model of clinical simulations that I use involves asking participants to engage in a face-to-face meeting with actors who have been carefully trained to portray a single character in a standardized fashion (Dotger, 2013; Dotger, 2015). A simulation can give participants the opportunity to practice engaging in an authentic situation. Before further discussing the model of clinical simulations that I use in this study, I provide some background on the origins of clinical simulations and their use in medical education.

The origins of clinical simulations in medical education. Clinical simulations have been used since the 1960s to train novice medical students. Developed by neurologist Howard Barrows (Barrows, 1993), a clinical simulation is an example of an objective, structured clinical experience employed by medical educators to prepare medical students with important diagnostic and treatment skills (Wilson & Rockstraw, 2012). Each simulation is a carefully planned experience for medical students, in which they encounter standardized patient(s) in a simulation room designed to look like a medical examination room, typically on the campus of a medical university. In the simulation room, participating medical students are faced with a patient who is trained to communicate a problem that is indicative of an authentic situation. The medical students are asked to respond using their best professional judgment. The intent of a clinical simulation is to provide a low-risk, minimally threatening environment for medical

students to practice core professional skills and apply theoretical principles (Comer, 2005). Unlike other forms of assessment, such as written examinations or laboratory work, a clinical simulation allows medical educators to contextualize the assessment; being placed in the context of a specific situation allows novice learners to recognize different types of patient characteristics that may alter the manner in which care is provided (Bambini, Washburn, & Perkins, 2009). Clinical simulations are widely used around the United States to train future physicians and nurses to develop core competencies needed for success as medical professionals (Bambini et al., 2009; Wilson & Rockstraw, 2012).

A distinguishing element of the clinical simulation model that Barrows (1993) developed is the use of standardized patients (SPs). SPs refer to individuals who have been carefully trained to enact a character in the simulation (i.e., by presenting health information and/or a medical concern to the physician). The actors portraying patients are standardized in that they are trained to present an illness or medical concern in a standard and consistent manner, without variation, to all participating novice learners. Consistent behavior can refer to each SP enacting the same behaviors and presenting the same health information each time they participate in the simulation, and it can also refer to the consistency of behaviors across different SPs (Beullens, Rethans, Goedhuys, & Buntinx, 1997). The primary purpose of using SPs is that medical educators can create pre-determined situations, structuring problems that they want medical students to encounter. Unlike real patients, SPs are coached to both present specific problems and be prepared to respond to a range of actions and decisions from medical students (Barrows, 1993). Medical students have reported that they find the SPs to be authentic patients 99% of the time. However, when practicing physicians have participated in clinical simulations, some

physicians have noted that SPs ask more questions and are more assertive than typical patients (Beullens et al., 1997).

In addition to serving as an educational tool that allows medical students to practice engaging with patients, clinical simulations are also used as both formative and summative assessments. As a formative assessment, clinical simulations are used to evaluate students in medical school. Faculty members often observe the interaction between the medical student and the SP via a video stream from a wall-mounted camera in the simulation room. Faculty members typically evaluate the performance of each medical student using a checklist or rating scale which focuses on the behaviors that are relevant to the given situation (Epstein, 2007). Students then often participate in a structured debriefing in which they are asked to reflect on their participation in the simulation, either one-on-one with a supervisor and/or with a group of other students (Cantrell, 2008). SPs are also trained to evaluate the behavior of the novice physician based on pre-determined criteria (Beullens et al., 1997). As a summative assessment, clinical simulations are used as part of licensure examinations, such as the U.S. Medical Licensing Examination administered by the National Board of Medical Examiners, which all senior medical students must take (Epstein, 2007; Larew, Lessans, Spunt, Foster, & Covington, 2006). Research suggests that simulations can help students develop knowledge, skills, and confidence related to their performance as novice medical professionals (Bambini et al., 2009; Epstein, 2007).

As an educational tool, clinical simulations allow educators to examine how medical students react, in real-time, to specific problems presented to them (Beullens et al., 1997). At the same time, clinical simulations also come with limitations. There are many problems (e.g., illnesses) that cannot be realistically depicted with the use of SPs. Some illnesses that can be

depicted may still run the risk of appearing artificial in the context of the simulation setting. There are also practical challenges of using simulations which may limit their use. Compared with written examinations or direct observations by supervisors, clinical simulations are a time-consuming and expensive form of assessment. Hiring and training actors requires time, money, and facilities (Epstein, 2007). Another limitation is that it may be difficult to find SPs who can portray the needed demographic and have the skills to realistically present attitudes and affect (Beullens et al., 1997). Despite these challenges, clinical simulations remain a longstanding clinical approach used to create problem-based learning opportunities and to assess medical and nursing students.

Clinical simulations in teacher education. While clinical simulations have long been used in medical schools as a learning and assessment tool, Barrows' (1993) clinical simulation model has recently been adapted and used within the field of teacher education (Dotger, 2013). Teacher education generally refers to postsecondary education programs in which students, referred to here as pre-service teachers, enroll to attain professional teaching licensure in one of the 50 United States. Researchers in teacher education have asserted the need to reform entrenched models of teacher education by shifting the curriculum from its emphasis on theoretical and philosophical commitments to instead also focusing on teaching the knowledge, skills, and dispositions needed for professional practice in schools (Ball & Forzani, 2009; Cochran-Smith, Villegas, Abrams, Chavez-Moreno, Mills, & Stern, 2015). Further, Ball and Forzani (2009) suggest that traditional models of teacher education have vastly different pre-service experiences and therefore rarely have a shared context for which to identify and engage in effective instructional practices. Arguing for the use of clinical simulations in teacher education, Dotger (2015) has suggested that simulations can serve as a tool to create a shared

context for pre-service teachers to practice the synthesis of knowledge, disposition, and instructional practices they will need as teachers.

Clinical simulations in teacher education were developed at Syracuse University and initially focused on developing pre-service teachers home-school communication skills by developing simulated parent-teacher conferences (Dotger, 2009). Dotger's (2013) model of using clinical simulations for teacher education retains many of the characteristics of simulations in medical education. Similar to the use of standardized patients in medical simulations, clinical simulations in teacher education employ trained actors, referred to as standardized individuals. Standardized individuals are trained to present a specific problem or challenge to pre-service teachers in a consistent manner, providing an opportunity for pre-service teachers to practice responding to an authentic professional situation. For example, the *Donald Bolden* simulation involves a standardized individual portraying a parent who initiates a meeting with his daughter's teacher (the participating pre-service teacher) to share that his daughter is experiencing emotional distress and to ask the teacher for support. Other simulations involve meetings initiated by the participating pre-service teacher such as the *Jenny Burton* simulation, in which the pre-service teacher is asked to share concerns about Jenny Burton's son's classroom behavior and academic performance (Dotger, 2013).

Pre-service teachers taking part in clinical simulations engage with this standardized individual in a simulation room, which has typically been the same facility used for medical simulations at a medical university. A single clinical simulation typically lasts between 10 and 20 minutes and is recorded by wall-mounted video cameras (Dotger, 2013). After participating in a simulation with a standardized individual, pre-service teachers typically participate in debriefing in which they reflect on the simulation in a small group discussion, facilitated by a

faculty member. Then, pre-service teachers are provided access to a video of their simulation and often asked to reflect on their participation in the simulation and to share aspects of their reflections with their peers who engaged in the same simulation (Dotger, 2013).

Dotger's (2015) model involves the creation of two protocols to design and execute each clinical simulation. The Teacher Interaction protocol is typically given to pre-service teachers one week before the simulation. This document provides a general context for the simulated situation in which the pre-service teachers will engage. The purpose is to provide pre-service teachers with "enough relevant information to situate them in the simulated environment, without placing them in any deficit position at the onset" (Dotger, 2015, p. 217). In other words, pre-service teachers become aware of the context and a sense of the potential conflict or situation that they will address, but they do not receive so much information that essentially scripts the students or causes them to develop a pre-determined solution which might narrow how they respond to the standardized individual (Dotger, 2015).

The other protocol is the Standardized Individual protocol, which is given to the standardized individual and used for simulation training purposes. In contrast to the broader description provided to the pre-service teachers, the standardized individual's protocol provides very specific information. In addition to helping the standardized individual understand the broader character they will enact, one key aspect of the standardized individual protocol is specific verbal and behavioral prompts, referred to as triggers. Triggers include specific statements, questions, or mannerisms which the standardized individuals are expected to present and embody during the simulation. Using the standardized individual protocol, actors receive training on the use of triggers and on their character's background, typically about one week prior to the simulation (Dotger, 2015). In order to create protocols that will lead to an authentic

context (i.e., that reflects a professional context), Dotger (2015) suggests collecting data from multiple sources, such as collecting input from experienced teachers, consulting professional literature, and soliciting input directly from pre-service teachers.

Dotger (2013; 2015) argues that clinical simulations offer opportunities that are not afforded through typical clinical experiences (e.g., student teaching) in teacher education programs. First, clinical simulations offer a low-risk opportunity for practice. Pre-service teachers can practice addressing problems and engaging with people from different backgrounds without the consequences that would accompany a professional context. Second, clinical simulations create context that is not common in clinical aspects of teacher education. Typically, pre-service teachers engage in clinical experiences in separate contexts, each with their own set of challenges and characteristics. Clinical simulations provide a shared, standardized context with which pre-service teachers can practice engaging in the same professional situation. The accompanying debriefing also provides a shared context with which participants can reflect together about how they navigated the problem they faced, comparing strategies and responses (Dotger, 2015).

Theoretical and conceptual frameworks of clinical simulations for teacher education. The use of clinical simulations is underpinned by conceptual and theoretical frameworks. I now review relevant frameworks that provide a rationale for the use of clinical simulations and decisions about their design and implementation. I first discuss the conceptual frameworks of Barrows' design tenets for clinical simulations, followed by the concept of signature pedagogies. Then I discuss the theoretical perspective of situated cognition. For each section, I discuss the relevancy of the framework for Dotger's (2013) model of clinical simulations.

Howard Barrows' tenets for designing clinical simulations. As mentioned, Howard Barrows first developed clinical simulations in the 1960s for medical simulations. As the use of clinical simulations expanded in medical education, Barrows outlined a framework for designing simulations. Barrows (1987) defined four design tenets for framing the purpose and nature of simulations: *prevalence*, *clinical impact*, *instructional importance* and *social impact*. Prevalence refers to designing simulations around problems that medical professionals would most commonly encounter in practice. In contrast, a focus on clinical impact addresses problems that only arise on rare occasions but are highly impactful. Instructional importance suggests that some simulations should be designed with a focus on very specific skill sets. Social impact emphasizes conducting simulations which have significant impact on a certain individual or social group (Barrows, 1987).

Together, Barrows' tenets suggest a framework to consider the diverse purposes for the deliberate use of clinical simulations. While these tenets were intended to guide medical educators, they have also been used to frame the design of clinical simulations in teacher education. Dotger (2015) describes how he has drawn on Barrows' tenets in a number of simulations he developed and implemented with pre-service teachers. For example, in a simulation entitled *Casey Butler*, a pre-service teacher encounters a student who threatens violence against another student. This situation is framed in the tenet of *clinical impact*, since it may not be a common situation but has potentially severe consequences for the safety of students. In the *Jenny Burton* simulation, a pre-service teacher encounters a parent who is concerned about her child's grades and asks the pre-service teacher how she might better support her child at home. This simulation is framed in Barrows' tenet of prevalence, because communicating with a parent about their child's performance is a common aspect of teaching.

While it is not necessary to select a single tenet to frame a simulation, Barrows' conceptual framework can be used to inform the purpose of simulations and for choosing the type of problem to engage novice learners in via the simulation.

Lee Shulman's concept of signature pedagogies. The long-standing use of clinical simulations in medical schools is an example of what Shulman (2005a) calls *signature pedagogies*, or “a mode of teaching that has become inextricably identified with preparing people for a particular profession” (Shulman, 2005b, para. 24). The use of such pedagogies is intended to “organize the fundamental ways in which future practitioners are educated for their new profession” (Shulman, 2005a, p. 52). More specifically, signature pedagogies are used to instruct novice learners with “critical aspects of the three fundamental dimensions of professional work –to think, to perform, and to act with integrity” (Shulman, 2005a, p. 52). These core pedagogies that are used to prepare future professionals can be found across multiple professions, such as clinical simulations in medical education and the structured dialogue of legal case methods in legal education.

Shulman (2005a) distinguishes signature pedagogies from other practices in that they increase students' accountability and often place them in situations in which they are uncertain. Shulman (2005b) argues that this uncertainty can create *adaptive anxiety*, a productive emotional vulnerability that helps students to build their capacity to respond to different situations. By practicing through the use of signature pedagogies, Shulman (2005b) argues that teachers can benefit from the uncertainty, engagement, and formation. Uncertainty refers to the idea that teachers must be able to use practices in which they will not be able to fully predict the reactions of their students; they must embrace uncertainty as a part of teaching and be prepared to react. Engagement refers to the importance of pre-service teachers having an engaged, active role as a

learner in professional preparation. Formation refers to methods of teaching that help teachers build an identity, as well as certain dispositions about the way they act professionally.

Dotger (2009; 2015) has drawn on Shulman's conceptual framework to propose the use of clinical simulations as a signature pedagogy for teacher education. Citing several examples of the application of clinical simulations at several teaching and research institutions in the United States, he suggests that simulations place students in real-life professional situations in which they must engage, experience uncertainty, and begin to formulate a professional identity. When participating in a simulation in teacher education, pre-service teachers must engage with students, parents, or colleagues (as portrayed by standardized individuals) and no longer have the option to remain passive, as they might in a traditional pre-service education classroom discussion. In doing so, they experience the uncertainty of being a novice and having to make a decision in the moment about how to best handle a professional situation. Further, participating in simulations allows students to reflect on their actions and develop their identities as novice professionals. Through this framework, Dotger (2015) argues that clinical simulations are a promising core pedagogy (i.e., signature pedagogy) in which to help pre-service teachers foster the key skills and dispositions needed in their professional careers.

Situated cognition. Situated cognition is a learning theory that emerged in the late 1980s and is an evolving theoretical perspective that seeks “to understand learning in both its individual and social aspects” (Kirshner & Whitson, 1998, p. 22). Advocates of situated cognition attempt to bridge the individual and social aspects of learning by promoting the idea that learning is a social process. In this sense, learning occurs through “relations among people engaged in activity in, with, and arising from the socially and culturally structured world” (Lave & Wenger, 1991, p. 67). The key element of situated cognition is the underlying premise that learning occurs

in situ; learning cannot be abstracted from the situation in which it occurs. Instead, learning is interrelated with the given social and cultural context.

The theoretical roots of situated cognition are in critical anthropology and sociocultural theory (Kirshner & Whitson, 1998). Situated cognition posits that learning is, at its core, a social process (Lave & Wenger, 1991). This view directly counters purely cognitive theories of learning that assume that learning occurs irrespective of social circumstances (Brown, Collins, & Duguid, 1989). Accordingly, situated cognition proposes that learning occurs through participation in the social world, and more specifically, within specific communities of practice. Lave and Wenger (1991) describe this process as *legitimate practical participation* (LPP). LPP refers to how learning occurs as part of a process in which individuals move towards full participation in the sociocultural practices of a given community. Similarly, Brown et al., (1989) conceptualize this as a process of enculturation, in which learning involves a gradual familiarity with the cultural practices of a discipline (e.g., mathematician, historian). To situated cognition theorists, this creates a pedagogical challenge for teachers to create opportunities, or what Brown and colleagues (1989) call ‘authentic activities’, which foster both knowledge and skill acquisition through enculturation. Without such deliberate efforts, students are apt to enter into a singular enculturation that is inauthentic to the majority of the professional practices – that of a student in a school community.

Dotger (2015) has drawn on situated cognition to suggest that as a pedagogy for teacher education, clinical simulations have an inherently situated nature which offer important opportunities for pre-service teacher learning. In particular, Dotger (2015) argues that simulations position pre-service teachers in a professional situation which requires that they engage with the distinct questions and concerns of another human being. Following Lave and

Wenger's (1991) concept of LPP, simulations in teacher education can therefore be understood to increase the participation of a student in the sociocultural practices of a professional community. This enculturation into the teacher community is also consistent with Shulman's (2005a) ideas about signature pedagogies – they reveal elements about the cultural expectations of professions in which they are used.

Each of the three frameworks I have discussed in this section – design tenets for simulations, signature pedagogies and situated cognition – have to various degrees informed the work of educators and researchers who use clinical simulations. A common idea across these frameworks is that individuals learn through experiences that ask them to both engage with an authentic problem and enculturate them into elements of professional practice. I now discuss empirical research reporting the use of clinical simulations.

Research using clinical simulations in teacher education. As mentioned earlier, clinical simulations were first used in teacher education to provide pre-service teachers with the opportunity to practice parent-teacher conferences. In 2008, Dotger, Harris, and Hansel (2008) published an article detailing the creation of simulated conferences between standardized parents and pre-service teachers. The context most frequently examined in researchers using clinical simulations is how pre-service teachers engaged with standardized parents through simulations (e.g., Dotger, 2010; Dotger, Harris, Maher, & Hansel, 2011; Walker & Dotger, 2012). These studies have helped to illuminate issues such as the emotional nature of navigating school-family partnerships for pre-service teachers (Dotger et al., 2011), and the range of strategies that pre-service teachers respond with when faced with a standardized parent (Walker & Dotger, 2012).

Dotger's (2010) study of parent-teacher simulations differs from other studies both in scope and intent. Whereas clinical simulations are typically used as an opportunity for practice,

the purpose of this particular study was to examine how simulations could be used as an intervention to address the growth and development of professional dispositions. Pre-service teachers participated in a series of six simulations over the course of fifteen weeks. In these simulations, pre-service teachers interacted with SIs portraying parents who present pre-service teachers with a number of challenges related to their children's school and home life, such as the emerging emotional issues of a daughter or the difficulties of raising a child as a single parent. Using a racial sensitivity test and multicultural attitude survey, the author found that awareness and sensitivity towards unfamiliar sociocultural contexts was raised for pre-service teachers by the end of the series of simulations. Dotger (2010) suggests that the use of simulated parent-teacher interactions such as these can be a valuable tool in developing awareness of pre-service teachers and their ability to respond to individuals whose identities are different from their own.

Other studies have focused on using simulations for pre-service teachers in specific disciplinary concentrations. Dotger, Dotger, and Tillotson (2010) examined how pre-service science teachers responded to a simulated parent-teacher interaction in which the standardized parents questioned the pre-service teacher's teaching of evolution and suggested an alternative curriculum focused on intelligent design. When analyzing videos of the simulations, the authors found that the simulation helped them, as teacher educators, to gain a stronger understanding of how pre-service science teachers define what counts as scientific and how they justify curricula choices. In another study, Dotger, Masingila, Barkland, and Dotger (2015) conducted a simulation in which mathematics pre-service teachers encounter a standardized high-school student who had come to see them for help with homework in algebra class. The resulting data from this simulation was illustrative of how pre-service teachers make instructional decisions and use context to explain mathematical concepts.

Clinical simulations in teacher education have also been used to examine the identity development of pre-service teachers. Dotger and Smith (2009) sought to understand how teachers formulate their identity in relation to participation in simulations. The authors examined simulation videos, class debriefings, and written reflections from 13 pre-service teachers who participated in the *Donald Bolden* simulation. Several pre-service teachers in the study reported feeling unprepared to respond to the concerns of the standardized parent. Further, participating pre-service teachers expressed how the experience changed how they thought about the identity of being a teacher, mostly through expanding their ideas about the role of a teacher as a professional. Dotger and Smith (2009) suggest that participation in clinical simulations can help participants to formulate an ongoing professional identity and can help researchers understand the process of identity formulation.

Sometimes, simulations have yielded results that may be unsettling to teacher educators because they reveal potential shortcomings or limitations of current teacher preparation programs. For example, Cil and Dotger (2015) designed and implemented a simulation in which standardized individuals enact two concerned parents who, at the request of the pre-service teacher, come to a parent-teacher conference about their daughter. The authors found that the pre-service teachers tended to rely overwhelmingly on their personal experiences when making decisions in the meeting with parents, and they had difficulty empathizing with the parents' concerns. The pre-service teachers very quickly changed their decisions about handling the conflict when the standardized individual applied some pressure to the situation (Cil & Dotger, 2015). Similarly, Dotger and Ashby (2010), found that pre-service teachers who were trained to enact inclusive educational practices, quickly yielded to the request of a standardized

paraprofessional that students identified with disabilities be removed from the general education classroom.

Despite the many uses of clinical simulations in teacher education, there are limitations and challenges. Similar to medical education, clinical simulations require an investment in time, as well as money for technology, facilities, and SIs. Additionally, it is unclear whether participating in a single simulation will have a significant impact on a participant in terms of their future identity and actions (Dotger, 2015). More longitudinal research studies involving multiple simulations, which track pre-service teachers after they enter the field as novice teachers, are needed to better determine if and how simulations can have an impact on students developing knowledge, skills, and dispositions (Cil & Dotger, 2015).

Conclusion

In this chapter, I have reviewed two broad areas of literature: 1) research related to students identified as having a disability who receive accommodations in postsecondary education, and 2) the use of clinical simulations in medical and teacher education. Research about SID in postsecondary education illustrates that students report a variety of negative experiences related to using disability-related accommodations, including the elements of communicating with faculty members about their disability identity and accommodations. While clinical simulations have been used as a tool to examine approximations of real-life encounters, no studies have used clinical simulations to examine aspects of the experiences of SID in postsecondary education. However, using clinical simulations to study SID, including their conversations about accommodations with faculty members, raises a number of tensions with the theoretical frameworks I discussed in the first chapter. I therefore begin the next chapter by providing a discussion of my attempt to bring together clinical simulations and Disability Studies

frameworks to develop the methodology that I used to examine discussions between SID and a simulated faculty member.

Chapter Three:

Methodology (Simulation Design)

My decisions about using a clinical simulation model reflect the *methodology* of my study. Drawing from Crotty (1998), I understand research methodology to be the design of a study which is rooted in certain beliefs about how knowledge is created (i.e., epistemological perspectives), and how phenomena can be explained (i.e., theoretical perspectives). Informed by certain epistemological and theoretical views, a selected methodological approach then provides the rationale for making certain choices, and not others, in carrying out the methods of a research study (Crotty, 1998). I begin this chapter by discussing the methodology of this study. My intent is to elucidate the decisions I made to create a simulated meeting between a standardized faculty member and student identified as having a disability (SID), in a manner congruent with the epistemological and theoretical frameworks that I have discussed in the first two chapters.

Positionality Statement

The decisions I made in designing and implementing this study were influenced by my own subjectivity as a researcher and SID. When I was an undergraduate and graduate student, I participated in approximately 30 discussions with faculty members about the disability-related accommodations that were granted to me by the college I attended. I have my own memories of what I said, or of what was said to me by faculty members. However, for the purposes of designing a simulated conversation, I was conscious of not letting my own experiences dictate what a standardized faculty member might say to a student participant. In this chapter and the next chapter, I describe the data I collected from multiple sources and how I used these data in an attempt to create a simulated conversation that would reflect the perspectives of those in the local context of the study, rather than my own. I also entered into the design of the simulation of this

study having previously designed a simulation with a different group of student participants – International Teaching Assistants. While I was, and still am, a novice at designing and implementing simulations, this past experience helped me to visualize what the simulation would look like and to anticipate some of the challenges I might encounter, such as in training the actors to portray an authentic standardized individual.

My own prior experiences also influenced how I formed relationships with potential participants in this study. When I initially met students to review the consent form for participation in this study, I introduced why I was interested in studying disability-related accommodations in postsecondary education. I told each potential participant that I had been identified as having a learning disability and ADHD and had discussed disability-related accommodations with faculty members many times as a student. Disclosing my own disability identity to students was a deliberate decision. Recognizing that choosing to participate in a video-recorded simulation conversation about accommodations involves taking risk, I hoped that disclosing my disability identity would help to build trust with participants and increase the likelihood they would want to continue their participation in the study. At the same time, I recognized that our shared identities could also pose obstacles to data collection. For example, participants might assume a shared understanding about the context of the study or about their experiences, and therefore not elaborate during interview responses as much as with other researchers. I attempted to mitigate this dynamic by sharing little, if any, about my own experiences during our conversations, after initially disclosing my disability identity.

With my own subjectivity in mind, I begin to discuss how I approached designing a clinical simulation, while linking my methodological decisions with a rationale of how I attempted to resolve some of the tensions between clinical simulations, Special Education, and a

Disability Studies framework. Then, in the remainder of the chapter, I detail the methods I used to design the simulation for this study. Designing the simulation was a multi-step process that included human subject data collection. The data collection and data analysis that I describe in this chapter are *not* intended to answer the central research questions of this study regarding how postsecondary SID engage in and reflect upon participating in a simulation. Rather, the data discussed in this chapter were collected for the purposes of creating a simulation that was indicative of the authentic experience of SID in postsecondary education. In the following chapter, I describe how I implemented the simulation that I designed, using the methods I describe in this chapter.

Methodology: Designing a Clinical Simulation Informed by Disability Studies

In Chapter Two, I reviewed literature about students identified with disabilities (SID) in postsecondary education. This review included research studies that emphasize the need for SID to develop self-advocacy skills in order to better negotiate the context of postsecondary education (e.g., knowing how to gain and utilize accommodations) to achieve better outcomes (e.g., increased graduation rates). I also reviewed literature about the use of clinical simulations as a form of practice-based learning and form of assessment. Given the research I cited, I could have chosen to use a clinical simulation as a form of intervention and assessment to answer a research question about the impact of a simulation on SID development of self-advocacy skills. In other words, SID could participate in a simulated discussion with a faculty member as a way to potentially remediate, or improve upon, their ability to self-advocate when discussing disability-related accommodations. Further, I could have operationalized self-advocacy, creating behavioral checklists which I would use to observe and assess students as they participate in the video-recorded simulation. Using a clinical simulation to assess an ability, or competency, using

pre-determined criteria, would be consistent with the way clinical simulations have commonly been used within medical education (Epstein, 2007).

Further, using a clinical simulation in this way would be consistent with common research methodologies in the research field of Special Education, which examine the effectiveness of interventions to remediate deficits within students identified as having a disability (Ferri, Gallagher, & Connor, 2011). A recent study by Holzberg et al. (2018), published in the journal *Remedial and Special Education*, is illustrative of an interventionist approach to studying issues of self-advocacy and accommodations for postsecondary SID. The authors used an intervention called the Self-Advocacy and Conflict Resolution (Palmer & Roessler, 2000) to examine its effects “on the ability of four high school seniors with mild disabilities to request and negotiate academic accommodations.” (2018, p. 1). The multi-lesson intervention involved explicitly teaching target behaviors, and suggested language for students to acquire and use when discussing accommodations with a faculty member. Students were given scripted note-cards to practice the targeted behavior.

One target behavior required students to disclose their disability by identifying their previous accommodations and stating how these accommodations benefited them (i.e., “Last year, in high school, I took my tests in a separate setting.... A separate setting helped reduce distractions, so I was better able to concentrate”). Another behavior included teaching students how to resolve conflict, by echoing a faculty member’s concern (i.e., “So, giving me a separate setting for my quizzes and tests would be an unfair advantage over other students and it is extra work for you”) and reframing that concern to address the situation, while also proposing what would hopefully be an acceptable alternative (e.g., “I understand you are not comfortable with me taking my tests in a separate setting. What if I took my tests in your office during office

hours?”). To examine whether students would apply these target behaviors, students were then asked to engage in an audio-recorded conversation about their accommodations with a real university faculty member who “was coached to first offer resistance but ultimately to grant the students’ accommodations” (Holzberg et al., 2018, p. 10). The authors found that three of the four participants applied the target behaviors in the conversation with the faculty member.

I refer to Holzberg et al.’s (2018) study as a reference point to the approach I took in this study. Similar to the researchers in that study, I was also interested in understanding how SID discuss disability accommodations *in situ*, when meeting with a faculty member. However, unlike the authors of that study, I deliberately chose to *not* create an intervention aimed at improving specific abilities of participants. There are several reasons for this decision. First, I do not share the understanding of self-advocacy as a discrete “ability,” or set of competencies that some SID are lacking (Holzberg et al., 2018, p. 9). I understand the idea of self-advocacy to be just that – an idea which has become reified as an ability through its repeated use in research literature. While conceptualizing self-advocacy as a set of measurable skills may be useful for the protocols of research, it is indicative of researchers’ tendency to create and evolve ideas about what constitutes ability and then to present these ideas as if they are actually objective characteristics of certain individuals—and lacking in others.

Instead, my approach to this study was more in line with theories of disability within Disability Studies, which focuses on removing barriers to meaningful participation by changing practices and structures that place certain individuals in a vulnerable or negative position in the first place. For example, SID appear to be the only population in postsecondary education who are regularly expected to begin their relationships with faculty members by disclosing an often-stigmatizing identity, and thereby risk becoming instantly viewed as less capable than their

peers. At the same time, I recognize that critiques of the structures of postsecondary education and disability accommodations do little for SID who must live the experience of navigating entrenched systems that are based on medicalized approaches to disability. In this sense, I agree with Special Education researchers, such as Holzberg et al. (2018) that SID benefit from the opportunity to practice navigating difficult contexts that are unlikely to change in the immediate future.

However, instead of evaluating students against pre-determined criteria, I wanted to allow SID to serve as experts, teaching me about how they have conversations about accommodations, and sharing their own interpretations of their actions and words as they navigate barriers in the context of postsecondary education. As I discuss further in Chapter Four, I wanted to understand self-advocacy from the ground up, to understand how SID advocate, without consideration for normative criteria. I attempted to avoid creating a simulation that was designed as an intervention, but to still provide an opportunity that might benefit SID by allowing them to practice discussing disability-related accommodations and reflect on these encounters through watching themselves.

With these ideas in mind, I return to the research questions I introduced in Chapter One. I designed a single clinical simulation to answer the following questions:

- How do university students who have been identified as having a disability engage in a simulated discussion about accommodations with a standardized faculty member?
- How do university students who have been identified as having a disability reflect upon their participation in a simulated discussion about accommodations with a standardized faculty member?

As I discuss the process I undertook to design a clinical simulation, I occasionally refer back to the theoretical perspectives of disability, which I introduced in Chapters One and Two and which provide a rationale for choices I made in the methods of this study.

Research Design

My goal was to design a study that would allow me to examine how students identified with disabilities (SID), who are enrolled in postsecondary education, engage in and reflect upon conversations with faculty members about disability-related accommodations. To create an approximation of a SID-faculty member discussion, I used the clinical simulation model adapted from teacher education (Dotger, 2013; 2015), which I described in Chapter Two. I designed a single simulation in which university SID initiated a discussion with a standardized individual who portrayed a standardized faculty member. I use the term standardized faculty member to refer to a profile of an individual faculty member who would be portrayed by actors in a consistent manner. As I will discuss in the next chapter, four different actors were trained to enact the standardized faculty member whose profile, or protocol, I created.

The context for the simulation I chose to design was a meeting in the standardized faculty member's office in which the SID initiates a discussion regarding disability-related accommodations with the standardized faculty member. I selected a SID-standardized faculty member simulated office encounter as the context for the simulation with consideration of two of Barrows' (1987) simulation design tenets which I discussed in Chapter Two: *prevalence* and *social impact*. First, I chose to design a simulated office hour meeting between SID and a standardized faculty member because of the *prevalence* of this encounter. SID are commonly expected to communicate about disability-related accommodations with faculty members each semester that SID are enrolled in postsecondary education. A simulated encounter between SID

and a standardized faculty member is therefore intended to create a context that is a common experience for SID. A second design tenet – *social impact* – also informed the design of the simulation. I designed a simulation with consideration for the impact on a minoritized social group – individuals who take on the institutional identity of a SID in postsecondary institutions. Discussing disability-related accommodations is an impactful issue for this particular social group, given that SID may experience stigma directly related to revealing their disability identity (Aquino, 2016).

With consideration for Barrows’ (1987) design tenets, I wanted to design a simulation that, to the greatest extent possible, allowed SID to both practice and reflect upon how they would typically engage with a faculty member in a discussion about disability-related accommodations. My goal was to create a simulation that was as authentic as possible, recognizing that a clinical simulation is only an approximation of a real-life encounter (Dotger, 2013). I began considering key questions for designing the simulation: how can I create a context that will convey authenticity to participating SID? What are the questions and statements that I will use to train actors portraying the standardized faculty member to communicate with SID in the simulated meeting?

As I described in Chapter Two, the clinical simulation model I used for this study involves creating two protocols: one which provides a general context of the situation for the participating SID, and the other which provides the actors who are portraying the standardized faculty⁵ member with detailed guidelines for the character they are asked to enact, including specific verbal and behavioral cues they will communicate to each participating student. Following Dotger’s (2015) guidelines for simulation design, I conducted a multi-step process of

⁵ In all figures in this chapter, I refer to standardized faculty member as the abbreviation “SFM”.

collecting data to use as the basis to design the two simulation protocols. In Figure 1, I have provided a visual representation of the overall process I used to draft and revise the protocols for the simulation. I began by conducting interviews with staff members at the Disability Services Office (DSO) at the university that the participating SID in this study attend. I considered the results of these interviews, along with the findings from existing research that I discussed in Chapter Two, and created an initial draft of the simulation protocols. Although I also considered interviewing faculty members instead of staff members, I decided to interview staff members since they were likely to have encountered perspectives from a number of different faculty members over several years and could therefore speak to patterns in faculty reactions to disability-related accommodations.

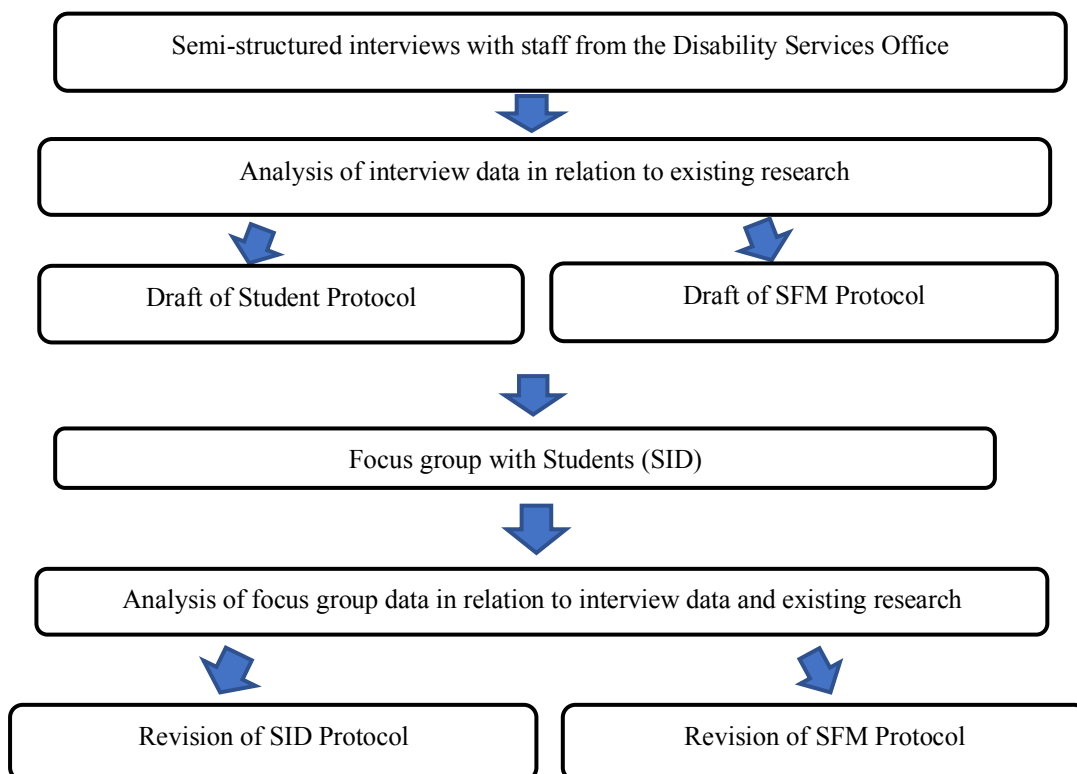


Figure 1. Process of designing a simulated meeting between SID and SFM

Following the interviews, I conducted a focus group with SID who had previous experience discussing disability-related accommodations with faculty members. Originally, I planned to conduct the focus group prior to interviewing staff members from the Disability Services Office because I wanted to ground the design of the simulation in student perspectives. However, staff members were more available during the summer months in which I began data collection, so I began by interviewing staff members. To ensure that students would still be the authority for the authenticity of the design of the simulation protocols, I changed my approach to the focus group. In addition to my initial plan to ask SID to share their experiences related to accommodations, I brought drafts of the simulations protocols to the focus group for students to critique directly. After conducting the focus group, I considered the findings as the basis for revisions to the drafts of the simulation protocols. Collectively, I undertook this data collection process in hopes that the simulation would reflect the authentic aspects of institutional processes and student experiences as they relate to accommodations in postsecondary education.

Data Collection: Simulation Design

In this section, I describe the data collection and analysis I conducted to draft and revise the protocols to implement a simulated meeting between a student identified as having a disability (SID) and a standardized faculty member. I refer back to each step of this process outlined in Figure 1, by including the diagram throughout the chapter. I begin by describing the research site and the participants. The participants described in this chapter participated in the design portion of the simulation but *not* in the actual simulation. In Chapter Four, I provide a detailed description of participants who participated in the actual simulation.

Research sites. The data I discuss in this chapter were collected at Eastern University, a private university in the northeastern United States which has a Disability Services Office. In

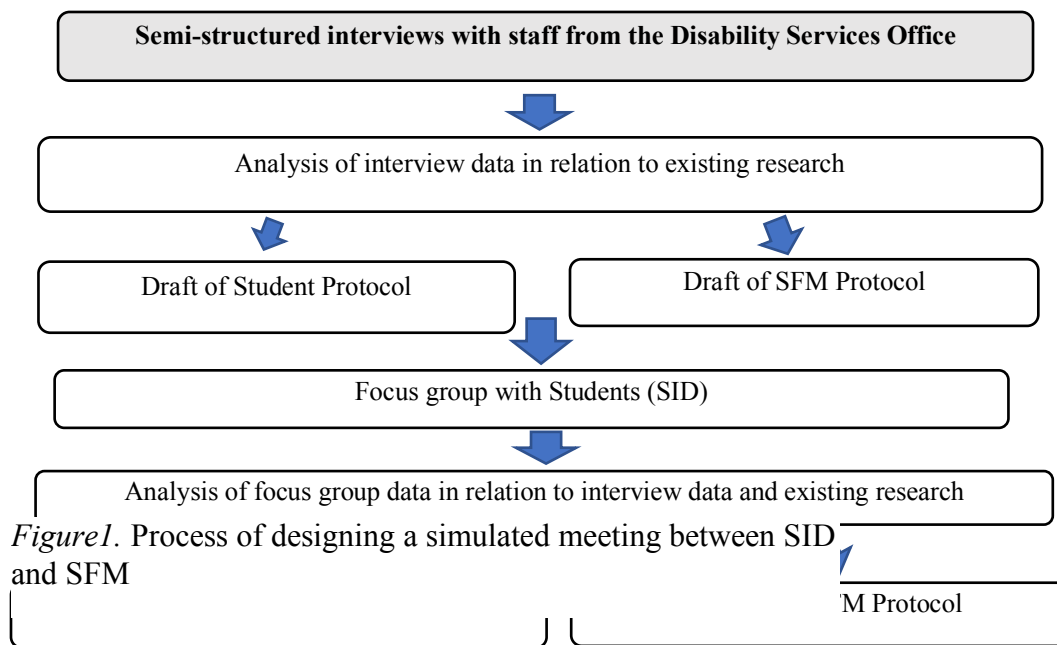
data I obtained through a staff member from the Disability Services Office, Eastern University reported a total of 1,719 students registered with the university's Disability Services Office in the 2016-2017 school year. Students identified as having a disability (SID) at Eastern University therefore comprise approximately 8% of the total students enrolled at Eastern University, below the national average of undergraduate SID in postsecondary education, which has been estimated at 14.6% percent at four-year institutions and 11.1% at all postsecondary schools (Higher Education Research Institute, 2011; National Center for Education Statistics, 2016).

Participants. Participants involved in the data collection I describe in this chapter include two groups. First, I interviewed a sample of staff members who are employed at Eastern University's Disability Services Office. Next, I conducted a focus group with a sample of students identified as having a disability (SID). I describe the participant criteria in further detail in the data collection section of Chapter Four.

Semi-structured interviews with staff members from the Disability Services Office

The first data I collected were through interviews with staff members from Eastern University's Disability Services Office. There were two purposes for this data collection. First, developing a simulation using Dotger's (2013) model involves creating a participant protocol, which I refer to here as a student protocol. The student protocol provides a brief background of the context of the simulation. In this case, I wanted to create a protocol that would describe the circumstances that would typically lead up to a conversation about accommodations between a SID and a faculty member. I therefore conducted interviews to gain an understanding of the process that leads up to conversations with faculty members, including how students register as having a disability and access their accommodations. While I was generally aware of this process from the literature I reviewed in Chapter Two, as well as from my own experiences, I wanted to

understand the specific nuances of the accommodations process at Eastern University and to ensure that I chose language to use in the student protocol that reflected students' typical experiences when seeking accommodations.



My second purpose in conducting interviews with staff members was to gain data that could be used to formulate a protocol for the actors who would portray, in a standardized manner, a faculty member who is visited in their office hours by a student seeking to discuss accommodations. I refer to this second protocol as the standardized faculty member protocol. This protocol would describe the standardized faculty member's background, characteristics, and the verbal and behavioral cues that they would deliver in the simulation. My goal was to create a protocol that would allow actors to portray how a faculty member might actually respond to a SID in a meeting about accommodations. Thus, in my interviews with staff members at Eastern University's Disability Services Office, I asked questions about the common responses from faculty members when SID request accommodations from them. While I believed that students were best positioned to provide insight about faculty members' responses (see Focus Group section later in this chapter), I also recognized that staff members work with many students each

year and might be aware of communication between faculty members and SID. However, I approached the interview data with staff members cautiously, recognizing the possibility that staff members might be likely to be most informed of very positive or very negative interactions between SID and faculty members, rather than the most common interactions.

My initial criterion for interview participants was selecting individuals who identified as counselors and were employed by Eastern University's Disability Services Office. My rationale for this criterion was that counselors would be likely to have frequent contact with students and therefore be potentially able to provide insight related to my two primary interview topics – the process of utilizing accommodations, and faculty members' responses to students' requests for accommodations. I sent out a recruitment e-mail to five counselors employed at the Disability Services Office and received interest in participation from three counselors. After conducting interviews with the three counselors, my sample expanded to five through snowball sampling (Bogdan & Biklen, 2007). One of the initial three counselors recommended that I speak to a full-time administrator in the office who was highly familiar with procedures and policies relating to accommodations. During this fourth interview, that administrator recommended that I speak to another administrator who also served as a part-time counselor.

I conducted semi-structured interviews with five staff members, each who consented to participating in an audio-recorded interview for approximately 30 minutes to one hour. Semi-structured interviews refer to qualitative data collection in which the researcher asks the same general questions to multiple participants in individual encounters (Bogdan & Biklen, 2007). I began each interview by explaining that I was interested in gaining data about the accommodations process to use in creating protocols for a simulated meeting about accommodations. I also informed each staff member that I was interested in faculty members'

responses to students' requests to use accommodations. Given my focus on creating a simulation based on Barrows' (1987) tenet of prevalence, I emphasized that I was interested in the most common responses and patterns, rather than outliers. The semi-structured interviews I conducted included broad questions to allow the staff members to have influence on directing the content of the interview, so that they were able to share information which they felt was most important and relevant. I asked staff members follow-up questions as needed, to illicit further explanation and specific examples from the staff members. The general topics of my questions were related to the processes with which students request and receive disability-related accommodations, as well as staff members' knowledge of faculty members' responses, based on either direct or indirect observations. The full protocol of questions is listed in Appendix A.

Data Analysis. The five interviews resulted in 3 hours and 26 minutes of audio-recorded data. The longest interview was 51 minutes and the shortest interview was 27 minutes. To begin data analysis, I first transcribed each of the five interviews. I conducted deductive data analysis, in which I set up pre-determined codes with which to categorize the data (Savin-Baden & Major, 2013). My rationale for using deductive coding, rather than inductive, or open coding, is because my aim was to understand how the data fit within two general categories, which were based on existing literature and corresponded to my targeted goals of building specific elements of the simulation protocols.

First, I created the code *accommodations process*. This code was based on the literature I reviewed in Chapter Two indicating that universities, such as Eastern University, are legally mandated to provide disability-related accommodations (Madaus, 2011). I expected to find data that would confirm the existence of a process for providing accommodations and describe that process. Secondly, I created the code *faculty member responseas to accommodations*. This

category was based on literature I reviewed in Chapter Two in which SID reported faculty members' respond to requests for accommodations in several different ways (e.g., Albanesi & Nusbaum, 2017). I use the term *responses* broadly, to refer to a number of possibilities, including attitudes, concerns, questions, or behaviors. I expected to find data that would indicate staff members' knowledge of a variety of different common responses from faculty members at Eastern University.

I began by reading each interview transcript and coding segments of data that fit within one of the two categories— accommodations process or faculty member responses. After this initial round of coding, I created sub-codes for each of the two categories by combining codes around a more specific concept. For the accommodations process, I created sub-codes based on sequence, to reflect the steps in the accommodations process indicated in the data. For faculty member responses, I first created sub-codes that reflected the structure of the standardized faculty protocol that I planned to create: *faculty characteristics* and *accommodations*. I chose the faculty characteristics code to capture any data segments that referred to beliefs and attitudes, which I could use when describing the “Important characteristics/background information” section of the standardized faculty member protocol (Dotger, 2013, p. 72). I chose the accommodations code to capture data segments that referred to specific accommodations that the faculty might respond to using “triggers,” or verbal and behavioral cues, that I would write in the protocol (Dotger, 2013, p. 72).

Within the accommodations code, I did an additional round of coding in which I created sub-codes based on frequency with which specific accommodations (e.g., use of a recording device) were referenced in the data. Keeping Barrows' (1987) simulation design tenet of prevalence in mind, my purpose in coding for frequency was to identify the most common, or

prevalent, accommodations which staff members report that faculty members respond to. In Figure 2, I provide an overview of the specific codes I identified beginning with the first two codes, descriptions of the accommodations process and faculty member responses to

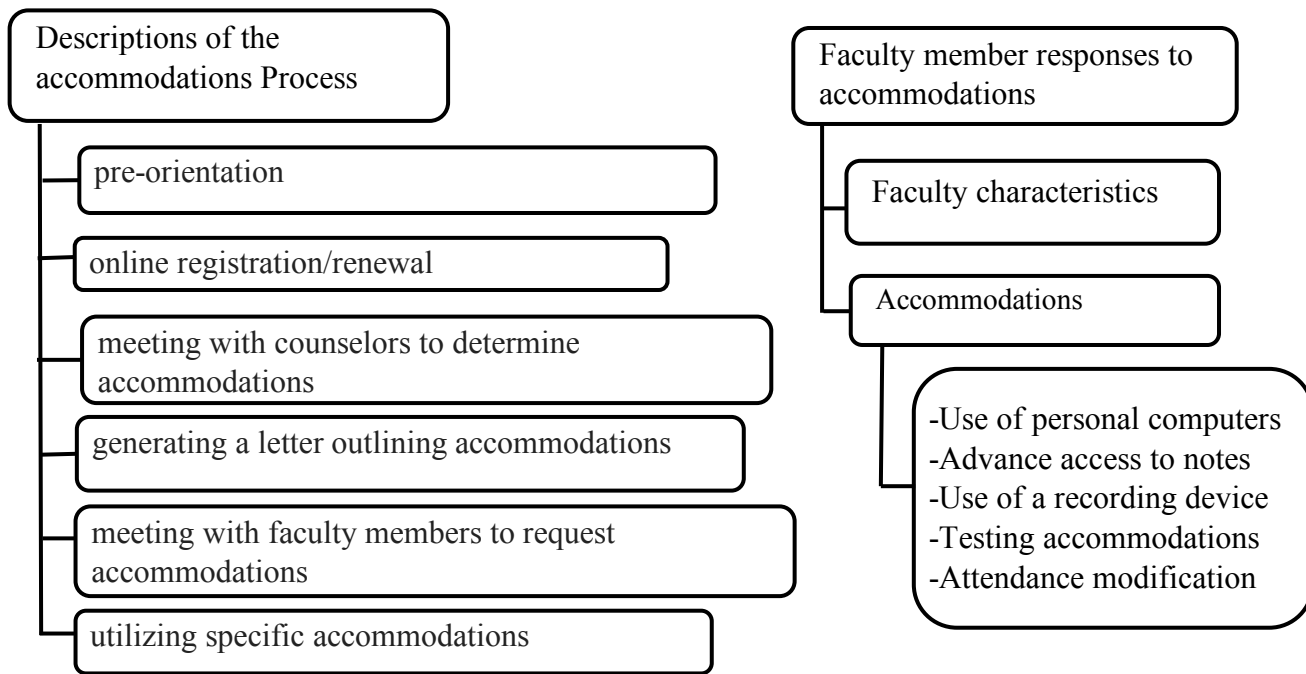


Figure 2. Data codes from semi-structured interviews

accommodations.

Results. Across the five interview transcripts, I initially coded 36 data segments for the category of *descriptions of the accommodations process*. Then, I grouped the data segments into six different sub-codes, which reflect the sequence of the accommodation process described by staff members. These codes were as follows: pre-orientation, online registration/renewal, meeting with counselors to determine accommodations, generating a letter outlining accommodations, meeting with faculty members to request accommodations, and utilizing specific accommodations. In Table 1, I have provided a brief description of each step in the process.

Table 1. *Accommodations Process at Eastern University*

Process	Description
Pre-orientation	Voluntary Half-day information session about services offered by the Disability Services Office Attended by a minority of incoming first-year students
Online Registration/renewal	Required Includes initial registration and self-assessment Also used for students to renew their accommodations each semester
One-on-one meeting between student and counselor	Required Used to determine if a student has a disability and to create an accommodations plan Student asked to bring documentation of a disability or send electronically ahead of time Typically begins with a discussion of a student's self-assessment Counselors provide guidance about the accommodations process
Generating a letter of accommodations	Required Letter created to reflect students' accommodation plan Letter sent electronically to student at the beginning of each semester Accommodations listed on letter, but not specific disability
Sharing letter of accommodations with faculty members	Student's choice about if or how (e.g., electronically, in-person) to share their letter of accommodations with faculty members Counselors strongly encourage students to print letters and meet faculty in office hours Some students e-mail their letter of accommodations or provide it to faculty members in the classroom, rather than meeting in person
Utilizing specific accommodations	Accommodations vary based on individual student Student decides when/how to use accommodations, in negotiation with faculty members Most common accommodations are related to testing (e.g., extended time) Two accommodations – long term extensions on assignments and attendance modifications – require a contractual agreement between the faculty member and student

Pre-orientation. Three staff members referred to a voluntary pre-orientation that is held each August by the Disability Services Office for incoming first-year students and their family members. This event was listed on the office's website at the time in which I conducted

interviews. According to one participant, the event serves as an information session about the services offered by the Disability Services Office. At the event, staff members also discussed the process of utilizing accommodations, including staff members' emphasizing the importance of discussing accommodations with faculty members. However, because the event is voluntary, the staff member reported that, "We only have a small set of our freshman who come to that."

Another staff member referred to a breakout session within the pre-orientation that involved "how to talk to your faculty," and another referred to previously doing "some simulations" of conversations with faculty members at pre-orientation. However, both staff members noted that these breakout sessions had not occurred for a few years.

Online registration/renewal. Staff members indicated that the first step in the process of receiving formal accommodations was registering via an online portal. One staff member discussed this process at length, beginning with students registering on the Disability Services Office website, either under the category of an incoming or current student. For students who are seeking accommodations for the first time at Eastern University (whether as a first-year student, or upperclassman), they are also offered a self-assessment survey form online to complete along with their registration. One staff member described the self-assessment survey as a questionnaire which includes "a series of questions about their disability, how it impacts them academically and in other areas of their life.... accommodations they have had in the past...accommodations they are seeking now....benefits they have experienced from that, and what they are hoping (to experience)."

Students who have already registered with the office and previously received accommodations are still required to register online each semester. One staff member discussed both benefits and drawbacks of having an online system in which students did not need to

physically return to the Disability Services Office every semester. The staff member noted that when students come each semester to renew their accommodations plan in the Disability Services Office, “that would be a time when I would really talk to them, and (ask) ‘How did it go with this process last semester?’” While acknowledging seeing students less is a downside of online registration, the staff member also asserted that the benefits of an online registration and renewal system outweigh this downside, “because it’s far less burdensome for (students) to get what they need. It’s much more convenient” for them.

Meeting with a counselor to determine accommodations. After completing an initial registration form and self-assessment online, students seeking accommodations for the first time are assigned a counselor at the Disability Services Office and asked via e-mail to meet with the counselor for a one-on-one meeting. Determination of a disability and the formulation of an accommodations plan typically occurs during initial one-on-one meetings between a student and counselor. In describing this process to me, one staff member indicated that students are informed when they are invited to meet with a counselor that the Disability Services Office will be seeking documentation of the students’ disability. The staff member reported that documentation typically includes either medical documentation or educational documentation from K-12 schooling (i.e., Individualized Education Program or 504 Accommodation Plan). The Disability Services Office also has a service in which they can evaluate a student for a learning disability, though the student must pay for the evaluation.

While students are asked to provide documentation of a disability, students’ self-assessment surveys and/or documentation of previous accommodations are sufficient to approve accommodations for the student. As one staff member indicated, “we really depend on” the self-assessment survey and “that sometimes *is* the disability determination. We put a lot of stock in

what the student tells us. We are not as reliant on, necessarily, medical documentation, or a psychoeducation evaluation.” Three staff members, who are counselors, mentioned that they typically begin their meeting with students by going over the self-assessment as a way to begin determining the accommodations that a student needs. One staff member said that the counselors will often make suggestions to students about the accommodations that they might benefit from. “It’s an interactive process,” another staff member said in describing meeting with students and determining a list of accommodations.

Generating a letter of accommodations. By the end of their initial meeting, the counselor and students have typically created a list of accommodations, a document which counselors referred to as an accommodations plan. The document lists the accommodations that students are approved to access in their courses. Based on this plan, a staff member explained, “there is a letter that gets generated and sent to the student directly.” The student can then choose whether to deliver the letter to individual faculty members or to make the faculty member aware of their accommodations: “It’s up to them how they deliver the letter to their faculty, *if* they want to deliver it. We don’t deliver that directly to faculty because it’s the student’s right in terms of disclosure.” Two other staff members pointed out that the student’s specific disability category, which the office codes during the initial disability determination, is not listed in the individual letter that goes to faculty. Instead, staff members typically tell students that they do not need to reveal any aspects of their disability identity when discussing the letter with faculty members. After the initial letter detailing accommodations is generated, students sometimes meet with their counselors during the semester, or during subsequent semesters, to make any necessary modifications to the accommodations plan, such as adding an additional accommodation.

Meeting with faculty members to request accommodations. Students are expected to communicate directly with their faculty members. Each of the counselors that I interviewed emphasized that they encourage students to discuss their letter of accommodation with faculty members in person and in their office:

- “We request that the student print their letter, because they get it electronically, and have an actual conversation with the faculty. We advise that it would be best to do that during office-hours, not to do it right before or after class, when the professor is pre-occupied...we strongly encourage them to have an actual sit-down conversation.”
- “I know meeting with students and talking to them about their testing modifications, that they need to go to the office-hours, they need to first just preface...’ok, these are the modifications that I receive’, if they have testing, if they have note taking or a recording device, they should definitely tell the instructor...”
- “I say, go to their office hours, that’s better because you have their undivided attention. No one is going to interrupt you. if you do it in front of the classroom, someone is going to overhear something that you might not want them to hear.”
- “I tell students, often times...professors like to have things in electronic format. It’s easier for them to keep track of. So you can always send your electronic letter to them by e-mail. But I highly, highly, recommend, if you can do this, to print out a copy. Having that piece of paper in your hand is a great way to approach your professor during office-hours and have a conversation...”

Staff members reported that despite their encouragement, many students do not discuss their letter of accommodations with faculty members in their office. As one counselor explained, “The truth is that a large number of our students just forward their accommodations to the faculty and

say, ‘These are my accommodations’.” Another staff member explained that, “They will just say, ‘Here, I want to give you this’, and not have a conversation. And they get frustrated when they don’t get their accommodations. And I’ll say, ‘Did you have a conversation, or did you just hand them the form?’” When I asked the staff members if they knew how common it was for students to hand the letter to faculty members during class, or to e-mail the letter, rather than have a conversation during office-hours, the participants expressed uncertainty, but had an interest in finding out: “We have never collected that data. It would be hard to say. It would be interesting to find out.” Another replied, “It would be an interesting survey.”

Utilizing specific accommodations. Once students share the letter with a faculty member, they then have to arrange how they will utilize the specific accommodations that are approved for them. One staff member indicated that the most common accommodation that students use is related to testing, including students receiving extra time on tests and access to a reduced-distraction testing environment. The Disability Services Office provides a space for students using testing accommodations to take tests. One of the counselors I interviewed also coordinates testing accommodations. They shared that students who have testing accommodations have a choice between taking exams in the classroom or in a designated area of the Disability Services Office: “It depends on what the student is most comfortable with and if there is a (time) conflict.” In order to arrange to take a test in the Disability Services Office, a student must ensure that the faculty member for the course they are enrolled in is aware of the accommodation, so that the faculty member can provide the test to the Disability Services Office.

Other common accommodations discussed by staff members were notetaking accommodations, use of recording devices and laptops in class, and time extensions on assignments. Notetaking accommodations vary and can include faculty posting notes, such as

PowerPoint slides, prior to class. If necessary, the Disability Services Office will hire a student in the class to take notes for the student who has a notetaking accommodation. All five participants distinguished long-term assignment extensions and attendance modifications from other accommodations. Staff members reported that accommodations for long-term extensions and attendance modifications involve creating an agreement, or contract, between the student and faculty member, such as agreeing upon how many classes a student could miss and still be able to pass a course. As one staff member described, there is a “back and forth between the student and the instructor” and in addition, “they have to sit with the faculty member and go through the contract in order to utilize that accommodation.”

In addition to coding staff members’ descriptions of the accommodation process, I coded 34 data segments in which staff members described *faculty members’ responses to accommodations*. I then coded these 34 data segments into the two sub-codes of faculty characteristics and accommodations. I coded 11 segments of data as describing faculty characteristics and 22 segments of data as describing accommodations. I coded responses to accommodations based on frequency in which they appeared in the data. Table 2 includes a chart of all accommodations that I coded, ordered by frequency.

Table 2. *Staff Members’ Reporting of Faculty Members’ Responses to Specific Accommodations*

Accommodation	Number of Data Segments Coded
Use of Personal Computers	7
Advance Access to Notes	5
Use of a Recording Device	5
Testing Accommodations	4
Attendance Modification	1

Faculty characteristics. Staff members suggested that students' perceptions of faculty were that faculty generally had positive attitudes in response to students' requests for accommodations. One staff member reported that, "For the most part, faculty are pretty understanding, especially when it comes to something as simple as testing." Another participant referred to "...so many examples of positive collaboration," including faculty members who used a universal design approach to accommodations, providing accommodations to all students, rather than only to the student who initially requested an accommodation. The same staff member noted that students most often reported that faculty members accept their letter of accommodations without any concern or indication of conflict. Two staff members referred to an award ceremony in which the Disability Services Office recognizes faculty "going above and beyond" regarding delivering accommodations for students.

Yet, staff members also reported that they had also heard about challenging responses from faculty members. One staff member noted that students report that faculty members commonly say that providing accommodations to students is "not fair" to other students. The same staff member also said that faculty members tend to be more resistant to accommodations that require additional work, or arrangements on their part. Two staff members indicated that faculty members sometimes act with uncertainty about how to respond to requests for accommodations. One staff member said that faculty members ask, "What do I have to do?" in response to receiving a request for accommodations from students. Another staff member noted that new faculty members, in particular, will sometimes act puzzled because they are unsure of the processes for delivering accommodations. Finally, one staff member described how faculty members sometimes challenge students about using an accommodation and the counselor will have to intervene, or in other instances, faculty members make suggestions, as if they are an

“expert” about using accommodations. In the next section, I share data about the accommodations that, according to the staff I interviewed, faculty members express concern about.

Accommodations. The most common accommodation that staff members referenced when discussing faculty members’ responses to accommodations was students requesting to use electronics in class; the most common was a laptop computer for notetaking. Among the concerns that staff members reported that faculty members commonly raise are that using a laptop conflicts with their classroom policy about electronics, or that laptops can distract students if they decide to use the internet. “How do I prevent them from getting on YouTube, or e-mailing?” is a frequent concern that one staff member cited as coming from faculty members. Three staff members referred to faculty members frequently citing a research study that suggested that hand writing notes is better for learning than typing notes on a laptop.⁶ “A lot of the faculty have attached themselves to” this study, one staff member said, “I hear that a lot.”

Staff members reported that other common responses from faculty members included concerns about accommodations related to providing students with access to notes, such as PowerPoint slides before class, and the use of devices to audio record classroom lectures. Staff members reported that faculty frequently expressed discomfort with providing students with access to their PowerPoints ahead of class. Reasons include that faculty members are unable to prepare their PowerPoint slides ahead of time or because they have concerns that students will not attend class if they are provided notes ahead of time. Staff members also reported that faculty members are frequently reluctant or opposed to allowing students to audio-record class sessions.

⁶ Based on two staff members’ description of the study as “recent”, I presume that the staff members were referring to the following publication: Mueller, P. A., & Oppenheimer, D. M. (2014). The pen is mightier than the keyboard: Advantages of longhand over laptop note taking. *Psychological science*, 25(6), 1159-1168. This research article had 536 citations on Google Scholar as of July 2018.

Three staff members recalled hearing concerns from faculty members about having their lectures recorded, including concerns about their “intellectual property” getting out into the public, confidential information being recorded, or their class lecture being posted on the Internet. The issue is “...ownership of the material,” one staff member explained, “it’s their information. They’re afraid it’s going to be put up on YouTube.”

Less common responses reported by staff members were related to testing and attendance accommodations. One staff member reported that faculty have sometimes claimed that students are at a disadvantage if they take their test at the Disability Services Office because the faculty member may answer questions in the classroom while students are taking the test. Another staff member noted that faculty are frequently uneasy about changing the time of a test, if a time change is needed to accommodate a student who receives extra time, but who has back-to-back classes, for example. The staff member attributed faculty reluctance to change the time of tests to their concern over the “security of the exam,” that could be jeopardized if a student took the test early and then communicated with their peers about the content. Other than concerns about changing testing times, staff members reported that faculty members generally allow students to decide on their own where they would like to take the test. Finally, one staff member noted that faculty ask questions when a student has an attendance modification that required the faculty member to complete a contractual agreement. “How do I fill this out?” or “I’ve never seen this before” are common responses that the participant reported hearing from faculty who receive requests for attendance agreements.

Discussion. The results above include data from interviews with five staff members from the Disability Services Office at Eastern University. The results I provided reflect specific themes which I pre-determined based on my desire to gain relevant information to craft specific

elements of simulation protocols, and to identify data that reflected the most prevalent aspects of the accommodations process and faculty responses to students who request accommodations. The results in the first category of analysis – accommodations process – indicate that Eastern University’s structures for identifying students as having a disability and providing them accommodations is generally similar to the process described in literature. Students are asked to self-disclose a disability both initially to the Disability Services Office and then again to individual faculty members (Yuknis & Bernstein, 2017). Consistent with studies of other postsecondary institutions, students are asked to provide documentation of a disability and the Disability Services Office relies significantly on students’ self-reports to determine that the

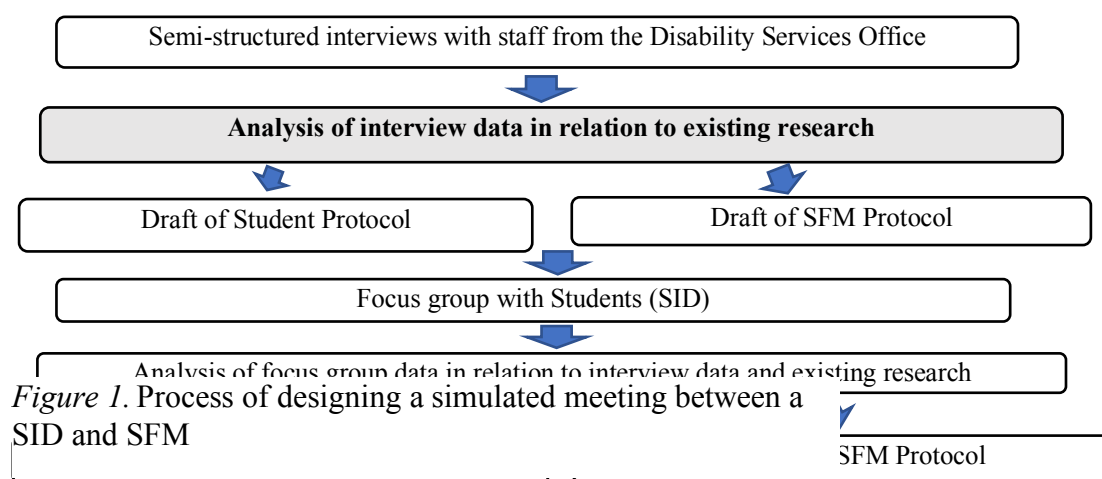


Figure 1. Process of designing a simulated meeting between a SID and SFM

student has a disability (Lovett et al., 2015; Weis, Dean, & Osborne, 2016). The overall process of delivering accommodations at Eastern University is indicative of a retrofit approach in which accommodations are delivered to individuals to modify aspects of course instruction or environment, rather than building accommodations into the environment from the beginning (Dolmage, 2017).

The data also revealed nuances about the accommodations process at Eastern University. For example, staff members reported that the office recently moved to an online system in which

students are able to renew their accommodations plan each semester and receive their letter of accommodations, without the burden of needing to physically come to the office. However, students do face certain barriers to receiving accommodations, such as being expected to complete online paperwork such as a self-assessment and registration form, and then arranging to meet one-on-one with a counselor to determine an accommodations plan. Additionally, an unknown, but likely significant number of students choose not to meet with faculty members, despite counselors strongly encouraging students to meet with faculty members in their office. This outcome is not surprising, given that students have reported reluctance to discuss their accommodations with faculty members, especially because of concerns about how they may be perceived (Marshak et al., 2010). Further, an individual student may choose to disclose their accommodations in one way to one faculty member (e.g., via e-mail) and then by another means (e.g., in-person meeting) to another faculty member, depending on how the student perceives that individual faculty member (Cole & Cawthon, 2015).

In the second section – faculty responses – results revealed patterns in both faculty attitudes towards accommodations and the specific accommodations in which faculty tend to communicate specific concerns. Consistent with research studies of faculty members' attitudes towards accommodations (Lyman et al., 2016; Marshak et al., 2010), participants report that faculty members, for the most part, demonstrate positive attitudes towards accommodations and are willing to be cooperative in the process of delivering accommodations. However, the data also revealed that faculty commonly express concern about specific accommodations. The most common accommodations that faculty object to are the use of computers in class, use of a recording device, and advance access to notes. Faculty are less likely to object to testing accommodations, unless it requires a change in the schedule that may threaten what they

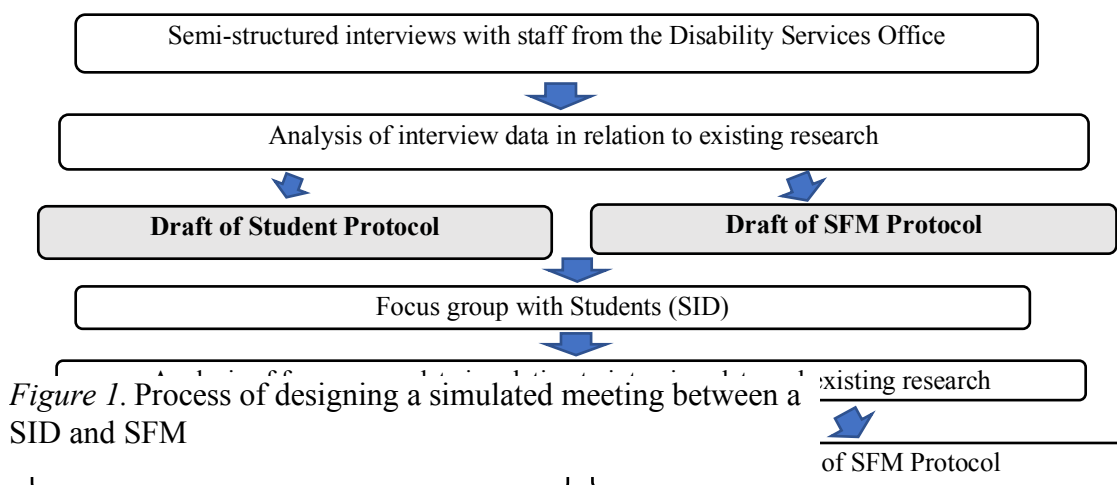
perceive as the integrity or security of the test. The data also reveal patterns in the specific language faculty members use in raising concerns about accommodations, such as referring to a study about the adverse effects of using a laptop for notes, or concern for their “intellectual property” when students ask to use a recording device.

The results I have discussed are limited in several ways. First, whereas it is common to address outliers in qualitative research methods (Bogdan & Biklen, 2007), I did not include outliers in the data I coded. For example, I did not include a description of a faculty response that a staff member described as “an extreme example.” This is because my approach to designing this simulation was rooted in Barrows’ (1987) tenet of *prevalence*; the data analysis was focused on identifying the most frequent faculty responses which I could use to create simulation protocols. Additionally, the results are likely skewed toward negative responses regarding faculty interactions. As one staff member noted, “You tend to hear more of the negative than the positive. When you don’t hear anything, you kind of assume that a lot of it is going really well.” Further, the data collected in these interviews were not intended to provide a comprehensive illustration of how accommodations are implemented, including how staff members work with students and faculty members to resolve conflict and implement accommodations. Lastly, because I asked about the most common aspects of the accommodations process and interactions with faculty, issues related to the least common accommodations at Eastern University may be underrepresented in these data.

Preparation for Focus Group: Initial Draft of Protocols

The second part of data collection for designing the protocols for the simulation was conducted with a focus group of current students identified as having a disability (SID) attending Eastern University. However, before I conducted the focus group, I first created initial drafts of

the simulation protocols, based on the results from interviews with staff at the Disability Services Office. My rationale for first creating drafts of the initial protocols was to bring documents to the



focus group that would provide some structure to the discussion; I wanted SID to be able to directly respond to my initial plans for the simulation design, sharing which aspects of my understandings of the accommodations process and common faculty responses resonated with their experiences. In other words, my intention was to enter a conversation with SID in which the students could serve as evaluators who would critique and reshape the simulation I was designing.

I began by creating a draft of the Student Protocol (Appendix B). The purpose of the student protocol was to provide SID who chose to participate in the simulations with a brief background of the context in which they were participating. At the top of the protocol is the name of a fictional faculty member, Professor Alan or Alicia Williams, followed by a description of the meeting as “student initiated.” In the first paragraph of the protocol, I described the context which staff members from the Disability Services Office reported that students experience each semester. I described how the participant (“you”) is a student registered with Eastern University’s Disability Services Office and that the office sent the student a letter at the beginning of the semester, which outlined the disability-related accommodations that the student

was approved to use. Further, I included the guidance that staff members reported they offer to students, including the suggestion to students that they meet with the faculty member during office hours to discuss the letter outlining accommodations.

In the next paragraph of the protocol, I described a fictional class in which the participant students were enrolled – Principles of Economics. I chose the name of the course to convey an elective course that could be taken by students from many different fields and at different levels of study. I introduced the faculty member for the course – Alan/Alicia Williams – and described course assignments including short answer tests and weekly homework assignments referred to as ‘problem sets.’ I described the first day of class, in which Professor Williams lectured using a lengthy PowerPoint presentation, a common instructional approach in U.S. universities (Garrett, 2016). Finally, I provided background of the context that led them into a meeting with Professor Williams: “You decided you will stop by Professor Williams’ office during office hours to share your letter from the Disability Services Office outlining your accommodations.”

Next, I created a draft of the standardized faculty member protocol that would be eventually used to train actors for the simulation. As I discussed previously, protocols for the actors in a clinical simulation are typically more detailed than the student protocol and include both character building information and detailed instructions of verbal cues that the actor is asked to communicate. To avoid overwhelming student participants by asking them to read multiple pages of documents, and to allow time for open-ended discussion, I only prepared the latter portion (verbal cues) of the protocol prior to the focus group. I decided to develop the standardized faculty member’s background after the focus group, after analyzing student’s responses. For the verbal cues, I drafted an initial list of nine possible questions or statements

that the actor might convey during the simulation. Below, in Table 3, I provide the list of questions and statements along with an example of a specific data point from my interviews with staff at the Disability Services Office which support my rationale for each cue.

Table 3. *Draft of Verbal Cues for the Standardized Faculty Member Used in Focus-group Protocol*

Verbal cue included in draft of standardized faculty member (SFM) protocol	Supporting data from interviews with staff at the Disability Services Office
I don't typically post my PowerPoints until after class, otherwise a lot of students wouldn't show up.	If they don't post their PowerPoints, they say it is because of attendance, generally speaking.
I usually don't allow laptops in class. Students tend to get distracted.	Use of PC in class, (if) the instructor doesn't allow PCs in class...(faculty members) do have concerns, 'Well, you're not going to pay attention to me, you're going to be surfing (the Internet).'
Okay, so for the testing accommodations, what do you need me to do on my end?	Instructors have a lot of questions about anything with testing accommodations.
You can take the test at Disability Services if you want, but in the past I've found students actually prefer to take it with me, since I usually clarify some of the questions during the test.	Students...come back and will ask me a question, 'Well, they recommended (that I take the exam with the faculty member), do I have to do this, or no?' And then we always tell them, you do not have to take it there.
I've found that students actually learn better when handwriting their notes in this class. In fact, there was a study that came out recently....	There was...this article that faculty have sort of attached themselves to, which is that students learn better if they handwrite their notes.
I need to know for sure that the class recordings aren't going to end up on YouTube.	The concern is...that students could just post it on YouTube.
Okay, but I just need to make sure that I'm being fair to all students.	The other thing we hear often with any kind of accommodations is 'It's not fair if I let you do it, versus everyone else'.
What exactly is the nature of your disability?	I make that clear to them, if the faculty does start asking them...I coach them on how to say, 'I'm not comfortable sharing that.'

Verbal cue included in draft of standardized faculty member (SFM) protocol	Supporting data from interviews with staff at the Disability Services Office
What strategies do you usually use to deal with your disability?	In the past, we did not have those specific notes (on the letter of accommodations), so we switched that to help mitigate some of those ‘while I’m a disability expert’ professors.

After drafting both the student protocol and the partial standardized faculty member protocol including verbal cues, I prepared to conduct a focus group with university students identified as having a disability (SID).

Focus Group

Savin-Baden and Major (2013) define a focus group as “a gathering of a limited number of individuals, who through conversations with each other, provide information about a specific topic, issue or subject” (pp. 374-375). A focus group differs from a traditional interview in that the researcher typically takes a more passive role, allowing participants to engage with each other, rather than by responding directly to the researcher (Savin-Baden & Major, 2013).

Through the structure of a focus group, I was interested in having SID engage with each other as they assessed the draft of simulation protocols and also shared common aspects of their experiences relating to the accommodations process and interactions with faculty members at Eastern University. I believed that a focus group would be an effective method because it would

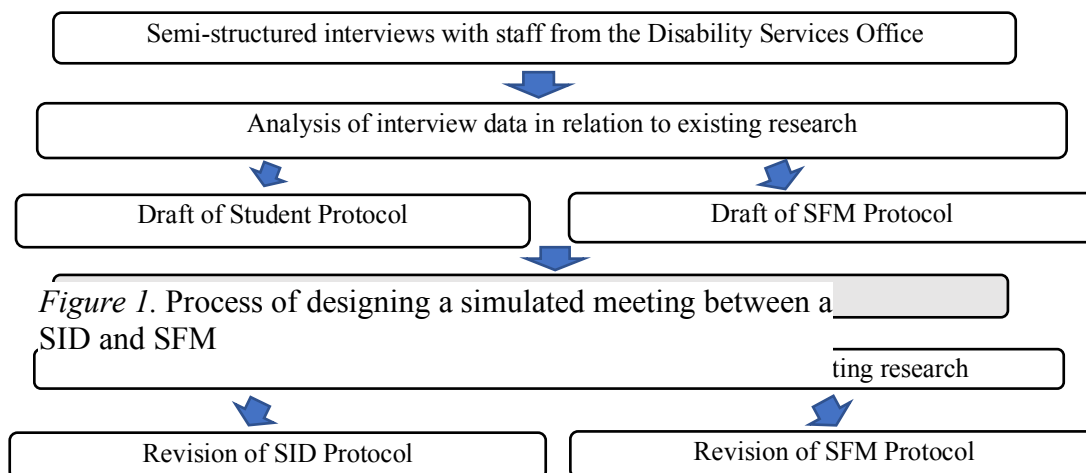


Figure 1. Process of designing a simulated meeting between a SID and SFM

allow participants to recognize commonalities in their experiences by sharing and listening to each other, and to build on each other's insights.

The minimum criteria for participating in the focus group was that participants be at least 18 years of age, be a student enrolled at Eastern University, and have registered with Eastern University's Disability Services Office. I recruited participants for the focus group via e-mail solicitation on the Disability Services Office listserv. I hoped to recruit approximately 4-6 students. 14 students initially responded to my e-mail. After e-mail correspondence and phone calls, I determined that several students would not be ideal participants for the focus group. For example, several students identified as freshman (first-year) students. Because first-year students were unlikely to have had many experiences speaking with faculty members about accommodations, I suggested that these students might be better suited for participating in the simulation itself, and I informed them that I would reach out to them again shortly if they were interested. I informed another student that the study was not appropriate for them because they received housing accommodations and did not have contact with faculty members about accommodations.

Prior to the focus-group, I e-mailed each of the potential participants and asked them to inform me if there were any accommodations or ways I could better support their participation in the focus-group. I did not receive any specific requests or information. Six students confirmed that they would attend the focus group. However, one student did not attend without an explanation, and another informed me on the day of the focus group that they had a family emergency and could not participate. In the end, the focus group consisted of four participants, whose self-reported demographics are described in Table 4. On the day of the focus group, I met the participants in a private conference room which I reserved on Eastern University's campus.

Table 4. *Demographics of Focus Group Participants*

Name	Year	Age	Race	Gender	Self-identified disability
Albert	Senior	34	White	Male	Multiple disabilities; brain injury; mobility; learning disability; processing problems
Erica	Senior	21	White	Female	Learning (reading) disability
Lisa	Junior	21	White	Female	ADHD
Nora	Graduate Student	22	White	Female	ADHD, Auditory Processing Disorder

I began the focus group by providing students with an overview of the purpose of the focus group. Returning again to Barrows' (1987) simulation design tenet of *prevalence*, I informed participants that I was seeking insight into the most common aspects of their experiences in procuring and using disability-related accommodations, and in particular, pertinent interactions with faculty members. I then provided an overview of the focus group which I divided into three parts: 1) asking students to assess the authenticity of the student protocol draft; 2) asking students to assess the authenticity of verbal cues taken from the draft of the standardized faculty member protocol; and, 3) allowing time for open-ended questions designed to allow students to share any relevant aspects of their experiences which were not already shared. I displayed the directions, overview, and specific questions in the focus group on a television screen in the room to provide students a visual representation.

First, I provided participants with both large and standard print hard copies of the draft of the student protocol. I also provided participants with pens and highlighting markers so they could annotate the document. I allowed students time to read and annotate the document. Then, I asked students to provide me with both quantitative and qualitative feedback regarding the extent

to which this draft realistically depicts the circumstances students commonly experience relating to using disability-related accommodations. I first asked participants to provide a rating for the protocol based on their overall feeling about its authenticity. I asked students to rate the document based on the following scale:

- 1 - Not realistic or accurate at all
- 2- Somewhat realistic and accurate
- 3- Mostly realistic and accurate
- 4- Completely realistic and accurate

Then, I asked the participants to provide qualitative feedback about the document's authenticity by discussing any specific segment of the document which they felt was relevant. When a participant pointed out language that they felt was not realistic, I paraphrased what I understood their critique to be, and then asked them to elaborate and/or suggest alternative language that I could use to create a more realistic protocol.

I then continued to the second part of the focus group, critiquing the draft of verbal cues in the draft of the standardized faculty member protocol. I showed students a series of nine statements or questions which I was considering using to train actors to portray a faculty member. For each statement or question (listed above in Table 3), I asked students to respond to the question, "Does this sound like something a professor has said to you when discussing accommodations?" Then, during the final portion of the focus group, I asked students a series of questions designed to elicit ideas not previously shared (Appendix C).

Data analysis. The focus group yielded 1 hour and 5 minutes of audio-recorded data. I transcribed the focus group, beginning at the 7:13 mark, which was preceded by 3 minutes and 14 seconds of my initial directions, followed by 4 minutes and 9 seconds of silence and

occasional ‘small talk’ between participants while they read over the student protocol draft (e.g., Erica: “So are you guys originally from this area?”). Beginning at the 7:13 point, when I asked the group, “How realistic is this description?” I conducted data analysis in three sections, corresponding to the three parts of the focus group mentioned above: critiquing the student protocol, critiquing the verbal cues of the standardized faculty member protocol, and open-ended questions and prompts.

First, I analyzed participants’ responses to the student protocol draft that I asked them to critique (7:13 – 24:02). I coded these data in two parts. I coded students’ overall responses by identifying the numerical ratings (1-4) of accuracy and authenticity. Then, I coded participants’ comments to individual sections of the student protocol. I created codes based on the specific sentence or phrase in the draft of the student protocol that students responded to. I placed students’ commentary alongside this code. I repeated this coding structure for each specific sentence or phrase that participants addressed in their comments.

Next, I began data analysis of students’ responses to the examples of nine verbal cues taken from the standardized faculty member protocol draft (24:03 – 51: 32). For the nine verbal cues, I coded data segments in which students commented on that individual cue. Finally, I analyzed responses to open-ended prompts at the end of the interview (51:35-101:52). I coded the individual responses of each student to each of the open-ended prompts.

Results.

Evaluation of student protocol. During the approximately 17-minute discussion about the one-page student protocol draft, students provided ratings (Table 5) and qualitative descriptions of the degree of authenticity of the document (Table 6). Amongst the four participants, Lisa rated the student protocol as “somewhat realistic and accurate,” Erica as “mostly realistic and

accurate” and Albert and Nora rated the document as between “somewhat” and “mostly realistic and accurate”. When asked to provide qualitative feedback about the document, participants discussed four different sections of the protocol. In Table 6, I have listed each of the sections, in order in which a participant addressed them. I have placed these alongside the commentary offered by each participant, in order in which the comments were expressed.

Table 5. *Ratings of Focus Group Members Regarding the Accuracy and Extent to which the Student Protocol was Realistic*

Participant	Overall rating of student protocol (Overall 1-4)
Albert	“Between 2 and 3, depending”
Erica	“I would say a 3”
Lisa	“I thought it was a 2”
Nora	“Between 2 and 3”

Table 6. *Focus-group Participants’ Commentary about the Student Protocol*

Excerpt from Protocol Draft	Participant Commentary
Last week, before classes began, you received an e-mail from the Disability Services Office. Attached to this e-mail was a letter that lists the accommodations you are provided as a student registered with the Disability Services Office.	<p>Nora: The system has recently changed where you have to request your accommodations online. You don’t necessarily get those a week of ahead. It depends when you request them.</p> <p>Erica: They make it seem like a reapplication.</p> <p>Nora: (suggestion for revising language) You requested your accommodations last week and just received them.</p>
When you registered at the Disability Services Office, you were strongly encouraged to meet with each of your professors, face to face, to discuss how the accommodations will be implemented in each course.	<p>Albert: I crossed out strongly encouraged. They asked me if I had considered e-mailing my professors directly to talk about my situation....I took it upon myself to meet with my professors.</p> <p>Nora: (my counselor) did start off with ‘so how do you bring this up to teachers’ ...it depends on the counselor.</p> <p>Erica: I was explicitly told all of this information...(the counselor) even added, ‘That’s how you start fostering relationships with professors.’</p> <p>Lisa: Freshman year...I remember sitting down with (my counselor) and going over how the experience is going to</p>

Excerpt from Protocol Draft	Participant Commentary
	<p>be...it's not this very strong memory...but it sounds like the same language... 'we recommend you do this' but it is not forced.</p>
<p>You decided you will stop by Professor Williams' office during office hours to share your letter from the Disability Services Office outlining your accommodations.</p>	<p>Erica: That all seemed pretty realistic... the only thing I would say in addition is that when the professors go over their syllabus and go over Disability Services Office accommodations, they always mention to do it within the first two weeks. Some mention it, some don't.</p> <p>Nora: (responding to Erica) They have to (mention accommodations on the first day of class).</p> <p>Albert: I always meet my professors before the first day of classes.</p> <p>Nora: I do like to meet in person with the professor...I also do not like to disclose that I get accommodations over e-mail. I'm very open about it in person but I don't like necessarily discussing that over e-mail.</p> <p>Lisa: I have...the past one or two semesters, before the first test, given them my accommodation letter...I would always do it right before or after class. But I do agree with everybody else. They always mention that 'if you need an accommodation, just talk to me. We'll work something out.'</p>
<p>As you were leaving at the end of the first day of class, you looked down at the syllabus and noticed Professor Williams has office hours scheduled later in the first week.</p>	<p>Nora: Usually professors will announce their office hours in class while going over the syllabus.</p>

When discussing the first paragraph of the student protocol, students commented on two statements. I coded seven data segments as commentary in response to these two statements. These data included Nora's suggestion to revise the language related to students receiving a letter of accommodations, so that it did not refer to a specific e-mail. Additionally, students shared mixed experiences regarding the extent to which participants have been encouraged by counselors at the Disability Services Office to speak to faculty members in person during the

faculty member's office hours. In the second and third paragraphs of the student protocol, which described a fictional course and list of assignments and then a description of the first day of class, all students agreed that the paragraphs sounded realistic and did not raise any concerns about authenticity.

I coded five data segments in response to two statements in the fourth and final paragraph of the student protocol. In response to a statement that the student decided to visit the faculty member's office, Erica, Nora, and Lisa all indicated that faculty members verbally reference accommodations on the first day of class. Additionally, students shared different approaches to discussing their letter of accommodations with faculty members. These approaches included meeting with the faculty member prior to the semester (Albert), at the beginning of the semester (Nora), or later during the semester (Lisa). Finally, Nora commented that students typically find out about faculty members' office hours through a verbal announcement, rather than by reading the syllabus.

Evaluation of standardized faculty member protocol. Over the course of 37 minutes of discussion about nine possible verbal cues from the draft of the standardized faculty member protocol, participants responded with a variety of explanations. In Table 7, I list each of the nine verbal cues that I presented to students, followed by data points that I coded as responses to the individual cue.

Table 7. *Focus Group Participants' Responses to Possible Verbal Cues of the Standardized Faculty Member*

Verbal Cue	Response
I don't typically post my PowerPoints until after class, otherwise a lot of students wouldn't show up.	<p>Nora: I've had the first part of the sentence said to me...the last part, I would exchange that with 'this is because I don't have my lesson plans done until the last second.'</p> <p>Albert: I've had professors who have said almost verbatim... 'because students don't show up and I don't take attendance.'</p>

Verbal Cue	Response
	<p>Nora: Most professors who do already have their slides prepared, will give them to me....(or)...They will ask ‘is there any other way that we could accommodate you?’</p>
<p>I usually don’t allow laptops in class. Students tend to get too distracted.</p>	<p>Albert: One hundred percent.</p> <p>Nora: One hundred percent.</p> <p>Erica: It is not relevant to my specific accommodation, but it is definitely a relevant statement.</p> <p>Nora: Not only because people get too distracted but because also they think that the computer screen will cover your face, especially when the class is discussion based...There are professors who just refuse, who just hate laptops so much because of those reasons, or because people play games.</p> <p>Erica: When they say their policies in class, they will say ‘I don’t allow laptops because students get distracted, but if you have an accommodation, speak to me on the side and I’m more than willing to help you.’</p>
<p>For the test accommodations, what do you need me to do on my end?</p>	<p>Erica: Yes.</p> <p>Lisa: When I hand them the form for the first time, they usually don’t question it too much. So, I haven’t heard this in my experience....It’s usually like ‘oh you’re all set.’</p> <p>Erica: This I hear a lot.</p> <p>Albert: One said, ‘If you want to take it at Disability Services, there is no shame...but my (other professor) was like, ‘Alright, everybody sits alphabetically. Can I just change your name on my roster unofficially to starting with Z?’ So I sit in the back corner...but...they have actually come out and said before, ‘Hey, what’s going to be easier for you? Can you do this over here? Can you take the test in my office instead of taking it here?’</p> <p>Erica: A lot of professors...they have the Disability Services students sit in the first two rows...it was fine but it’s a little weird...I think realistically if you just take the time to express the concern to the professor, you will be fine.</p>

Verbal Cue	Response
	<p>Lisa: One other is...quizzes...I'll often just take that in the class with everyone else. Twice teachers have just suggested, 'Hey, how about you just go out of the room if you need a few extra minutes'...it's nice that they suggest that.</p> <p>Nora: Not necessarily worded like this, but they will say something like, 'Ok, so for exam accommodations, what is the best way that I can accommodate you?' or 'What can I do to help you succeed to the best of your ability?'</p>
<p>You can take the test at Disability Services if you want, but in the past I've found students actually prefer to take it with me, since I usually clarify some of the questions during the test.</p>	<p>Erica: I've definitely heard this.</p> <p>Lisa: Yeah.</p> <p>Albert: That's what my professor had me doing.</p> <p>Nora: Sometimes. I found that more in undergrad.</p> <p>Erica: The test even won't last the whole time so this will be more tailored to 'That's fine but I don't want you to miss the second half of the class because the exam is only X amount of time'...in one of my earlier classes they might have said something like 'I usually clarify one of the questions during the exam and if you miss it I take that into account during your grade'...I do remember that happening one time.</p> <p>Nora: What they will add to it is, 'I do recommend you stay in the class. However, you should meet me after class because you will get your extra time in my office'...they might even...say, 'Look, show up to this part of the class and you take yours after, that way I can clarify the questions and then you can take it (at DSO).</p>
<p>I've found that students actually learn better when handwriting their notes in this class. In fact, there was a study that came out recently....</p>	<p>Lisa: Oh yeah. They all love to bring up the study that just came out that handwriting is better. Which is kind of fine, but I just don't think they consider that other people, you know...</p> <p>Erica: I'm a senior. I heard I would say more at the beginning of my college career than now. Also (in my major) this is kind of irrelevant in those classes...I hear more of the distraction thing. I really haven't heard this since freshman and sophomore year.</p> <p>Nora: I've never heard this in my life... definitely the distraction one is the one I've heard more often...they would say 'I don't normally let laptops in...because there's a distraction, people go onto games. It also...impedes on the class discussion that we are</p>

Verbal Cue	Response
	having. If you did have your laptop that would be signaling you out, so I would prefer you don't have it.'
I need to know for sure that the voice recordings aren't going to end up on YouTube or something.	<p>Albert: I've heard threats of, 'You put me on YouTube without my permission, you are going in front of the university senate.'</p> <p>Nora: I've only heard this once before...it was in regards to other people's privacy and they never said I can't record but they kind of were hesitant about it just because they were afraid of other people's personal stories and personal information being recorded.</p>
Okay, but I just need to make sure that I'm being fair to all students.	<p>Albert: Why do you have to be so special?</p> <p>Erica: I've heard it in a different connotation...they say, 'Can you please get that just in writing in case another student comes back and says why do they get to take (the online test) on paper?' It's more of a protection for me and a protection for them. I haven't heard it in a negative connotation. I would say only in a positive connotation.</p> <p>Lisa: No.</p> <p>Nora: I requested the teacher give me the slides ahead of time and she basically said, 'I can't do that. It wouldn't be fair to all students because then other students will ask me for it and I can't give that to you'...and actually at the time I did not have requiring slideshows...in my accommodations.</p>
What exactly is the nature of your disability?	<p>Erica: No.</p> <p>Albert: Yes, in-depth...a couple times.</p> <p>Nora: I will bring it up, what my disabilities are...they might ask for more details on that. They will say something, 'So you just told me you have this disability, so what exactly does that mean?'...the other question...they will say, 'Have you tried this to help?' and they will try to advise me on how to do it.</p>

Student responses about the extent to which they have heard faculty members communicate each verbal cue varied. In some cases, multiple students agreed that a statement or question was familiar within their experience. All four students reported that they had heard faculty members suggest that students take a test with the faculty member, rather than at the Disability Services

Office. In response to the statement regarding laptops being distracting, two students (Erica and Albert) indicated that this resonated with their experiences, “one hundred percent.” Sometimes, multiple participants indicated being familiar with a statement, while other students reported not having heard the same statement, or not with the same frequency. In response to the statement in which a faculty member references a study regarding handwriting notes, Lisa shared that faculty members “all love to bring up the study that just came out that handwriting is better,” while Erica noted that she also had heard this response, but less frequently since she was a sophomore. However, Nora reported never hearing a reference to a handwriting study when requesting faculty members to use a laptop.

In other instances, students reported that the verbal cues were partially reflective of statements or questions that they have encountered from faculty members. For example, Nora noted that she had heard faculty members ask her questions about accommodations. However, she said that the faculty members typically use language such as, “What is the best way that I can accommodate you?” or “What can I do to help you succeed to the best of your ability?” Or, in regard to a faculty member’s reluctance to post PowerPoints, Albert suggested that I revise the hypothetical language of “Otherwise a lot of students wouldn’t show up” to a more concrete or direct “Because students don’t show up and I don’t take attendance.”

In the final part of the focus group, students responded to four prompts that I posed to them to gather further information about their experiences speaking with faculty members about accommodations. In Table 8, I have included a list of the four questions, or prompts, that I asked students, along with their individual responses. First, three students described how they commonly begin conversations with faculty members when meeting to discuss accommodations. Each participant described introducing themselves and initiating a conversation about their

accommodations, or as Nora said, she will “give a spiel.” However, there were differences in aspects of how students described the conversations. For example, Erica pointed out that she tells faculty members immediately about accommodations that she does not view as applying to the current class, as well as stating her preference for taking tests at the Disability Services Office.

Table 8. *Focus Group Participants’ Responses to Open-ended Questions/Prompts*

Question/Prompt	Participant Response
<p>What is the first thing you say to professors when you meet with them?</p>	<p>Erica: I usually go in and introduce myself and say what class I’m in. I say I just wanted to give you my accommodations letter...my accommodation...doesn’t affect many of my classes directly and I’m very upfront about that. I also talk about taking tests in Disability Services, right off the bat.</p> <p>Albert: Hi, my name is Albert, I’m in X class. Thank you for taking the time to meet with me. Can we talk about the class and the syllabus? So this way I could see how my disability needs might impact me here.</p> <p>Nora: With my letter, I usually give a spiel at the same time. My spiel includes ‘this is my letter, this is why I’m getting accommodations. These are my accommodations, A, B, C.’</p>
<p>What is the first thing they say back to you?</p>	<p>Lisa: Great, thanks.</p> <p>Albert: I’m so sorry, how can I help?</p> <p>Albert: Yeah, come in, let’s chat.</p> <p>Nora: They will usually say back to me, ‘Ok, well I can accommodate A, B, C’. Once in a while...I’ve had a professor...they might say, ‘Well I cannot accommodate D.’ Then it’s...‘What else can I do to help accommodate you?’</p> <p>Erica: Usually the response I get is ‘Okay, I’m here, whatever you need.’</p>
<p>Tell me about the attitudes you encounter from faculty when discussing your disability or accommodations.</p>	<p>Erica: Positive.</p> <p>Nora: Understanding, wanting to help.</p> <p>Albert: Concerned, in what they can to do help me. Genuine concern, like ‘I care about your health and well-being. What can I do to help you? Do you have enough resources?’</p> <p>Lisa: Very nonchalant, but in a positive way. Just like ‘yeah, no big deal.’</p>

Question/Prompt	Participant Response
	<p>Nora: I have dealt with one or two professors that either they just had a confused look on their face...or even like, 'Ok, thanks, you can go now' kind of look.</p> <p>Erica: I think most professors have had the experience of students with disabilities before.</p> <p>Nora: A lot of professors I come to are warm. That's a good adjective to describe them. They are very much wanting to help. They really care....the few ones that haven't been lovely and welcoming...those professors have tended to be very systematic. Being very 'give me this, let's talk about A, B, C, get out of my office now.'...They are doing it because they have to, not because they care.</p>
<p>Could you give me some examples of specific things professors have said to you during conversations about accommodations?</p>	<p>Erica: Remind me before the test if you are taking it at Disability Services...</p> <p>Lisa: (responding to Erica) Yeah.</p> <p>Albert: (responding to Erica) Yep.</p> <p>Nora: I have professors say 'Oh well, my child had that (disability) too, I know a few things about it.' They think they are an expert...they don't realize that different people's experience might be different.</p> <p>Albert: (responding to Nora) I had a professor basically tell me the same things.</p>

Next, students described common responses they hear from faculty members immediately after students initiate a conversation with them. Lisa and Erica indicated that faculty members commonly say little in response to receiving the students' letter of accommodations. Albert noted that faculty members commonly express sympathy when he discloses his disability, while Nora shared that faculty members commonly respond by discussing each accommodation and sharing whether they can provide the accommodations. When asked to describe their perceptions of faculty members' attitudes towards accommodations, students referred to faculty members as being "positive," "concerned," "warm," "nonchalant, but in a positive way" and generally experienced in having students in

their class who utilize accommodations. Finally, I asked students to share any specific faculty members' responses to their request for accommodations, which they had not previously mentioned during the focus group. Erica noted, with agreement from Lisa and Albert, that faculty members commonly ask students to remind them later in the semester that the student is taking a test at the Disability Services Office. Finally, both Nora and Albert referred to faculty members' attempting to give them advice regarding their disability and accommodations.

Discussion. The results of the focus group I conducted with four students identified as having a disability (SID) at Eastern University provided insight into the views of students, both toward the draft of simulation protocols I created and other aspects of their experiences when

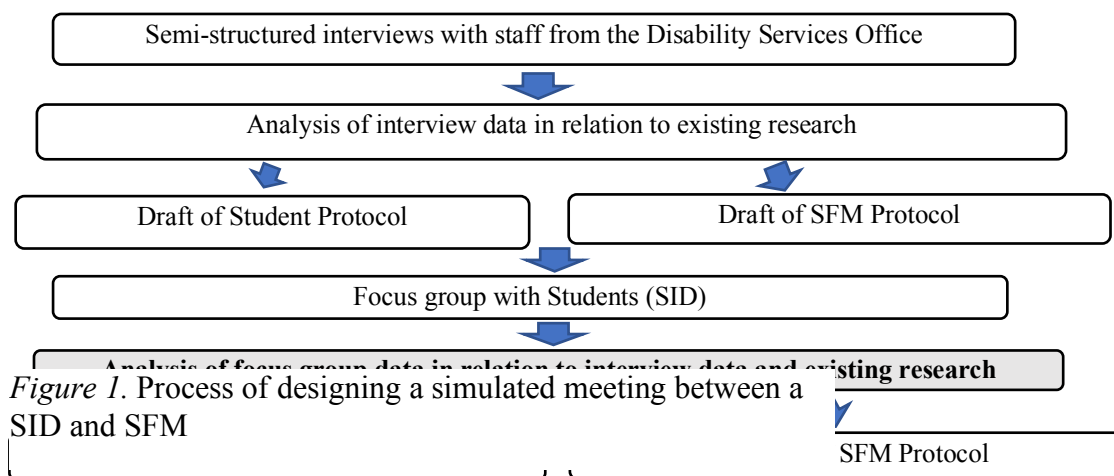


Figure 1. Process of designing a simulated meeting between a SID and SFM

seeking accommodations. When discussing the student protocol, participants voiced critiques of the language that I chose, indicating that they did not always hold the same views as staff members from the Disability Services Office about the accommodations process. For example, while staff members report strongly encouraging students to meet with faculty members in their office, students immediately critiqued this language on the student protocol, with some indicating that it did not match their experience. Students also critiqued language I chose regarding students' typical experiences in the first day of class, such as the announcements they

hear from faculty members. Through these critiques, students identified inauthentic aspects of my initial draft of the student protocol, alerting me to needed revisions. At the same time, students indicated that aspects of the protocol, such as the description of assignments for a 200-level Economics course, were realistic.

When sharing whether the hypothetical statements or questions I wrote on the standardized faculty member protocol resonated with their experiences, responses were mixed. As I described in Chapter Two, disability identities refer to individuals with a range of characteristics and accommodations (though often these accommodations overlap). Given that individuals differ in their needs, not to mention personality, it is not surprising that students responded differently when asked about the same statement. For example, only one student responded that they have been asked to describe their disability, while others indicated that this question is not common. What students have heard in conversation with faculty members varies, even amongst a small group of four students.

At the same time, students' responses confirmed patterns in the type of responses students hear from faculty members, as well as the ways in which students characterize faculty members. For example, students' responses indicate that they have commonly heard faculty members express concerns about laptops being distracting. Hearing students validate this hypothetical statement as realistic was encouraging for me in the process of trying to develop an authentic simulation protocol for the actors who would portray the standardized faculty member. Further, the affirmative responses towards verbal cues I presented to students demonstrated that staff members' description of faculty responses in many cases match what students report experiencing when meeting with faculty members. Further, students' descriptions of faculty members' attitudes towards accommodations are also consistent with the ways staff members

described faculty members, and how faculty members have been described in research: typically, faculty members display positive attitudes towards delivering accommodations and a genuine willingness to help students.

There are several limitations regarding the focus group I conducted. First, there was no racial diversity in the focus group participants. Therefore, the results should be interpreted as providing insight into the experiences of *white* SID, rather than SID in general. Additionally, as with the data I reported for interviews with staff members, these data do not include outliers, such as anecdotes students told in which they referred to experiences that either I interpreted as atypical, or which they explicitly referred to as uncommon. Finally, two students indicated that they needed to leave the focus group after approximately one hour. I originally planned to conduct the focus group for nearly one and a half hours. Recognizing the time limitation, I rushed through some aspects of the focus group, likely limiting the opportunities participants had to respond to me, as well as to each other's comments.

Ethical Considerations of Semi-structured Interviews and Focus Group Data Collection

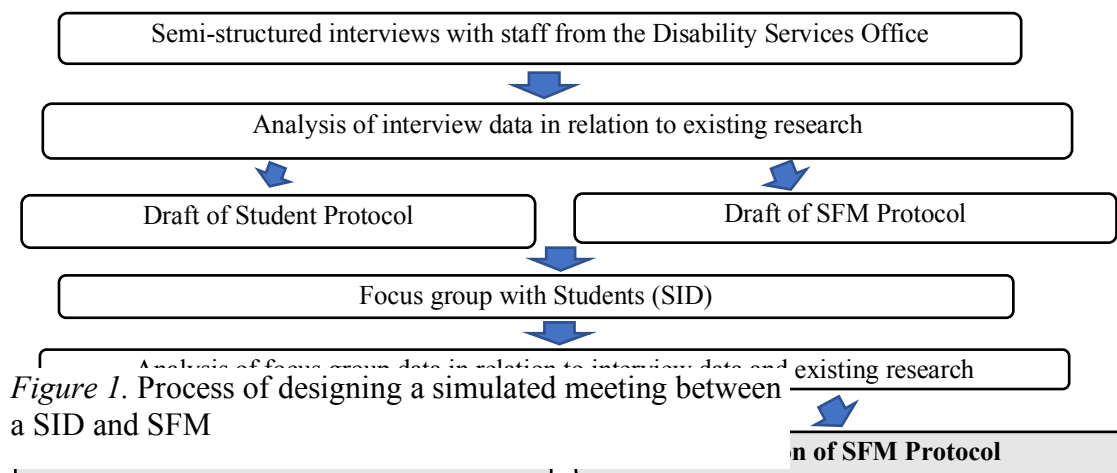
Eastern University's Institutional Review Board (IRB) reviewed the procedures I describe in this chapter, which involved data collection for the purpose of designing a clinical simulation. I submitted an application (#17-111) which was approved by Eastern University's IRB on May 4, 2017, followed by subsequent amendments that included expanded recruitment procedures and compensation. Students who participated in the focus group received a \$25 Amazon gift card as compensation for participation in the focus group. All participants in the interviews and focus group signed a consent form prior to data collection. In the consent form that I created for the focus group, I asked participants to agree to keep both the content of the focus group and the identities of other participants confidential. However, when describing the

risks of participation, I emphasized that I could not guarantee that information about their identities would be kept confidential, because of the group format of the interview.

Revising Drafts of the Simulation Protocols

The goal of conducting the focus group was to draw on the expertise of current students identified as having a disability (SID) as a means to (re)shape the development of the protocols for a simulated discussion about accommodations between a standardized faculty member and a SID. After reviewing the results of the focus group, I began to make revisions to the protocols, beginning with the student protocol. The revised student protocol can be found as Appendix D. Based on focus-group participants' overall rating of the student protocol (somewhat-mostly accurate and realistic), I understood the initial draft of the protocol to be fairly authentic, but in need of modifications before it would be given to SID participating in the simulation.

I began revising the student protocol by returning to the section of results from the focus



group (Table 6) in which students critiqued the specific language of the initial student protocol draft. In Table 9, I describe the revisions that I made to the content of the student protocol. In the first column, I include the direct quotations from the initial protocol draft which students discussed in the focus group. In the second column, I include select data points of students'

commentary, which served as the rationale for my revision. The third column contains the new language that appeared in the revised protocol.

Table 9. *Revisions to Student Protocol*

Initial Draft	Focus Group Data Point(s)	Revised Draft
<p>Last week, before classes began, you received an e-mail from the Disability Services Office. Attached to this e-mail was a letter that lists the accommodations you are provided as a student registered with the Disability Services Office.</p>	<p>You don't necessarily get those a week ahead. It depends when you request them.</p> <p>(suggestion for revising language) You requested your accommodations last week and just received them.</p>	<p>You are registered with the university's Disability Services Office. At the beginning of the semester you received a letter from the Disability Services Office describing your accommodations.</p>
<p>When you registered at the Disability Services Office, you were strongly encouraged to meet with each of your professors, face to face, to discuss how the accommodations will be implemented in each course.</p>	<p>I crossed out strongly encouraged.... I took it upon myself to meet with my professors.</p> <p>I was explicitly told all of this information.</p> <p>It sounds like the same language... 'we recommend you do this' but it is not forced.</p>	<p>When you first registered with the Disability Services Office, your counselor recommended that you meet with each of your professors in their office to discuss how you plan to use your accommodations in that specific course.</p>
<p>You decided you will stop by Professor Williams' office during office hours to share your letter from the Disability Services Office outlining your accommodations.</p>	<p>When the professors go over their syllabus and go over Disability Services Office accommodations, they always mention to do it within the first two weeks. Some mention it, some don't.</p> <p>They have to (mention accommodations on the first day of class).</p> <p>They always mention that 'if you need an accommodation, just talk to me. We'll work something out.'</p>	<p>Professor Williams also pointed to a statement on the syllabus regarding disability accommodations and announced that students who receive accommodations should come talk to them "sooner rather than later."</p>
<p>As you were leaving at the end of the first day of class, you looked down at the</p>	<p>Usually professors will announce their office hours in</p>	<p>Professor Williams mentioned that their office</p>

Initial Draft	Focus Group Data Point(s)	Revised Draft
syllabus and noticed Professor Williams has office hours scheduled later in the first week.	class while going over the syllabus.	hours are on Thursday afternoons.

One of the central ideas that I took away from listening to students in the focus group, and which guided my revisions of the student protocol, is that students' experiences vary, even with regard to navigating institutional processes that appear to be uniform. With this idea in mind, I attempted to broaden the language in the protocol, such that it would apply across students who have an array of experiences. For example, I changed the phrase "You were strongly encouraged to meet with each of your professors" to "Your counselor recommended that you meet with each of your professors in their office." The word "recommended" was suggested by Lisa in the focus group and could apply both to students who had experienced what they would characterize as strong encouragement, or those students who might vaguely recall a polite suggestion.

I revised the final paragraph to reflect students' statements that faculty members announce their office hours in class and also refer to a statement on the course syllabus regarding accommodations. I included the language that the faculty member "announced that students who receive accommodations should come talk to them," reflecting data points from two participants in the focus group. One participant used language indicating that faculty members request students meet with them "within the first two weeks." Recognizing that students' experiences may vary, I chose the broader language to illustrate this data point, writing that the faculty member informed students that they should come talk to them "sooner rather than later." As I mentioned earlier, there are portions of the original draft which focus group participants reported

as authentic (e.g., description of the economics class and assignments). I did not make revisions to these sections of the protocol.

After revising the student protocol, I began revising the initial draft of the standardized faculty member protocol. At the start of the focus group, I had only created a partial draft of the protocol, which included possible verbal cues that the actor portraying the faculty member might communicate to a student in a simulated office hours meeting. In addition to revising the verbal cues, I also needed to create a brief introduction to the context of the simulation and a section describing the background of the standardized faculty member. The complete protocol I created is listed in Appendix E. At this point, I had not included demographics for the standardized faculty member. I discuss demographics in Chapter Four.

On the first page of the protocol, I began by introducing the character of Alicia/Alan Williams, an Associate Professor in the Department of Economics at Eastern University. I chose Professor Williams to be an associate-level professor because I wanted the actor to portray a faculty member who was mid-career, and like the typical faculty member that the focus group participants described, could reasonably have been expected to have encountered several students requesting accommodations during their career. Further, an Associate Professor position is typically accompanied with the protection of tenure. I wanted Professor Williams to be confident and not afraid to assert their advice, or their perceived expertise, as focus group participants and staff members reported that faculty members sometimes do. At the same time, I described Professor Williams as concerned, reflecting a characterization of focus group participants about faculty members. In the remainder of the first page, I describe a general context of the Economics course that Professor Williams is teaching, taking much of the language from the context described on the student protocol.

On the second page of the protocol, I described detailed background information to build the character of Professor Williams. I elaborated on aspects that I referred to on the first page, including Professor Williams' experience, confidence, and concerning demeanor. In the first descriptor of background information, I described what Professor Williams' experiences were in meeting with students to discuss their accommodations. A central purpose of this first descriptor was establishing that Professor Williams feels they "are knowledgeable and understanding of students who have disabilities." In the second descriptor, I described their demeanor as "positive and encouraging," reflecting language from students in the focus group. In addition, I noted that Professor Williams prefers to sit and discuss students' letters of accommodations with them. The purpose of this statement was to help ensure that the actors would assert themselves and engage in a conversation, rather than simply take a student's letter and say goodbye, as focus group participants and staff members indicated sometimes happens.

In the third descriptor of background information, I described that Professor Williams is "not shy about politely offering advice to students about how they might best use their accommodations to succeed." The purpose of this statement was to establish Professor Williams' tendency to offer advice about students' accommodations, a characteristic discussed in the focus group and staff member interviews, and which would be manifested through a specific verbal cue. In the fourth and final descriptor, I described Professor Williams as I understood typical faculty members based on the perspectives of focus group members – "willing to comply with accommodations requests." Finally, I added a caveat: "However you are structured and have a routine...you tend to be apprehensive about accommodations that require you to alter your typical teaching practices, or to change aspects of your course policies." This descriptor was designed to reflect the rigidity of some faculty members, who occasionally placed limitations

on their willingness to comply with accommodations, a tendency indicated by Nora in the focus group and by staff members at the Disability Services Office.

On the remaining two and a half pages of the protocol, I described the verbal/behavior cues which each actor portraying Professor Williams would convey during the simulation. The first cue provides guidance to the actor for greeting the students. The second cue instructs the actor about how to respond to the student once they present their letter of accommodations: “Tell them that you need a minute to look over the letter.” This cue was dependent on participating students bringing their letter of accommodations to the simulation, an issue I will address in Chapter Four. At this point, I expected that a participating student might begin to describe their accommodations or give a “spiel,” as one focus group participant described. However, recognizing the variability of students, I used the third cue as a possible explicit question to ask the student to describe their accommodations, if the student did not already begin taking a lead in the discussion. I used language from one of the focus group participants, instructing the actor to ask the student “So what does your disability mean for you as a student in this class?” Further, I instructed that actor to respond reassuringly to the students’ description, reflecting the supportive and positive attitude characterized by students and staff members in my data collection.

However, I provided specific responses for the actor to respond to regarding certain accommodations, described in the fourth and fifth cues. Describing verbal cues related to specific accommodations was challenging at this point. While I had plenty of data from the interviews and focus group regarding the types of statements or questions Professor Williams could say, I had yet to recruit participants for the simulation. Therefore, I was unsure about the exact accommodations that Professor Williams would be reading and responding to on the student’s letter. I decided to take an educated guess based on what staff members from the

Disability Services Office reported about common accommodations that students have, recognizing that I would need to revise this section of the protocol after recruiting participants in the simulation (described in Chapter Four).

In the fourth cue, I instructed the faculty member to ask the student if they typically complete tests at the Disability Services Office, a common question reported by staff members given that students who have testing accommodations are commonly allowed to choose the environment in which they complete tests. Given that staff members report that many students at Eastern University prefer to complete tests at the Disability Services Office, I expected that the actor would need to be prepared for most students to respond affirmatively to their question. I then instructed the actor to respond by saying, “That’s fine. But some students in the past have preferred to take the tests with me, so they don’t miss any questions during the test.” I selected this cue to position Professor Williams as giving advice to the student, albeit not forcefully, about how they might use their accommodation to succeed.

In the fifth cue, I described two possible responses to two different accommodations that the student might discuss in their meeting with Professor Williams. The first possibility was Professor Williams sharing a common concern identified in my data collection in response to a student’s accommodation to use a laptop or recording device in class. I instructed the actor to either express concern about students being distracted by the use of a laptop, and to also mention a recent study indicating that students learn better if they handwrite their notes. Then, I asked the actor to follow up by expressing concern that if their lecture is recording, it might “end up on YouTube.” In asking Professor Williams’ character to convey these cues, I deliberately wanted to demonstrate resistance towards certain accommodations, using the common ways that students

described in the focus group. In the sixth and final cue, I instructed the actor to thank the student, and then ask, “Is there anything else you wanted to talk about today?”

Conclusion

In this chapter, I have described the process I used to design a single clinical simulation between a student identified as having a disability (SID) and a standardized faculty member. I reported the results of data collection conducted at Eastern University via interviews with staff members at the university’s Disability Services Office and a focus group with SID. The results provided me with information to create protocols for the students who would participate in the simulation, and for the actors who would portray a fictional faculty member – Professor Williams – in a consistent manner. In the next chapter, I describe how I implemented the actual simulation, including recruiting student participants, training actors, and further revising the protocol for the actors. I also describe the data collection and analysis I conducted to gain data that would allow me to address this study’s central research questions regarding how SID engage in and reflect upon participating in a simulated meeting with a standardized faculty member.

Chapter Four:

Methodology (Simulation Implementation)

In Chapter Three, I described how I analyzed qualitative data that I collected via a focus group with participating students identified as having a disability (SID) and interviews with staff members from the Disability Services Office at Eastern University. I used the results of the data I collected as the rationale for drafting and revising protocols to use as the structure of a simulated meeting between a postsecondary student identified as having a disability (SID) and a standardized faculty member. By the end of this process, I created a student protocol (Appendix D) that described circumstances that SID commonly experience at Eastern University. I also created a standardized faculty member protocol (Appendix E) for actors to use to communicate common statements and questions that SID actually encountered when discussing disability related accommodations with faculty members. In this chapter, I continue discussing the methodology of this study by describing how I implemented the actual simulation as a means to collect data to answer my research questions regarding how students identified as having a disability participate in and reflect upon a simulated meeting with a standardized faculty member.

I begin this chapter by describing how I prepared to implement the simulation. I describe the facilities provided by a nearby medical university for conducting the simulation and how I recruited students at Eastern University to participate in the simulation. Next, I describe training actors to portray Professor Williams, the standardized faculty member, in the simulation. I also share further revisions I made to the standardized faculty member protocol during the process of training actors, which overlapped with and was influenced by recruitment of student participants. In the remainder of the chapter, I describe the methods I used to collect and analyze data during

and after the simulation, including video-recorded simulations, small group reflections of participating in the simulation and follow-up individual interviews.

Preparing to Implement a Clinical Simulation

In this section, I discuss the logistics of preparing to implement a simulated encounter between a SID and standardized faculty member. I begin by discussing the facilities in which I implemented the simulation, followed by a discussion of the participants, and the training I conducted to prepare actors for the simulation.

Simulation facilities. I developed a simulation for this study that was implemented using the facilities at Northern Medical University, a medium-size public medical university located adjacent to Eastern University. Northern Medical University has a Simulation Center with 22 rooms with dual wall-mounted cameras that record audio and video of the simulations. The simulation rooms are typically used for medical simulations conducted with participating medical students, as well as for simulations with pre-service teachers using Dotger's (2015) clinical simulation model. The Simulation Center employs professional actors who are trained to portray standardized individuals (e.g., standardized patients, standardized parents of students). The Simulation Center provided the actors that I (and the Director of the Simulation Center) trained to portray the standardized faculty member used in the simulation for this study.

I had previously developed a simulation with university student participants using the facilities at Northern Medical University's Simulation Center; therefore, I had an existing relationship with staff at the Simulation Center. I contacted the Director of the Simulation Center to request to reserve simulation rooms for this study. We agreed on conducting the simulations over a two-day period, with a two-hour block of time reserved for each of the two days.

Participant recruitment and demographics. After confirming dates for the simulation and conducting the initial data collection to draft simulation protocols (described in Chapter Three), I began to recruit students to participate in the simulation. My criteria for participation in the study were that individuals were enrolled as students at Eastern University and registered with Eastern University's Disability Services Office. In other words, participants had to be postsecondary students identified as having a disability. I recruited participants in two ways. First, I sent a recruitment e-mail to staff at the Disability Services Office, who forwarded my e-mail to students on their listserv. I also appeared at the Disability Services Office's pre-orientation for first-year students to announce the opportunity to participate in the simulation and research study. I arranged to meet individually with students who expressed interest in the study, using a private conference room at Eastern University. I discussed the purpose of the study, risks and benefits of participation, and provided potential participants with a consent form and time to read this form and ask questions about participating in the study. A total of 17 individuals initially consented to participating. Two individuals did not participate in the study beyond the initial interview and I have not included any data for these two individuals. Therefore, the actual number of students who participated in the simulation was 15.

I conducted a brief (5-10 minutes) interview with each participant to collect demographic data and find out about their background related to disability and accommodations. I have included the protocol for the initial interview in Appendix F. In Table 10, I introduce the participants, using pseudonyms, and outline their demographic information. The demographics listed are self-reported. For example, I listed the disability identity that participants described, rather than using the institutional category of disability, which may differ from a student's self-reported identity. The exceptions are Abby, Arlene and Brian who identified with specific

physical health-related labels, and Sam, who identified with a specific mental health disorder that is less common than others (e.g., ADHD). To protect their identities, I listed their disability identities using the broader categories of “physical health” or “mental health.”

Table 10. *Simulation Participants’ Demographic Information*

Name	Age	Gender	Race	Year	Disability Identity
Allison	19	F	White	Freshman	Testing anxiety; ADHD
Arlene	25	F	White	Graduate	Physical health
Brian	18	M	White	Freshman	Physical health
Caroline	18	F	White	Freshman	Slow processing, learning disability
Chris	21	M	White	Senior	ADHD
Elisa	20	F	White	Junior	ADHD; Mild dyslexia
Jared	18	M	White	Freshman	ADHD
Karen	21	F	White	Senior	Generalized anxiety; Obsessive Compulsive Disorder; ADHD combined type
Kimberly	19	F	White	Sophomore	Hearing impaired
Marissa	19	F	White	Sophomore	Learning disability
Mark	18	M	Hispanic	Freshman	Learning disability, dyslexia, auditory processing
Nick	18	M	White	Freshman	ADHD
Nora	18	F	White	Freshman	Testing anxiety
Sam	22	M	Asian	Senior	Mental health
Scott	20	M	White	Junior	ADHD

The sample of students who agreed to participate in the study consisted of higher percentages of white and female students than the SU population. Fifteen out of 17 (88%) students identified as white, compared to 52% of the overall population at Eastern University; 10 out of 17 (58%) of the students identified as female, slightly higher than the 53% at Eastern University. The fact that only two students identified in categories other than white – 1 Asian, 1 Hispanic – was disappointing to me as a researcher, but not surprising. When I expressed my

desire to recruit diverse participants for the simulation, a staff member at the Disability Services Office told me that it would be difficult because they believed the population of SID was “whiter” compared with the population at Eastern University. If accurate, the claim does not necessarily indicate that there are proportionately less minoritized students who might identify with a disability at Eastern University, but only that fewer of these students disclose a disability, seek out and/or are recognized by the Disability Services Office. The staff member was unable to provide me with specific demographics of SID relating to race or gender.

However, the same staff member did provide me with a list of the number of SID enrolled in the 2016-2017 school year, sorted by disability category (Table 11). The categories in Table 11 are based on categories reported by the university to the state government and in some cases do not directly correspond to the self-reported disabilities described by students participating in this study (Table 10, far right column).

Table 11. *Number of Eastern University Students Identified with Disabilities in 2016-2017*

Disability Category	# of Students at Eastern University
ADHD	685
Autism Spectrum Disorder	16
Communication/Speech	5
Learning Disability	546
Motor	12
Blind	8
Low Vision	25
Deaf	3
Hard of Hearing	23
Mental Health	462
Basic Chronic Medical Condition	171
Mobility	14
Orthopedic	26
Alcohol/Substance Abuse Recovery	1
Complex Chronic Medical Condition	33
Traumatic Brain Injury	37
Temporary Disabilities	65
Total number of students identified with a disability, counted once (380 students are identified with multiple disabilities)	1719

However, when comparing students' self-reported disabilities with Eastern University's disability categorization, the sample in this study appears to reflect the four largest populations of disability categories. Eight participants identified with ADHD, the largest category of disability at Eastern University. Four participants identified with a learning disability or a label that is commonly associated with a learning disability (e.g., dyslexia), the second largest category of disability. Four participants identified with labels that would likely be considered under the broad category of mental health (e.g., anxiety), the third largest category of disability. Three participants identified with physical health conditions that would likely fall under the fourth largest category, basic chronic medical condition. Finally, one participant identified as hearing impaired, which would correspond to the category of hard of hearing. Taken together, the participants' demographics mostly reflected the most common categories of disability that are present across the student population at Eastern University.

I audio recorded and transcribed initial interviews with participants. In addition to using the initial interview as an opportunity to meet students face to face and ask them about their identities, I also asked questions about their background, such as whether they had previously been identified as having a disability as a K-12 student or received disability accommodations. Students sometimes indicated uncertainty about what previous experiences they had related to disability and accommodations. I did not feel I could accurately represent participants' background information in a table. Therefore, I provide a brief snapshot of each participant in narrative format. While I have not included the students' specific field of study to protect their identity, the 15 students represented fields of study across six different colleges, or schools. Two students were enrolled in a college adjacent to Eastern University, that is not academically a part of Eastern University but is also served by Eastern University's Disability Services Office.

Allison, 19, identified as a white female. She is a freshman who registered with the Disability Services Office prior to her first semester. Allison identified as having testing anxiety and ADHD. She was first diagnosed with anxiety and ADHD when she 15. In addition to receiving copies of notes from teachers in high school, she reported receiving testing accommodations, including extended time and testing in a separate location. In her first semester, Allison reported that she gave a copy of her letter of accommodations to faculty members at the end of class, but that it “wasn’t really a formal discussion.”

Arlene, 25, identified as a white female. She is a graduate student who attends a nearby college whose accommodations are also coordinated by Eastern University’s Disability Services Office. She registered with the Disability Services Office prior to her first semester as a graduate student. She identified with a physical health-related condition. Arlene reported that she did not previously receive formal accommodations when she was first diagnosed with the health condition at her former college, because she was unaware that her diagnosis would qualify her as having a disability. Arlene reported having seven or eight conversations with faculty members about accommodations, and that she typically e-mails faculty members to arrange to discuss accommodations during their office hours. She described that she is required to meet with faculty members because one of her accommodations is an attendance modification, in which she is asked by the Disability Services Office to complete a contract with each faculty member in which they agree on “how many classes I can miss before it affects my grade” and discuss how the faculty member will grade Arlene’s class participation in light of the attendance modification.

Brian, 18, identified as a white male. He is a freshman who registered with the Disability Services Office prior to his first semester. He identified with multiple physical health-related

conditions. Brian received Special Education services in high school, beginning during his freshman year. In high school, he participated in meetings about his Individual Education Program (IEP) two or three times. He received extended time on tests and a separate location, as well as having access to water and a snack during class. Brian reported meeting with four or five faculty members in their office during his first semester.

Caroline, 18, identified as a white female. She is a freshman who registered with the Disability Services Office prior to her first semester. She identified as having “extremely slow” processing and a learning disability. She began receiving accommodations in high school, including extra time for tests. During this semester, her first, she reported that she had conversations with faculty members about accommodations but that she “didn’t handle it as well as I should have” because she couldn’t find the letter outlining accommodations during the beginning of the semester and therefore had been having “last minute” conversations with faculty members about utilizing accommodations. Caroline acknowledged that it would have been better to have conversations with faculty members at the beginning of the semester and she attributed not doing so to “the stress of being a freshman” and underestimating her need for accommodations. When she has talked about her accommodations with faculty members, she reported that she has gone to their office, or in one instance, e-mailed the faculty member her letter of accommodations prior to a test.

Chris, 21, identified as a white male. He is a senior. Chris identified with Attention Deficit Hyperactivity Disorder (ADHD). Chris received Special Education services in K-12 school, beginning in 2002. Chris described that he prefers not to meet with faculty members to discuss accommodations during their office hours because it is inconvenient. Instead, he typically e-mails faculty members his letter of accommodations or gives them the letter at the end of class.

Elissa, 20, identifies as a white female. She is a junior who registered with the Disability Services Office prior to her freshman year. She identified with Attention Deficit Hyperactivity Disorder (ADHD) and mild dyslexia. Elisa reported receiving Special Education services since she was in 2nd grade and had attended three meetings related to her Individualized Education Program (IEP). She reported receiving accommodations including use of a computer in class, extended time on tests, access to class notes, and “the ability to have things read to me.” Elisa reported that during her first year at Eastern University, she met with the faculty member for each of her courses during their office hours. However, since then, she generally speaks to faculty members before class “so the conversation is cut short and they really can’t ask follow-up questions.” She further reported that “going to office hours is a pain” because of scheduling conflicts.

Jared, 18, identified as a white male. He is a freshman who registered with the Disability Services Office prior to his freshman year. He identified with Attention Deficit Hyperactivity Disorder (ADHD). He was unsure of whether or not he received Special Education services or accommodations but believed he had an Individualized Education Program and a 504 accommodations plan during his K-12 schooling. In his first semester, Jared reported speaking with faculty members at the end of class to discuss testing accommodations.

Karen, 21, identified as a white female. She is a senior who registered with the Disability Services Office early during her junior year. She identified “with disabilities on the mental health and neurodevelopmental side of things.” Karen reported being diagnosed with “generalized anxiety, obsessive compulsive disorder and recently Attention Deficit Hyperactivity Disorder.” Karen also reported that she has had close to 15 conversations about accommodations with faculty members and either meets with faculty members in their office hours during the first

week of the semester or speaks with them in the classroom at the end of class. One of Karen's accommodations is extensions for class assignments, which she described as involving "a form that needs to be filled out with each professor" and that the process of completing the form will vary depending on the faculty member and the course. Karen described how she gives a copy of this form to the faculty member, keeps a copy for herself, and submits one to the Disability Services Office. Karen never received Special Education services or disability-related accommodations prior to her junior year at Eastern University.

Kimberly, 19, identified as a white female. She is a sophomore who registered with the Disability Services Office prior to her freshman year. Kimberly identified with a hearing impairment. Kimberly reported that she received accommodations in K-12 schooling, beginning in elementary school. She also reported that she typically talks to faculty members about accommodations in the classroom at the end of class.

Marissa, 21, identified as a white female. We were unable to arrange to meet for an initial interview. However, she provided demographic information via e-mail (listed in Table 11).

Mark, 18, identified as a Hispanic male. He is a freshman student who registered with the Disability Services Office prior to his first semester. He identified with a learning disability and specifically with dyslexia and auditory processing disorder. Mark reported that he had an Individualized Education Program (IEP) plan in K-12 schooling and began receiving Special Education services in 7th grade. Mark also reported that he attended one IEP meeting in 7th grade but that he didn't remember much about it. "It was seventh-grade, I think I was too scared to be there. I don't really remember it," he told me. Mark reported that he has discussed accommodations with seven faculty members, meeting them in their offices.

Nick, 18, identified as a white male. He is a freshman who registered with the Disability Services Office prior to his freshman year. Nick identified with Attention Deficit Hyperactivity Disorder (ADHD) which he was first diagnosed with in 8th grade. Nick reported providing his letter of accommodations to two faculty members at the end of class and described these as “awkward” and “intimidating” encounters in which there was “no real exchange.” Nick added that, “I think it was more on me...because I didn’t know what to do,” though he also mentioned that he “did exactly as I was told” by the staff at the Disability Services Office. Nick also reported that he did not receive accommodations prior to coming to Eastern University.

Nora, 18, identified as a white female. She is a freshman student who attends a nearby public college whose accommodations are also coordinated by Eastern University’s Disability Services Office. She registered at the Disability Services Office prior to her freshman year. She identified with generalized anxiety and test anxiety. Nora reported that she had talked to three faculty members about her accommodations, including at the end of class and during office hours. Nora also reported that she did receive extra time on tests in high school, though “it wasn’t really a documented thing.”

Sam, 22, identified as an Asian male. He is a senior who registered with the Disability Services Office during his junior year. Sam identified with a mental health disorder, which I chose not to identify, to protect Sam’s identity. He reported that he had not previously received accommodations or Special Education services during his K-12 schooling. Sam also reported having conversations with four or five faculty members about accommodations, typically during the faculty members’ office hours.

Scott, 20, identified as a white male. We were unable to arrange to meet for an initial interview. However, he provided demographic information via e-mail (listed in Table 11).

A final purpose of my initial interview with participants was to find out about the disability-related accommodations that participants utilize. As I discussed in Chapter Three, Eastern University students are typically e-mailed a letter outlining their accommodations by staff at the Disability Services Office. When I asked each participant about the accommodations that they typically receive, several students offered to show me a copy of the letter outlining their accommodations, and others forwarded me a copy via e-mail. In Table 12, I have listed all the accommodations that each student is approved to receive, according to their letter from the Disability Services Office.

Across the 15 participants, the students receive 20 different accommodations. Certain accommodations overlap more than others. For example, 14 of the 15 participants receive the accommodation of extra time on tests (either 1.5x or 2x). 10 of the 15 participants have the accommodation for use of a laptop and/or recording device for notetaking. Other accommodations are only approved for a minority of participants. For example, only three participants have the accommodation of long-term extensions on assignments and only one participant has the accommodation of using a simple function calculator. Knowing the different accommodations that participants have access to was important for the purpose of implementing the simulation. I needed to train actors who would portray a faculty member that responded to different participants' request for accommodations in a standardized manner. In the interest of standardization, the overlap of accommodations amongst participants was helpful because I anticipated that I could train actors to make similar statements or ask similar questions across participants who were discussing the same accommodation. At the same time, other accommodations that only a few participants received posed a greater challenge: given the participants' array of accommodations, how could I train actors to engage with participants in a manner that both created a shared experience amongst participants yet was still authentic to their individual circumstances?

Training actors to portray Professor Williams. As is typically done with medical and teacher education simulations, the Director of the Simulation Center at Northern Medical University arranged a training for the actors who would portray the simulated individual, Professor Alicia/Alan Williams. The training was held during the week prior to the simulation dates. I was invited to facilitate this training along with the Director of the Simulation Center,

who was experienced in the typical challenges that arise when attempting to train actors to portray a character in a standardized manner.

Prior to the trainings, I requested the following regarding the demographics of the actors: mixed gender, age range of approximately 50-55 years old, and as racially/ethnically diverse as possible. I requested that the actors reflect multiple genders and racial/ethnic backgrounds because I was interested to know whether participants felt that these identities were significant when engaging in a conversation with a standardized faculty member. I chose the age range of 50-55 years old because I wanted the actors to portray a faculty member who was in the middle of their career and who would be likely to have had several conversations with students identified as having a disability about accommodations. Based on these criteria, the staff at the Simulation Center was able to secure the availability of four actors. Amongst the four actors, two were male and two were female. Both males were white; for the females, one actor was white and the other was African American. All actors were in the age range of 50-60 years old.

I went to the Simulation Center at Northern Medical University to conduct trainings for actors who would portray Professor Williams. Training consisted of approximately 90 minutes of discussion among the Director of the Simulation Center, the actors, and me. One actor was unable to attend the initial training, so I returned the following day for an individual training with that actor. The Director of the Simulation Center and I began the training by using the student protocol to provide some context for the simulation. Whereas participating students would not see the protocol for the actors, I did provide the actors with a copy of the student protocol (Appendix D), which we read together. This allowed for the actors to discuss and ask questions about the context of the situation – a university student identified as having a disability meeting with their economics professor to discuss disability-related accommodations.

I then distributed copies of the standardized faculty member protocol to the actors (Appendix E). I informed the actors that I wrote the standardized faculty member protocol based on what students, staff, and existing research studies indicate about the common ways that faculty members respond to students who initiate conversations about disability-related accommodations. Accordingly, I emphasized that I wanted the actors to portray a faculty member who demonstrated a common demeanor, rather than a caricature or extreme portrayal, such as a faculty member who is older, rigid, and is completely unaware of the language and policies related to disability accommodations. I pointed out the adjectives in the protocol to describe Professor Williams, such as confident and concerned. I informed the actors that Professor Williams is a tenured faculty member, who is secure in their job and who is genuinely concerned about what they perceive is in the best interest of their students.

I then proceeded by reading aloud the standardized faculty member protocol to the actors with explanations for each section. I discussed the course that Professor Williams was the instructor for a fictional course – Economics 201, Principles of Economics. I explained the assignments that Professor Williams required of the students, and Professor Williams’ teaching style of using PowerPoint slides and expecting students to take a lot of notes. I also introduced the concept of “office hours” to the actors, noting that participants usually visit faculty members in their office to ask questions and share concerns about a course assignment, or in this case, to discuss disability-related accommodations. Because the actors were not real economics professors, I instructed them that if a participant asked a specific question related to the course or assignments that they felt they could not answer, they could respond by telling participants to “check the syllabus” or that they would follow-up via e-mail with a response to the participant’s question.

I then described the character background information in the standardized faculty member protocol. I emphasized to the actors that Professor Williams has frequently experienced receiving students' letters that outline their approved accommodations and therefore would not be surprised to receive the letter in the simulation and to discuss common accommodations such as testing modifications (i.e., extended time). I also emphasized that Professor Williams is concerned about supporting students, likes to sit and discuss the needs of their students, and is not shy about making suggestions about how the student might best utilize their accommodations to be successful in the course.

Finally, I described each of six individual verbal cues which I asked the actors to communicate during the simulation. Because this was a student-initiated meeting, I informed the actors that they should expect the initial verbal communication to vary significantly. For example, in the data I collected in Chapter Three, two students indicated that they have prepared speeches which they immediately begin when they enter a conversation, whereas other students take a more passive approach to the conversation. While going over the verbal cues, I also showed the actors a sample accommodations letter for one of the participants. I asked the actors to read over the letter and clarified their questions about what each of the accommodations refers to (i.e., 1.5 time on a test indicates that a student is allowed 1 hour and 30 minutes for a test their peers must complete in 1 hour).

Throughout the training, the actors and Director of the Simulation Center raised and discussed a number of hypothetical, or 'what if', questions. For standardization purposes, it was important that all actors were aware of how they should respond to a hypothetical situation in the simulation, so that they could enact Professor Williams' character in a consistent manner. In

Table 13, I have listed a number of issues that we discussed, as well as how we resolved the problem.

Table 13. *Hypothetical Situations and Resolutions Discussed during Actor Training*

Question	Resolution	Rationale
If the student doesn't introduce themselves when they enter Professor Williams' office, should Professor Williams ask them their name and what course they are enrolled in?	Yes, ask the student their name and what course they are in, if the student does not already offer the information.	It is the first week of class and it is unlikely that a professor would know all of their students' names. Faculty members at Eastern University typically teach more than one course.
Should Professor Williams communicate verbal cue number 4 ("what exactly does your disability mean for you as a student in this class?") even if the students had proactively shared about their disability?	No. If the student shares their disability and how they view it in relation to the course, skip this verbal cue.	It is not necessary to artificially insert a verbal cue if the participant has already answered the question on their own.
How would Professor Williams arrange to provide extra time for the student to take the test, if the student says that they would prefer to take the test with Professor Williams, instead of the Disability Services Office?	Offer to sit with the student in the classroom for extended time, or in your office. Be flexible, let the student choose their preference.	Consistent with their character outline, Professor Williams is willing to accommodate the students. Whatever solution the student and professor agree upon is not salient for the standardization of the simulation.
What if a student responds to Professor Williams' concern about the student recording lectures by adamantly saying that they will be recording the lectures anyway?	Respond by saying that you plan to get in touch with the Disability Services Office to clarify the policies related to this accommodation.	Staff members from the Disability Services Office report that faculty members frequently reach out to them with concerns over students recording lectures.
What if the student says "I don't like your attitude, Professor."	Reiterate that you are only concerned about what is best for the student and want to figure out what works for them to be successful.	Consistent with their character outline, Professor Williams is like many faculty members, making suggestions out of genuine concern for the student.
What if a student has the accommodation of advance access to PowerPoint slides? There is not a response on the current protocol for Professor	Revise the protocol to include a response either related to Professor Williams' concern about students attending class	Since several participants have the accommodation of advance access to PowerPoint slides, it is important to have a response prepared for Professor

Williams to communicate to the student.	when providing PowerPoint slides ahead of time, or about them not having the PowerPoint ready before class.	Williams. Both responses under consideration were taken from ideas that came out of the student focus group in Chapter Three.
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As an experienced trainer of actors who portray standardized patients in medical simulations, the Director of the Simulation Center was helpful during our discussion, informing the actors what they might expect during the simulation, clarifying aspects of the context of the simulation and suggesting responses to certain hypothetical situations. For example, the Director of the Simulation Center clarified that the actors needed to actually read the letter of accommodations handed to them by the participant, rather than pretending to read the letter as they might if they were acting on stage.

During the training, I also became aware of an important challenge that remained for developing a standardized faculty member – how would Professor Williams respond to different students, each of whom would be discussing a letter that outlined accommodations that only sometimes overlap across students. My goal was to create a component of standardization and authenticity in the simulation. In other words, I wanted students to be able to discuss their actual accommodation letters, but I also recognized the limitations of preparing actors with too many possible responses that they would be unable to enact them, nor to do so in a consistent manner that would create a shared experience for participants to reflect upon. During the training, I informed the actors that I was planning to shorten the students' accommodation letters for the purposes of the simulation by removing some accommodations and thereby reducing the amount of accommodations that they would need to be prepared to respond to. However, after the training, I felt that I was focusing too much on the standardization of the simulation at the expense of providing an authentic opportunity for participants to practice discussing their

accommodations. I therefore decided to revisit the standardized faculty member protocol and make revisions that would allow participants to discuss any and all of their accommodations, while still preparing the actors to respond in as much of a standardized manner as possible.

Revising the standardized faculty member protocol. In Chapter Three, I discussed how I used data from interviews and a focus group to draft a standardized faculty member protocol to guide the actors who would portray Professor Williams. Following the training of the actors, I revisited the standardized faculty member protocol (Appendix E) to revise the verbal cues. My goal in the revisions was to prepare the actors to respond to participants who would present them with their complete letter outlining their accommodations. The revised verbal cues for the standardized faculty member protocol are listed in Appendix G.

For the first three verbal cues, I did not make revisions because the cues appeared to be applicable to any students identified as having a disability (SID) who would participate in the simulation (i.e., greeting, reading over the letter of accommodations, asking generally about the students' needs). The fourth cue was a question related to testing accommodations. I was uncertain whether this cue would be applicable to all participants. Fourteen of the 15 participants that I recruited had the accommodations of extended time for tests (either 1.5x or 2x) which, based on my data from Chapter Three, would make the verbal cue applicable ("Do you typically take tests at the Disability Services Office?"). However, one participant, Brian, did not have extended time as an accommodation, but did have the accommodations of using a personal computer for tests. I followed up with a staff member that I had interviewed who worked for the Disability Services Office to check whether the fourth cue would be relevant in a conversation between a faculty member and a student whose accommodation was to use a personal computer for completing tests. The staff member assured me that asking a student about where they would

like to take a test would be relevant for a number of different testing accommodations, including both extended time and use of a personal computer. The issue of where students would like to take a test therefore appeared relevant to all 15 participants and I decided not to make a revision to the language in the fourth cue.

The portions of the verbal cues on the protocol that I did revise were related to discussions of accommodations outside of testing accommodations. By delivering the fifth cue, I wanted the actors to respond to *one* other accommodation (i.e., not related to testing). I broadened the possible accommodations to which the actor could choose to respond, from the original two accommodations – use of laptop/recording device and extensions on assignments – to include a possible response to a third accommodation, which several participants have access to – advance access to PowerPoint slides. When responding to the accommodation of advance access to PowerPoints, I added language that the actor should, “Tell the student that in the past you have given out the PowerPoint slides before class, but that students don’t tend to show up.” This language was taken directly from students’ responses in the focus group, indicating that a typical concern of faculty members regarding providing students PowerPoints ahead of class is that it may decrease students’ attendance.

By choosing one of the three accommodations listed in the revised fifth verbal cue, actors would be able to respond to a least one non-testing related accommodation for 12 of the 15 participants. The verbal cue would not be relevant for the remaining three participants – Jared, Kimberly, and Nora – who only received testing accommodations. I chose not to add any further verbal cues for these three participants because I did not want to extend the conversation in a way that might not be authentic for the participants. Instead, I accepted that I was not likely to gain data for Jared, Kimberly, and Nora related to the fifth verbal cue.

In my revision of the sixth verbal cue, I attempted to address a contrasting challenge – how the actors would respond to students who had several accommodations that would not be fully addressed even if the fourth and fifth verbal cues were delivered. For example, Arlene, Caroline and Marissa all receive six or more accommodations. I wanted the actor to be prepared to respond to these accommodations. At the same time, I was concerned that I would overwhelm the actors by asking them to memorize so many verbal cues in response to each individual accommodation. In addition, based on what students in the focus group reported in Chapter Three, faculty members do not typically make comments or ask questions about each of their accommodations. To address this challenge with the sixth verbal cue, I instructed the actors to pick only one additional accommodation and ask the student, “How does that typically work?” I chose this language based on a data point from the focus group in Chapter Three, in which a student reported faculty members sometimes asking how an accommodation “works.” The sixth cue was only intended to apply to students who had multiple accommodations that were not completely addressed in verbal cues four and five. For example, the sixth verbal cue would not be relevant to Karen because her accommodations of extended time (fourth verbal cue) and long-term extensions (fifth verbal cue) would have already been addressed. I e-mailed the revised version of the standardized faculty member protocol to the Director of the Simulation Center, who e-mailed it to the actors.

Implementing the Simulation

Approximately three days prior to the first day of the simulation, I e-mailed each of the 15 participants. In this e-mail I reminded students of the day and time that they had signed up to participate in the simulation, as well as the location. I attached an individualized mock letter outlining accommodations to each participant’s e-mail address (see example in Appendix H).

For the most part, these single page documents mirrored the students' actual letters of accommodations that were developed and provided to the students by Eastern University's Disability Services Office. Each letter included a list of the actual accommodations which participants were approved to receive during the Fall 2017 semester, in which I conducted this study. The difference between the mock letter of accommodations and an actual letter was that I had removed identifying information such as the students' name or counselor. Instead, I included a student identification number which corresponded to each participant in a document that only I could access. Additionally, I shortened the introductory language of the letter and removed general information about the Disability Services Office, so as to reduce the amount of information that the actor would need to read in the simulation.

On the first day of the simulation, I arrived at Northern Medical University's Simulation Center to meet the Director of the Simulation Center. Shortly after, the four actors arrived who would be portraying the standardized faculty member, Professor Williams. I spent a few minutes with the actors, clarifying points and answering any questions about the revised protocols that they had recently received. At this point, the Director of the Simulation Center had completed the schedule, assigning each actor to a simulation room that would correspond to the simulation room assigned for each participant to enter (via an alternative door) to meet with the actor, Professor Williams. Because I was now aware of which actor was meeting with which participant, I shared a copy of that participant's de-identified letter of accommodations with the actor prior to the simulation. This allowed the actor to better prepare for which verbal cues they would need to deliver, depending on the accommodations that they would be discussing with the participant.

The simulation was scheduled so that participants would arrive in groups of three. The first three participants arrived at the Simulation Center and met the Director and me in one of the conference rooms. Recognizing that participants might be uncomfortable with being unfamiliar with the Simulation Center facilities, the Director described the Simulation Center and simulations, including that the facilities were commonly used for participating medical students, and that in this instance Professor Williams was a professional actor who would remain in character throughout the simulation. The Director of the Simulation Center also emphasized to the students that their simulation would be recorded by two cameras, from the moment they walked into one of the simulation rooms. I then spoke to the participants to remind them about the purpose of the simulation and about what they should expect during their approximately 45 minutes at the Simulation Center. First, I emphasized to the participants that the simulation was not a 'role play' and that they were only expected to be themselves in the simulation. I also reiterated what I told students when they signed up to participate in the study, that the simulation was not intended to assess them, but rather was intended as an opportunity for them to practice discussing accommodations with a faculty member.

Then, I informed students that they would each enter individual rooms to meet Professor Williams. For students who did not remember or were unable to print the letter of accommodations that I had sent them, I had extra copies available. I told students that there was no particular minimum or maximum time for their meeting with Professor Williams, and that they should participate in the discussion just as they might with their actual professors. I also made students aware that because the simulation rooms were primarily used for medical simulations, they might notice medical equipment and a doctor's examining table in the room. Finally, I told the participants that I would be waiting outside their simulation room and I would

escort them to another room for a small group debriefing, once they were finished meeting with Professor Williams. I reiterated the above points to each of the five groups of three students who arrived at the Simulation Center (total of 15 participants).

Data Collection

The data collection for the simulation consisted of three parts: videos of the simulation, videos of small-group debriefings, and audio recordings of follow-up interviews.

Simulation videos. Each of the 15 students participated in a single simulated meeting with Professor Williams. These simulated meetings took place over two days, with six participants on the first day, and nine participants on the next day. Participants arrived in shifts, with three students participating in the simulation at a time, each in an individual room. All simulations were recorded by the two cameras mounted on the wall of each room. As mentioned, these rooms are typically intended to look like medical examination rooms. Staff at the Simulation Center adapted the room to look more like an office by placing a desk and two chairs in the middle of the room. Because this was a student-initiated meeting during offices hours, each student entered a room where Professor Williams was already seated at the desk. At the end of the conversation, students exited the room through the same door.

Small group debriefings. The second set of data related to the simulation came from small group debriefings that I facilitated. As soon as a participant exited the simulation room, I escorted the participant to a different simulation room for a group debriefing. This room was similar to the other simulation rooms in that it had two cameras mounted on the wall, but it was arranged differently with four chairs in a circle to facilitate a group discussion. As soon as at least two of the three participants in a given shift had finished the simulation and entered the debriefing room, the cameras began to record any conversation (students were informed about

the recording). Once I escorted the third and final student into the room, I sat down and began to ask students about their experiences in the simulation. The protocol for the group debriefing can be found in Appendix I.

Individual follow-up interviews. As the participants left the Simulation Center following the simulation and group debriefing, I reminded them that I would be e-mailing each of them to ask if they would like to meet with me to watch a video of their simulation and to reflect on watching the video in an interview. Subsequently, 9 of the 15 participants responded to my e-mails that they would like to meet for an interview. The purpose of this interview was to give students an opportunity to reflect on the simulation and to have them guide me in understanding how they engage in a conversation about disability accommodations with a faculty member. Depending on student preference, we met either in a private computer lab at the Simulation Center or in a private conference room at Eastern University. With participants' permission, I audio recorded the interview. The post-simulation follow-up interview questions can be found in Appendix J. The interview questions were intentionally open-ended because I wanted the participants to lead the interview and share whatever aspects were significant to them as they watched their video. However, I also sat in the room and listened as they watched their video and made notes about specific statements that I then asked the student about later in the interview (i.e., "Tell me about when you said...").

Data Analysis

I conducted data analysis in three parts, based on the three different methods of data collection: 1) recorded videos of each simulation, 2) recorded videos of small group debriefings, and 3) audio-recorded interviews of individual follow-up interviews.

Simulation videos. The simulations resulted in 15 videos, one for each participant. The total video data of the simulation was 1 hour and 46 minutes of recorded tape. The shortest video was 2 minutes and 4 seconds and the longest video was 9 minutes and 59 seconds. I transcribed each video and removed any identifying information from the transcription file. I began my analysis of the videos with deductive thematic coding (Savin-Baden & Major, 2013), by beginning with the seven verbal cues on the standardized faculty member's protocol. I coded for the presence of each verbal cue as a way to identify patterns in the interaction between the student and Professor Williams. For each video, I identified whether each of the verbal cues was communicated by Professor Williams to the student. Then, I categorized the participants' responses according to each of the verbal cues that was communicated. I then conducted another round of coding in which I identified themes amongst the responses to each cue.

Small group debriefings. Next, I analyzed the videos of the small group debriefings, which I facilitated with each shift of participants directly after the simulation. Since the 15 participants were scheduled to participate in shifts of three, there was a total of five small group debriefing videos. The five videos resulted in a total of 1 hour and 1 minute of recorded data. The shortest debriefing video was 7 minutes and 30 seconds and the longest was 18 minutes and 57 seconds. These times include instances in which two participants were talking while waiting for the third participant who was finishing their simulation. I transcribed each video and removed any identifying information from the transcription file. I initially coded the data deductively, based on the central topics that I asked participants, followed up by a round of open coding.

Individual follow-up interviews. I then analyzed the audio files of the individual follow-up interviews which occurred approximately one week after the simulation. Nine of the 15 participants elected to participate in the follow-up interview, resulting in 4 hours and 29 minutes

of data. The shortest interview was 20 minutes and 8 seconds and the longest interview was 48 minutes and 12 seconds. I transcribed these audio files, except for significant portions of the tape that consisted of the participants watching the video of the simulation, without any dialogue or commentary. The reason I recorded the audio of participants watching the simulation video is that in some instances, participants stopped the video to reflect upon something they noticed in the video. Only these instances were considered as actual data.

I analyzed data from the individual follow-up interviews using methods consistent with the tradition of grounded theory. Grounded theory is an approach to both designing qualitative research and analyzing data. The purpose of conducting data analysis using this method is to develop a theory that is grounded in the results of a study. Grounded theory is commonly used as an approach to data analysis in individual and group interviews, such as those in this study (Savin-Baden & Major, 2013). Another reason why I chose to use grounded theory to make sense of the data is related to my desire to generate a new theory of self-advocacy. As I discussed earlier, self-advocacy is commonly presented within literature and within Special Education as a pre-determined set of knowledge and skills that students identified as having disabilities (SID) are perceived as lacking. In asking SID to reflect upon their participation in a simulated meeting with faculty members, I wanted to identify alternative ways of understanding self-advocacy that move beyond thinking about self-advocacy as an individual ability or something that emerges top down from practitioner to student. In other words, I wanted to examine the data in a way that would allow me to generate a theory based on what SID say self-advocacy is or could be. In this way I would be developing a theory of self-advocacy from the ground or bottom up, rather than top down.

To use the language within the tradition of grounded theory, I approached data analysis of individual follow up interviews with *theoretical sensitivity*. Theoretical sensitivity refers to analysis of data that looks beyond the data itself and uses existing theories to explain the data (Okta, 2012). In this case, when I examined the data of participants discussing disability and accommodations, I did so with a sensitivity to theories about the existence of disability as a socially-constructed phenomenon (e.g., Thomas, 2004) and of theoretical explanations of what self-advocacy means for individuals identified as having a disability (Test, et al., 2005). Guided by this theoretical sensitivity, I analyzed the data through constant comparative analysis. I compared data segments across participants as they explained aspects of their participation in the simulation (Okta, 2012). Through comparing the reflective thoughts of participants about the simulation, I identified concepts that emerged out of the data of several participants. Further, I was able to identify outlying concepts that differed among participants. I also compared the students' reflections to the actual dialogue that occurred in the simulation videos.

Additional Ethical Considerations

I submitted an application describing the procedures discussed in this chapter to the Institutional Review Board at Eastern University. The IRB application (#17 – 252) was approved on August 28th, 2017. I subsequently submitted an amendment to this application, seeking to expand the participant population to include interested participants who attend a nearby college that is also served by Eastern University's Disability Services Office. This amendment was approved on September 25th, 2017. As part of the initial application to Eastern University's office, I was asked to submit a letter for the director of the Simulation Center indicating the nature of the pay-for-service that was involved in the simulation procedures of this study. This letter indicated that the staff members and facilities at the Simulation Center were involved in

this study. However, while the staff members were involved, they were not participants in the study (i.e., they were not asked to consent to participate). For this reason, I am deliberate in not including any identifying information about the Simulation Center's staff members (including actors), nor any direct quotations of what was said during the trainings with the actors and remainder of the time implementing the simulations.

Seventeen participants initially consented to take part in this study. All participants received compensation, prorated based on the extent of their participation. The two participants who did not participate beyond the initial interview received a \$10 Amazon gift card, which I e-mailed to them. The remaining 15 participants received a \$25 Amazon gift card for participating in the simulations and small-group debriefing. Participating in the individual follow-up interview was optional and did not influence compensation; all participants were fully compensated prior to participating in the follow-up interview. Nine out of the 15 participants elected to watch and reflect on the simulation videos with me, despite having already been compensated.

Conclusion

In this chapter, I described the methods I used to collect and analyze data of a simulated meeting between a postsecondary student identified as having a disability (SID) and a standardized faculty member. I discussed how I trained actors to portray Professor Williams and accounted for several hypothetical situations that might occur during the simulation. I also described how I made revisions to the protocol in an attempt to reach the dual goals of creating a context that was authentic to the participating students, while also creating a standardized, or shared experience, which students could reflect upon both together and as individuals. Finally, I concluded with discussion of the procedures for collecting and analyzing audio- and video-recorded data comprising the simulations, small-group debriefings and individual follow-up

interviews. In the next chapter, I answer the central research questions of this study by presenting the results of the data analysis.

Chapter Five:

Results

In the previous two chapters, I described how I designed and implemented a simulated meeting between students identified as having a disability (SID) at Eastern University and actors who portrayed Professor Williams, a standardized faculty member. Using the simulation protocol (Appendix G) to guide how I trained the actors, I instructed the actors to express support for the student and their accommodations, but also to raise a few questions and concerns. In this chapter, I present the results of my data analysis from three sources of data collection: videos of the simulations, videos of group debriefings, and audio-recorded individual follow-up interviews. I begin by presenting the results of analyzing videos of the simulations. My analysis of these videos was intended to answer the research question: How do undergraduate students who have been identified as having a disability engage in a simulated discussion about accommodations with a standardized faculty member?

I then describe the results of my analysis of videos of the group debriefing interviews and of the audio-recorded individual interviews with students who participated in the simulation. I first report results of the group debriefings with student participants, which took place immediately after each simulation. Next, I report the results of individual interviews with student participants, which occurred approximately one week after the simulation. My analysis of group debriefing and individual interviews were intended to answer the second research question in this study: how do undergraduate students who have been identified as having a disability (SID) reflect upon their participation in a simulated meeting about accommodations with a standardized faculty member?

Simulation Videos

For the 15 individual videos of the simulations, I report the results of my analysis in two forms. I first describe the presence of the seven verbal cues that I trained the actors to deliver. The purpose of reporting these results is not connected to a specific research question, but rather to report the extent to which the actors portrayed Professor Williams in a standardized manner. In other words, did the actors communicate the verbal cues in each individual simulation, thereby creating a shared experience across participants? As I will discuss, there were contingencies for some of the verbal cues – statements or questions that actors should have conveyed to certain participants, but not others, based on which accommodations an individual participant is provided. After reporting the presence of the verbal cues, I then report data of the verbal and behavioral communication of student participants in relation to each verbal cue.

Overall presence of the verbal cues. I trained the actors portraying the standardized faculty member to deliver as many as seven different verbal statements when meeting with a participating student. When analyzing the simulation transcripts, I first identified whether each of the seven verbal cues was delivered in the 15 individual simulation videos. I then counted the total number of times an individual cue was delivered out of a total of 15 opportunities. In Table 14, I describe the total number of each verbal cue that was delivered across the 15 simulations, along with an abbreviated version of each individual verbal cue. The complete verbal cues can be found on the standardized faculty member protocol (Appendix G).

Table 14. *Presence of Verbal Cues (total)*

Number	Verbal Cue for Standardized Faculty Member (Professor Williams)	Number of times present (out of 15 participants)
1	Greet them as they enter and briefly engage in any small talk (e.g., how's the semester so far?) If the student does not immediately say who they are or why they are here, ask them, "So what can I help you with today?"	15
2	Let the student know that you appreciate them giving you their accommodations letter. Once the student hands you the letter, tell them that you need a minute to look it over.	14
3	If the student does not volunteer information about their accommodations and characteristics, ask them, "So what does your disability mean for you as a student in this class?"	11
4	Discuss the "testing modification" accommodation(s). Ask them: "Do you typically take tests at the Disability Services Office?"	15
5	Choose ONE of the following three, depending on which accommodation the student has. Use of PC/Laptop and or Recording Device: You have found that laptops are distracting. You also read about a study that concluded that students learn better if they handwrite their notes. Explain that you don't really like having your lectures recorded because "I don't want my intellectual property to end up on YouTube." OR Assignment Extensions: Explain that extensions are ok, but that you don't want the student to fall behind. Ask the student, "Does that make sense?" OR Advance Access to PowerPoints: Tell the student that in the past you have given out the PowerPoints before class, but that students don't tend to show up.	13
6	If the student has any other accommodations, pick ONE and ask them "How does that typically work?"	9
7	Ask them, "Is there anything else you wanted to talk about today?" End by thanking the student for coming to meet with you.	15

As evident in Table 14, all of the cues were delivered during at least 12 out of 15 of the simulations, except for number 6. In Table 15, I provide a breakdown of which cue was

delivered during each of the individual students' simulations. By looking at Table 15, I was able to identify instances in which I expected that a cue might not have been delivered. For example, Jared only had one accommodation on his letter, a testing modification. Therefore, verbal cues numbers 5 and 6 would not apply to him because these cues relate to additional accommodations that Jared does not receive. In other instances, the reasons that a cue was not delivered were less clear. I discuss instances in which a cue was not delivered in the corresponding section of results for each individual cue.

Table 15. *Presence of Verbal Cues (individual)*

Verbal Cue	1	2	3	4	5	6	7
Allison	X	X	X	X	X	X	X
Arlene	X	X	X	X	X	X	X
Brian	X	X	X	X	X	X	X
Caroline	X	X	X	X	X	X	X
Chris	X	X	X	X	X	X	X
Elissa	X	X		X	X		X
Jared	X	X	X	X			X
Karen	X	X	X	X	X		X
Kimberly	X	X		X	X		X
Marissa	X	X	X	X	X	X	X
Mark	X	X	X	X	X	X	X
Nick	X	X	X	X	X	X	X
Nora	X			X			X
Sam	X	X		X	X		X
Scott	X	X	X	X	X	X	X

When determining whether a verbal cue was delivered, I coded liberally. If a verbal cue was only partially delivered, I coded it as present. For example, the first verbal cue instructs the actor to greet the student participant, engage in small talk, and ask them, "What can I help you with today?" I coded this as present even in instances, such as in Elisa's simulation, in which the actor gave only a greeting before Elisa immediately began to speak at length about her accommodations. I also coded cues as present in instances where the actor delivered the cue

using language that was different from the protocol. I discuss differences in how the cue was delivered, including language usage, in the corresponding section for each individual cue.

Verbal cue number one. The first cue on the standardized faculty member protocol instructed the actors to begin the simulation by greeting the student when they walked in the room and engage in small talk, such as “How’s the semester so far?” If the student participant did not transition the small talk into a discussion about why they were visiting Professor Williams, the actor was instructed to ask the student, “So what can I help you with today?” This cue was delivered partially, or fully, across each of the 15 simulations. In three simulations, the actor delivered a greeting only (e.g., “Hello”). In another three simulations, the actor greeted the student and asked the question (e.g., “Hello, come on in. So, what can I do for you?”) In four instances, the actor greeted the student and engaged in small talk (e.g., “How’s the semester going so far?”) but did not ask the question “So what can I do for you?”. In the remaining five simulations, the actor delivered the full verbal cue, with greeting, small talk and question.

In each of the seven instances in which the actor did not ask the question “So what can I help you with today?”, the student had preempted this question by stating their purpose in initiating the meeting. For example, after a quick greeting Elissa began, “Hi I’m Elissa. I’m here to give you my letter of accommodations through DSO⁷...” and then began to discuss the course. Similarly, Caroline immediately introduced herself and stated, “I just wanted to talk to you about my accommodations for the class because I was admitted into DSO which is the center for learning disabilities...” and then began to discuss the accommodations letter she brought.

⁷ The abbreviation “DSO” is a pseudonym participants used to refer to the office at Eastern University that students register with to be granted accommodations. I also use the pseudonym “Disability Services Office” in instances when participants said the full or partial name of the office.

I identified a data segment from each of the simulations in which the student either responded to or preempted the actor's cue with a verbal statement. Amongst these data, I identified the following six themes that related to the first verbal cue: 1) making a brief statement of purpose, 2) addressing a specific accommodation, 3) seeking permission/agreement to use an accommodation, 4) qualifying their need/use of accommodations, 5) sharing how accommodations support their success, and 6) discussing a specific aspect of their disability.

Making a brief statement of purpose. Each of the 15 participants made a statement that indicated their purpose in coming to visit Professor Williams. In Table 16 I have listed each of these statements.

Table 16. *Participant Statements of Purpose*

Participant	Data Segment
Allison	I was hoping I could sit down and talk with you about, I'm involved with the Disability Services Office.
Arlene	So, I just want to discuss accommodations that I get through the disability office. So, that's just a list of accommodations that I get.
Brian	I have a letter of accommodations from the Disability Services Office.
Caroline	I just wanted to talk to you about my accommodations for the class because I was admitted into DSO which is the center for learning disabilities.
Chris	These are my accommodations.
Elissa	So I'm here to give you my letter of accommodations through DSO.
Jared	Nice to meet you. I just wanted to give you the accommodations letter I have from DSO.
Karen	So, I noted in class that you had said any students with accommodations who are registered at DSO should come meet with you.
Kimberly	So I wanted to talk to you today about my accommodations with DSO.
Marissa	So I did this basically to sit down and discuss my accommodations with you.
Mark	So I've met with my DSO counselor and she told me to bring my letter of accommodations to all my teachers and meet with them.

Nick	So, DSO. I have accommodations.
Nora	Um, I just wanted to talk a little about my testing accommodations. I'm registered with DSO.
Sam	I just wanted to discuss an accommodation with you.
Scott	I just wanted to talk to you about my accommodations.

Participants generally stated a similar purpose, with 14 out of the 15 stating that they were intending to discuss “accommodations.” For example, Chris simply stated, “These are my accommodations” and placed his accommodations letter on the table in front of him. Or, Marissa began “So I did this basically to sit down and discuss my accommodations with you.” Allison was the only participant who did not mention accommodations directly at the beginning of the simulation and instead stated that she is “involved with the disability services office.” The word “just” was also used frequently, by seven participants, including multiple times within some participants’ statement of purpose. For example, Arlene stated that, “I just want to discuss accommodations” and that her letter is “just a list of accommodations that I get.” While using slightly different language, the consistent theme across these statements was the students’ intention to discuss accommodations.

Addressing a specific accommodation. After making an initial statement of the purpose of meeting Professor Williams, six participants immediately addressed specific accommodations. Table 17 includes the six data segments that I coded for this theme, one for each of the six participants who discussed a specific accommodation at the time of the first verbal cue. Elissa began by asking about when she would be able to receive PowerPoint slides. Nora and Marissa both explained that they have testing accommodations, including extended time. Mark referred to a specific device he uses for notetaking and explained that it records lectures. Sam and Scott each referred to two accommodations.

Table 17. *Participant Statements Addressing Specific Accommodations*

Participant	Data Segment
Elissa	So, is it possible to get the slides ahead of time? It doesn't have to be until the minute of class.
Marissa	So, basically I have extended time, which means, I have like a time and a half when I am taking tests.
Mark	So, I just wanted to let you know that I'm using a smart pen ⁸ , which is a notetaking device where it records. It can record you during class.
Nora	I wanted to just talk about for when it comes exam time, about my testing accommodations. So, I get time and a half, and also, an environment that's quiet and stuff.
Sam	So the Disability Services Office at EU [Eastern University] has given me am accommodations to have time and a half on exams...also I have assignment modification.
Scott	What I mainly need is extra time which I take at DSO and I use my computer in class.

Seeking permission/agreement to use an accommodation. Five participants made statements or asked questions indicating that they were either asking permission to use an accommodation or that they were open to negotiating to reach an agreement with the faculty member (Table 18). Both Kimberly and Scott, asked Professor Williams if it was “okay with you” to use one of their accommodations: taking the test at DSO (Kimberly) and using a computer in class (Scott). Karen expressed that she wanted to “reach agreement” with Professor Williams about her accommodations. She has an accommodation allowing for long-term extensions which requires that she and each faculty member fill out and sign a paper agreement that is created and filed at DSO. Elisa, who has an accommodation to receive PowerPoint slides in advance, asked if it was possible for Professor Williams to give her the PowerPoints “ahead of

⁸ Participants used the term “smart pen” and in other instances appeared to refer to a specific brand name of an electronic notetaking device. However, the brand name was inaudible. I therefore use the generic term “smart pen” to refer to this device whenever it was mentioned by a participant.

time” which she then added did not need to be “until the minute of class.” Marissa did not explicitly ask for permission to use an accommodation. However, she implied that her permission to use accommodations was contingent, based upon whether a given faculty member will “choose to” accommodate or not accommodate what is on the letter.

Table 18. *Participant Statements Seeking Permission/Agreement*

Participant	Data Segment
Elissa	So, is it possible to get the slides ahead of time? It doesn't have to be until the minute of class.
Karen	I thought I would schedule a time to come and meet with you to...explain the kind of accommodations that I get so that we can better reach agreement with each other.
Kimberly	So, DSO has granted me a reduced-distraction environment testing. So, I take all my exams there. Is that okay with you?
Marissa	Some professors choose to not accommodate some of them and some do all of them.
Scott	I use my computer in class, if that's okay with you.

Qualifying their need/use of accommodations. Three participants made statements at the beginning of their meeting with Professor Williams in which they qualified their need for accommodations. Scott stated that he brought his accommodations letter and then immediately added, “I don't really use all of them. What I mainly need is extra time...” Elissa also clarified that she did not think she needed to use all of her accommodations in Professor Williams' course. Elissa explained, “After hearing in class, I don't think that there will be many issues between my accommodations and what's already in the structure because most of the assignments are written out and stuff. So, I'm here to give you my letter but the only one thing I can see being a problem is that the pace is pretty quick of the class.” Like Karen, Sam also has an accommodation for long-term extensions on assignments. Early in the conversation, Sam

explained that “I’m gonna do my best to make sure that I can complete everything without having to ask for modifications.”

Sharing how accommodations support their success. Two participants, Allison and Caroline are both first year students at Eastern University. Early in the simulation they stated that they wanted to discuss how accommodations could support their success in the course. Allison stated, “I would like to just discuss with you kind of how it affects me in the classroom as well as what I kind of need to be the most successful in the class.” Similarly, Caroline explained that, “The letter basically says like, I have certain accessibility. But I guess I just wanted to talk to you about how I can go forward in the semester and succeed while using my accommodations.” Both students shared that using their accommodations was important to their success in the course.

Discussing a specific aspect of their disability. Kimberly was the only participant who volunteered information about a specific aspect of her disability at the beginning of the simulation. After introducing herself to Professor Williams and stating that she wanted to talk about “accommodations from DSO”, Kimberly shared:

I just want to let you know that I have a hearing impairment. Actually, I have a hearing aid. I have a hearing impairment in my left ear, so that means, I don’t know, with that I kind of get, how best to explain this, a little bit of an attention thing. So, during tests and everything, I get kind of stressed out and a little nervous, so I focus on everything around me. So with that, DSO has granted me reduced-distraction environment testing.

Early in Kimberly’s statement, after telling Professor Williams, “Actually I have a hearing aid,” she removed her hearing aid from her ear and leaned forward to show the hearing aid to Professor Williams, before immediately putting it back in her ear and continuing to discuss the

relationship between her hearing impairment and the accommodation of a reduced-distraction testing environment. Other participants also discussed aspects of their disability identity later in the simulation, which I report later in this chapter.

Overall, participants' communication related to the first verbal cue demonstrated clear patterns. Participants most often began the conversation with the standardized faculty member by discussing specific accommodations, or accommodations in general, rather than specific aspects of a disability (Kimberly was an exception). Furthermore, participants commonly downplayed their accommodation in both subtle and explicit ways. Notably, some participants sought out permission for how they would use an accommodation, or whether they could use the accommodation at all.

Verbal cue number two. After any opening discussion, the second verbal cue in the simulation protocol directed Professor Williams to thank the student for providing them with their letter of accommodations and to tell the student that they would like to read over the letter for a moment. This cue was intended to be delivered to all 15 participants, each of whom had a de-identified copy of their letter of accommodations that I had given to them prior to the simulation. In writing this cue, I had assumed that each participant would hand the letter of accommodations to Professor Williams. In five of the simulations, the students did in fact hand their letter to Professor Williams, or placed it on the table and turned it so that it was facing Professor Williams. However, in ten instances, the student either held the letter in their hand or placed it on the table directly in front of them, without turning it towards Professor Williams.

I had not trained the actors that they should ask to see the student's letter. However, the actors improvised and asked the student for their letter, with simple questions such as, "Do you have the letter?" or "Can I look at it for just a minute?" One notable exception was Nora's

simulation. Nora placed the letter beside her on the desk, but the actor never asked to read it. Instead, Nora and Professor Williams continued discussing testing accommodation without mentioning the letter. This was likely an instance of the actor forgetting to communicate the second verbal cue. Therefore, I did not code any data from Nora's simulation and recorded in Table 14 that this cue was communicated in 14 of 15 simulations.

Across the other 14 simulations, the second verbal cue resulted in little data because there was no specific comment or question that Professor Williams was communicating, other than to thank the students for coming to meet with them, or to ask the student to look at the letter if the student did not proactively give it to them. In ten instances, the students sat silently while Professor Williams read their letter. In another instance, Sam responded to Professor Williams' question about his letter by saying that he did not bring the letter with him. This was despite the fact that the letter was among the pieces of paper that he had placed on the side of the desk when he entered the room. The actor improvised their response to this likely surprising development, telling Sam "Because you know I need it...we can keep talking, but make sure you get it to me." Sam reported in the group debriefing that he had forgotten that he had the letter. I address this incident further when discussing Sam's follow-up individual interview later in this chapter.

The remaining three participants continued to explain the accommodations, as Professor Williams was reading their letter. Elissa had just introduced her accommodations by downplaying how much she would need to use the accommodations. As she gave Professor Williams the letter, she continued, "But I think that's the only thing that will come in--and, also, it has listed that I can have a peer notetaker, but I try to not use one unless I'm having a problem. In a couple weeks I'll decide that." Similarly to her (and others') comments in response to the first verbal cue, Elissa again minimized how much she would use the accommodations. As Chris

handed the letter to Professor Williams, he simply stated that “I just get double time on tests and I type it too” and then sat silently while the actor continued to read the letter. Marissa explained the rationale for the accommodations as Professor Williams read the letter, explaining that, “Basically I have a time and a half. The reason for me taking tests at the DSO office is so I have less distraction.” Other participants explained the purpose or rationale for accommodations later in their conversations.

Despite limited verbal communication related to the second verbal cue, participants demonstrated differences in their approaches to discussing their letter of accommodations. While five participants immediately gave the letter to Professor Williams, 10 did not until asked by Professor Williams. Other notable data points included the statements by three students who continued to describe their accommodations as Professor William read the letter, including by highlighting a specific accommodation, providing a rationale for using the accommodation, and downplaying their need to use accommodations.

Verbal cue number three. The third verbal cue instructed the actors to ask the students, “So what does your disability mean for you as a student in my class?” The actors used different language when communicating this cue. Variations of the question included, “So what does your disability mean for you as a student in my class?” or “How does your disability affect you as a student in my class?” Communicating this cue was contingent upon whether the participant had already “volunteered information about their accommodations or characteristics” early in the conversation. During training, I explained to the actors that if a participant shared how they viewed their accommodations being applicable to the course, or about how a characteristic or aspect of their disability impacted them as a student, then the actor should not deliver the cue, because it would artificially revert the conversation back to information already shared by the

student. Nevertheless, the actors had to make a judgment about whether the participant had already shared information that would warrant them to skip asking the students about what their disability means for them in the course.

I identified the third cue as communicated in 11 of the 15 simulations. In three simulations in which the question was not asked – Elissa, Nora, Kimberly – it seemed likely that the actor chose not to communicate the cue because the participants had proactively made statements about their disability (Kimberly) and how they viewed their accommodations as being relevant for the course (Elissa and Nora). Therefore, it seemed appropriate for the actor to skip asking these three participants about what their disability meant for them as a student in the class. The fourth instance in which the third cue was not delivered was in Sam’s simulation. Immediately after discussing how Sam did not have his letter of accommodations, Sam and Professor Williams began discussing specific aspects of his accommodations. It is possible that the actor was surprised by Sam not having his letter of accommodations and forgot to deliver the third cue (“So what does your disability mean for you as a student in my class?”)

I identified 11 data segments that were in response to the third cue and are listed in Table 19. I identified the following themes in the ways participants responded to Professor Williams’ question: 1) describing aspects of their disability and related challenges, 2) addressing specific accommodation(s) and their purpose and/or benefits, 3) expressing uncertainty about the question, and 4) downplaying the impact of their disability.

Table 19. *Participants’ Responses to Verbal Cue Number Three*

Participant	Data Segment
Allison	So, part of it is I have really bad testing anxiety and being in a classroom is fine. Just if I’m doing any classwork or taking a test I tend to get very distracted when there is a lot of noise. So, it’s most beneficial to do my testing in a quiet place. Usually at the disability office they have a testing room.

Arlene	So, it's a little bit complicated. I have [a physical health related illness]. It's a disease that happens, it occurs in flares then it goes into remission. When those flares appear, it's little bit unpredictable. So, most of the modifications are for exams. Time and a half because I get headaches and exhaustion, called brain fog.
Brian	You mean my accommodations?... Well there are a lot of days that I will wake up and have a headache or be extremely tired, just not being able to function that well, that I'll pick myself up and still go to class, and at times I won't be able to focus. One of my symptoms for my illness is brain fog. So that's the first bullet (looking down at letter), notetaking assistance, laptop and recording device. That helps with when I can't concentrate and take notes, just to record lectures and stuff like that, discussions, that helps.
Caroline	Going through slides, for example, my processing isn't necessarily as fast as, I guess, the average student. My disability isn't clear cut. I don't have very severe ADHD or something like that. So, when I was tested, there was no name for what I have. Basically, the general idea is that my processing is very slow in comparison to, just like, my working memory.
Chris	I type my notes instead of writing them.
Jared	What do you mean? What does the letter mean?...Oh well it's just like I have trouble processing. So, like it's hard for me to like read and then pay attention also. I have ADHD.
Karen	Sure. The first thing you will see is, I have time and a half, extended time in testing. And I believe, we have if I remember, three short in-class exams... so I will probably need to take those at DSO. That's where I usually take exams.
Marissa	So, basically for testing especially, it's not my strong suit when it comes to classes. So, the extended time allows for my brain to sort of process things a little bit slower. So, I can think through things in a more strategic way.... The note taking is just, I'm more auditory and visual. Typing and writing, doesn't process in my brain as well.
Mark	The biggest thing is note taking. I'm a little slow. So, having PowerPoints in advance is useful.
Nick	So, for extended time, I usually finish tests on time, but I feel rushed. So, I get extended time and I feel like calm and composed and I can get what I need to get done and know I can get it right and double check it. Because if I have normal time, I'm like kind of rushing towards the end and then I make a stupid mistake and screw it up for myself.
Scott	Not much. I have learned to deal with it over the years. So, you should expect me to be hardworking like every other student.

Describing aspects of their disability and/or related challenges. Eight of the participants responded to Professor Williams' question by sharing some aspects of their disability and/or the

challenges that they face as a student. Mark and Marissa offered brief responses, in which they identified a difficulty that they have as a student. Mark responded, “The biggest thing is note taking. I’m a little slow.” Marissa referred to her difficulties with testing, explaining to Professor Williams, “So basically, for testing especially, it’s not my strong suit when it comes to classes.” Neither Mark nor Marissa mentioned any specific disability or health condition.

The five other participants who responded by discussing challenge(s) they face as a student did so by referring to their disability, either with a specific name or with a more general term (i.e., “illness”). Arlene and Brian, the two participants to identify with a physical health-related illness, responded by explaining how the effects of their illness can vary day to day, including occurring in flares (Arlene) and making it difficult to function depending on the day (Brian). Jared and Caroline both used the term “processing” to describe their learning challenges. Jared, identified as having ADHD and explained that he has difficulty reading and paying attention as the result of “trouble processing.” Caroline, distanced herself from any “clear cut” disability labels, such as “severe ADHD”, when discussing her difficulty learning from PowerPoint slides. She instead chose to emphasize a learning characteristic, that her “processing is very slow.” Finally, Allison identified with “really testing anxiety,” which causes her to become distracted in a noisy environment. However, she also ensured Professor Williams that “being in a classroom is fine”, when she is not completing a test.

Addressing specific accommodation(s) and their purpose and/or benefits. Nine participants responded to Professor Williams’ question by addressing one or more specific accommodations and often by explaining the purpose or benefit of these accommodations. Chris and Karen responded to Professor Williams by referring to specific accommodations, though without providing further explanation of their purpose or benefit. Chris simply stated, “I type my

notes instead of writing them.” Karen responded by referring to her need to take tests at the Disability Services Office to have extra time. She specifically referred to the “three short in-class exams” that she was aware of based on the description of the course assignments I had provided participants on the student protocol.

Other participants explained their accommodations by relating them directly to the need to address a challenge related to an aspect of their disability. Several participants, including Karen, used the word “so” to bridge the introduction of their characteristics or challenges with the purpose or benefit of using accommodations. For example, after introducing her physical health condition, Arlene continued, “So, most of the modifications are for exams”, and gave the example that using extended time for tests is “because I get headaches and exhaustion, called brain fog.” After identifying that she has testing anxiety, Allison stated “So, it’s the most beneficial to do my testing in a quiet place, usually at the disability office.” Caroline followed her explanation of difficulties with processing and working memory by explaining that she has had difficulty completing tests during the typically allotted time. “So I think that, like, by using accommodations, I would be able to get that done”, Caroline explained. Nick also addressed the benefits of having extended time, explaining to Professor Williams, “So I got extended time and I feel like calm and composed” and can “double check” his tests before submitting them.

Mark explained that he is “slow” when taking notes and then explained, “So having PowerPoints in advance is useful.” However, unlike the other participants, the accommodation that Mark referred to— “having PowerPoints in advance”— was not listed on his accommodations letter. The actor, who was holding and had read Mark’s letter of accommodations at this point, noticed and responded by stating “Well, that one though is not here.” Mark replied, “Oh really?” and looked at the letter but quickly transitioned to address

another accommodation, stating, “Maybe I will figure it out after the first few weeks, but the biggest thing is the laptop and the extended time.”

Two students, Brian and Marissa, provided much more detailed explanations of the rationale for their accommodations. After introducing the characteristics of his illness, Brian began to discuss and point to each of the bullet-point accommodations on his letter and explained why each of the accommodations is helpful or necessary for his health and success as a student. While Marissa did not refer to a disability or illness, she discussed several of her accommodations individually and the rationale for each accommodation with reference to her needs as a student. For example, Marissa explained the importance of her accommodation to record lectures with a device, rather than relying on typing or handwriting notes:

Marissa: The note taking is just, I’m more auditory and visual. Typing and writing, doesn’t process in my brain as well.

Professor Williams: And that is why you have a recording device?

Marissa: Yeah. So, there is a special notebook that I use in certain classes that I’m struggling. Where I’m basically writing notes and it’s recording the whole time while I’m writing notes. And later on if I am not strong with a certain part, I can’t catch what the teacher said, I can sort of go back and click there and that will play the audio... So last year I used it in classes, it worked, it helped. Especially my [previous] class because my professors talked really fast. So, yeah, that’s helpful.

In her explanation of her accommodations, Marissa shared both how her accommodation of having a recording device is used, as well as how it has benefited her in the past.

Expressing uncertainty about the question. Two participants – Jared and Brian – responded to Professor Williams’ question with their own question about what Professor

Williams was asking them. When the actor asked Jared, “So what does this mean for you as a student in my class?” Jared responded, “What do you mean? What does the letter mean?” The actor used the pronoun “this” rather than the specific language listed on the protocol, “your disability.” To Jared’s question, the actor responded by clarifying, “Well, no, just your disability.” In Brian’s simulation, the actor asked, “So, what do these disabilities mean for you, like in my class?” Brian responded, “You mean my accommodations?” to which the actor responded, “Yeah.” In both cases, the participants continued by describing aspects of their disability and accommodations, as I shared in earlier sections.

Downplaying the impact of their disability. I identified one data segment in which a participant, Scott, responded to Professor Williams by downplaying or minimizing the impact of his disability. Professor Williams asked Scott, “So, first of all, what does your disability mean for you as a student in my class?” Scott minimized how much his disability would impact him (“not much”) because he has “learned to deal with it.” Further, he ensured Professor Williams that Professor Williams could expect Scott to “be hardworking like every other student.”

Data related to the third cue reveal that a majority of participants did not discuss aspects of disability, or related challenges that they experience, until asked by Professor Williams. When asked what their disability means for them in the course, most participants responded by identifying specific challenges that they experience as a student. Participants frequently bridged a description of a challenge with their accommodations, seemingly as a way to explain the rationale for why they use the accommodation. Two participants expressed uncertainty about the question that Professor Williams was asking (other participants expressed a variety of reactions to this question later during the group debriefing and individual interviews). While Scott was the only participant to explicitly downplay the impact of a disability, other participants’ responses,

such as addressing only one challenge or accommodation, could also be interpreted as downplaying the role of disability and accommodations (e.g., choosing to only discuss testing accommodations rather than discussing all of the accommodations on the letter).

Verbal cue number four. In the fourth verbal cue, the actor was instructed to ask the participant about their use of testing accommodations. Because all participants receive at least one accommodation for testing (e.g., extended time, reduced-distraction environment), there were no contingencies for communicating this cue; in every simulation I expected the actor to ask the participants, “Do you typically take tests at the Disability Services Office?” During training, I told the actors that I believed the students will most likely respond “Yes” and that the actor should then explain to the student, “That’s fine. But some students in the past have preferred to take the tests with me, so they don’t miss any questions during the test.” When examining how Professor Williams delivered this part of the cue, there were subtle but potentially significant differences in the language that the actor used. While I trained the actors to say that some previous *students have preferred* to take tests with Professor Williams present, there were several instances in which the actor used phrases such as “My preference is” or “I prefer” that the student completes the tests with them (the faculty member). When reporting the data in this section, I refer to the language choice that the actor used when communicating this part of the cue.

If the student responded that they did not typically take their tests at the Disability Services Office, the actor was told to respond. “Okay, is there anything different you need me to do on my end?” I also informed the actors during training that if the student expressed that they preferred to take the test in class or with Professor Williams in their office, then they could work out any arrangements that seemed appropriate for providing the accommodations (e.g., finishing

the test in Professor Williams' office after the class period). I identified data segments in each of the 15 simulations which related to the fourth verbal cue. However, in four instances – Allison, Kimberly, Marissa and Nora – participants had already addressed the issue of where they would complete tests. Therefore, the location of testing was discussed without the actor asking the students the initial question. Twelve of the 15 participants indicated that they typically complete tests at the Disability Services Office. Of these 12 participants, nine participants responded to Professor Williams' question about if they typically take their tests at the Disability Services Office with a simple "Yeah." The remaining three participants provided a longer explanation, indicating that taking the test at the Disability Series Office was contingent on the circumstances:

Arlene: I usually take it at the DSO office, but I've taken them with TAs during their office hours. I'm really kind of whatever is easiest for the professor and for the TAs.

Nick: It depends on the test and the class size. For huge exams, like for lectures with 300 kids, I usually take those in DSO.

Karen: Yes, if there are short quizzes, I normally can finish within time, but if that's long exams, I usually take them there.

Of the three participants who expressed a preference of where they complete tests before they were asked, two participants— Elissa and Brian— explained that they prefer to take their exams in the classroom. However, both participants also added contingencies. Elissa began by responding "I prefer to do it in the classroom" but then later added "But, depending on how long the open-ended questions are and if I'm gonna need a computer...then I would take it in DSO. But if it's like a paragraph or two, then I can handwrite." Brian added a contingency related to his health condition. He explained "I normally take the test in class but sometimes I'll know that the room is hot in general and I'll just say I have to go to DSO and not take it in this room. If it's

too much for me, I can't concentrate." Later Professor Williams clarified, asking Brian "So you do the tests in the class, that's correct?" to which he replied, "Yeah." Finally, Nora did not express a clear preference. Instead, she preempted Professor Williams' question by asking what Professor Williams' preference was for where she would complete tests.

In all 15 simulations, the actor communicated the next part of the verbal cue, explaining to students that some students in previous years preferred to take tests with Professor Williams (instead of at the Disability Services Office) so that they do not miss information or questions raised by their classmates during the test. I identified 15 data segments that were in direct response to Professor Williams communicating this point. These segments are listed in Table 20. Among the participants' 15 responses, I identified the following themes: 1) changing their original preference, 2) remaining non-committal, 3) reiterating their original preference and 4) expressing agreement.

Table 20. *Participants' Responses to Verbal Cue Number Four*

Participant	Data Segment
Allison	Yeah, I was thinking also if there was a question or misprint I could always at the end of class come and check in with you.
Arlene	Yeah. That's my preference. And I usually, since it's extended time, I usually finish with the TA.
Brian	Yeah.
Caroline	Yeah. No, I think that's a good... I mean, the thing about that though is that, I kind of prefer the quiet of DSO because I'm in a room, technically sometimes, sure there are other people, but I easily, I've come to learn that I get easily distracted. So like a sneeze could just like this [snaps finger] divert my attention. And if you are, I guess, in a class with a bunch of students who all have different time than me, then I guess, I'm kind of, I mean, I can totally understand what you mean by, because definitely if I have a question, you are the one person that I should be going to with that. ... But I guess like, depending on how well I know the material, I would let you know if I feel more comfortable taking it in class.
Chris	If I do that, do I get the extra time?...Okay.
Elissa	Yeah, I agree.
Jared	Yeah, I haven't really thought about that.

Karen	Yeah. I know in the past, I've run into when there is changes that come up, sometimes the answer will be, or questions on the test will be printed weirdly and somebody raises a question they usually, the professor usually calls DSO and makes the students taking the test there aware of the change or any points of interests that were brought up in the test.
Kimberly	Yeah, because I know sometimes especially with economics, I'm not really that into it. I don't know much about it, so if I did have questions, it would be nice to ask. I'd be happy with that.
Marissa	Yeah. So sometimes I'll choose to just stay in the class, especially if it's a class I'm struggling with. Just so I can ask professors themselves questions because it's kind of difficult when you are in the DSO office, because you don't really have anyone to ask questions too.
Mark	Yeah, maybe.
Nick	Maybe I'll come to a class, take a test and see which one works better.
Nora	Yeah, I prefer that as well.
Sam	With time and a half?...yeah that's okay. Cool.
Scott	I usually take it at DSO, I think. I like my non-distracting environment.

Changing their original preference. Five participants responded to Professor Williams by expressing that they would change their original preference from completing tests at the Disability Services Office, to completing tests with Professor Williams (either in class or in Professor Williams' office). A few participants asked clarifying questions or negotiated about the testing circumstances if they were not completing tests at the Disability Services Office. After Professor Williams told Chris that "some students have benefited" from taking the test with him, so he can answer questions about the test, Chris asked "If I do that, do I get the extra time?" When Professor Williams replied that they could "work something out" such as doing the test in Professor Williams' office, Chris replied "Okay." Sam asked Professor Williams "With time and a half?" after Professor Williams expressed that Sam consider taking the test with him, to which Professor Williams assured Sam that he would "absolutely" have extended time to complete the test. Sam agreed, replying "Yeah, okay, that's cool." In Nick's simulation, Professor Williams said "I would prefer you take it [the test] in class so that you don't miss the

notes.” After at first saying “Okay,” Nick followed up by saying “Maybe I’ll come to a class, take an exam and see which one works better.”

Arlene and Kimberly not only changed their original preference, but also indicated that completing exams with Professor Williams was preferable to them, once it was suggested. After Professor Williams told Arlene that “I prefer you to take that [the test] with me” so that she did not miss information, such as questions, Arlene responded “Yeah. That’s my preference. And I usually, since it’s extended time, I usually finish with the TA.” Kimberly had initially stated that she takes exams in the Disability Services Office and asked “Is that okay with you?” When Professor Williams stated that his “concern” was that Kimberly wouldn’t get to ask questions and suggested that Kimberly could take the test in his office with extended time and reduced distraction, Kimberly replied “That’s perfect. That sounds better. Yeah, because I know sometimes especially with economics, I’m not really that into it. I don’t know much about it, so if I did have questions, it would be nice to ask. So yeah, I’d be happy with that.” Kimberly later clarified the logistics, asking “Would I take the exam at the same time in your office? You know, other students would be in the classroom, and I’ll take it in your office at the same time?” She followed up by asking, “Would you rather have me take the test before or after everyone else?” Kimberly asked these clarifying questions *after* already agreeing to complete the test with Professor Williams, whereas Chris and Sam asked questions *before* agreeing.

Remaining non-committal. Four participants responded in ways that appeared non-committal. In other words, they did not give a clear indication of where they planned to complete tests. When Professor Williams suggested to Mark, “at least thinking about taking it [the test] in class,” Mark responded “Yeah, maybe” and then brought up his accommodation to use a laptop for notetaking. Jared offered a similarly brief and non-committal response when Professor

Williams stated, “Some of the students have preferred to take the test” with Professor Williams. Jared responded, “Yeah, I haven’t really thought about that.” After Allison informed Professor Williams that she has testing anxiety and takes her exams at the Disability Services Office, Professor Williams responded by saying that her “only concern” was that Allison would miss the chance to ask questions about the test. First Allison appeared to acknowledge Professor Williams’ point, and suggested that she could come “check-in” with Professor Williams after taking the test at the Disability Services Office if she had a question or if there was a misprint. A moment later, Allison expressed a more non-committal response, “Yeah you never know, I’m always willing to try [taking the test in the classroom]” without going as far as saying that she would take the test in the classroom.

Finally, Marissa told Professor Williams initially that she typically takes her exams in the Disability Services Office. After Professor Williams said that “some students” like to stay in the class and ask questions, Marissa responded “Yeah. So sometimes I’ll choose to just stay in the class, especially if it’s a class I’m struggling with. Just so I can ask professors themselves questions because it’s kind of difficult when you are in the DSO office, because you don’t really have anyone to ask questions to.” Later in the simulation, Marissa explained that her accommodation of having a separate testing environment was so that she could focus better by taking the tests at the Disability Services Office. However, she then referred back to Professor Williams’ earlier comment, saying that she would sometimes take the exams in the classroom so that she could ask the faculty member questions.

Reiterating their original preference. Three participants – Caroline, Karen, and Scott – reiterated their original preference for completing the exams at the Disability Services Office. Each of the three participants reiterated their preference in different ways. When Professor

Williams stated that “Some students in the past have preferred to take the test with me,” Scott immediately responded, “I usually take it at DSO, I think. I like my non-distracting environment.” Caroline also reiterated her desire to take the tests at the Disability Services Office, though she also expressed a willingness to consider changing her mind. After Professor Williams stated that “Some students have preferred” in the past to take the test with Professor Williams so they can answer any questions that come up, Caroline responded that “the thing about that though is that, I kind of prefer the quiet of DSO because...I get easily distracted.” Caroline then added, “I would let you know if I feel more comfortable taking it in class.” Karen was the only participant who reiterated her preference by referencing a practice in which a faculty member can communicate directly with a staff member at the Disability Services Office to make a student aware of a change or question raised during a test. Karen explained, “The professor will usually call DSO” to inform the student of the change, though she later added, “I understand that’s sometimes kind of a tricky situation.”

Expressing agreement. Three participants – Nora, Elissa, and Brian – had already responded that they would be open to or prefer to take the exams with Professor Williams. Nora originally asked Professor Williams where he preferred that Nora take the test. Professor Williams explained that “My preference...” is for setting up a time that Nora could have extended time while taking the test with him (e.g., finishing in his office), rather than at the Disability Services Office. Nora responded “Yeah, I prefer that as well.” Elissa initially told Professor Williams that she prefers to take the exams in the classroom, as long as the open-ended questions require shorter responses. After Professor Williams told Elissa that “I prefer” she completes the test in class, because that would allow him to answer any of her questions, Elissa responded in agreement, saying “I think it’s helpful to be in the same place,” and she then asked

clarifying questions about the logistics of completing the tests with Professor Williams. Brian had already informed Professor Williams that he takes his exams in the classroom, as long as the room temperature is not too warm. When Professor Williams responded by saying, “Yeah I prefer that” because students sometimes miss questions that other students ask in class, Brian simply responded, “Yeah.”

Overall, the question of where participants prefer to complete tests resulted in a majority of participants expressing that they prefer to complete tests at the Disability Services Office. However, a few participants described that their preference was contingent on different factors, such as the classroom environment and the type or length of test questions. Participants offered a range of responses to the actors’ comment about previous students completing tests with Professor Williams present. Participant responses included remaining non-committal about where they would complete the exams, reiterating why they would like to complete exams at the Disability Services Office, and appearing to change their original preference and agree to complete the test with Professor Williams. A notable concern with this verbal cue was in four instances the actors used language such as “I prefer” or “My preference is” which may have come across as more demanding, or coercive, than the language I wrote on the protocol (suggesting that “some students have preferred”).

Verbal cue number five. In the fifth verbal cue, the actors were asked to raise a concern about one accommodation out of three possible options. If the student had the accommodation of using a laptop or recording device for notetaking, the actors could express a concern about laptops being potentially distracting to students and about a research study that found that students learn better if they handwrite their notes, rather than type them. If discussing recording devices, the actors could also express a concern about their intellectual property being published

on the Internet if it was recorded. The second option was responding to participants who have an accommodation for long-term extensions on assignments. The actors were trained to communicate a concern that they do not want to see the participant fall behind on completing assignments. Lastly, if a participant had the accommodation for advance access to PowerPoints, the actors were trained to communicate a concern that students in the past have not attended class when Professor Williams sends out PowerPoint slides prior to class.

Communicating the fifth cue was contingent upon the participants having at least one of the three above accommodations listed on their letter (i.e., laptop/recording device, long-term extensions, or advance access to PowerPoints). Three of the participants—Jared, Kimberly, and Nora—had only testing accommodations and none of the accommodations relevant to the fifth cue. The actors did not deliver the cue in Jared and Nora’s simulation. However, Kimberly initiated a discussion about PowerPoints that led the actor to communicate the cue related to PowerPoint slides. In total, the actors communicated a part of the fifth verbal cue 15 times, across 13 simulations. The reason the cue was delivered multiple times in two simulations was because the actor communicated two of the possible three concerns listed in the protocol for the fifth cue. This occurred despite my instructions in training to communicate only one of the three possible concerns, even if the participant the actor was meeting with received more than one of the three relevant accommodations.

The accommodations that the actors raised concerns about were distributed as follows: laptop/recording device (7); advance access to PowerPoint slides (5); and long-term extensions (3). In Table 21, I have listed the 15 data segments, relevant to the fifth verbal cue. I identified the following themes across the 13 participants: 1) expressing understanding and/or agreement with Professor Williams’ concern, 2) explaining the accommodation and its purpose, 3) assuring

Professor Williams' that the accommodation will not cause a problem, 4) compromising and/or suggesting alternative uses of the accommodation, and 5) downplaying the use of an accommodation(s).

Table 21. *Participants' Responses to Verbal Cue Number Five*

Participants	Accommodation	Data Segment
Allison	Advance Access to PowerPoints	Honestly just the evening before would be totally fine or just a few hours before class, just to have time to print it out. So, part of my accommodations, if I am taking notes during a PowerPoint, it's hard for me to quickly get them all down.... really just whenever before class. Or even, I was talking to DSO about receiving it after too, so then I can pay attention during class and then just have a copy of the notes... Oh, no I can understand that.
Arlene	Long-term Extensions on Assignments	[nodding]
	Laptop/Recording Device	Absolutely, yeah
Brian	Laptop/Recording Device	Yeah, I understand... Definitely. And it's when I'm not having a good day too. Hopefully I won't even need it.
Caroline	Advance Access to PowerPoints	Oh, really? I don't blame you. Well, I personally, I think that, I mean obviously the teacher isn't just saying what's on the PowerPoint. There is always so much more than that... I went to a super small high school and that didn't exist, not going to a class. I've now become, it gives me almost anxiety to not go to class. So, I'm not one of those students, I mean the only reason I wouldn't show up to class is because I'm extremely ill or something.
Chris	Laptop/Recording Device	I just can't read my notes.
Elissa	Laptop/Recording Device	I'm allowed to use a laptop but for me I usually don't with the exception that, I have like a paragraph rule. So if it's under a paragraph or notes, it's totally handwritten.
	Advance Access to PowerPoints	Is it possible to e-mail them?... Okay perfect... I come to class.
Karen	Long-term Extensions on Assignments	This is less of a common one, as far I am aware, that's given to students. I want to preface this by saying this is not like a 'free pass' for if I am late, and I miss a

		deadline turning my work in, it's like 'oh you are off the hook.' It's not that. What this is, and especially the part that says, DSO agreement to follow. In the coming week, I'll actually be given a form that I'll have to schedule to meet with you again, and I'll come in and we will fill out this form together and what's on that form is just sort of agreements for if I feel the need to utilize this accommodation and I feel I need extended time on a project or on an assignment, I know there is a paper on the syllabus...so this form, that we would fill out would detail if you need to request extended time, how far in advance, like 24 hours, 48 hours, two weeks advance notice. We would agree on that for each specific item...There is also a section on there, sorry to interrupt. There is also the section on there that says if I then fail to get this in by our extended deadline, what is the consequence of that. Many professors will do reduced grade, or things like that. So it's not to be some, never ending, yeah so there is definitely a limit on it.
Kimberly	Advance Access to PowerPoints	Is it okay if I take pictures of it in class? Because I do know I'm a slow writer. Like as you're going in class, I take my cell phone and click...Can I...maybe after class, I can come up to the podium and you can go through your slides again and I can take pictures after class?... That's just a personal thing. If you're not okay with that, it'll be fine. I'll just try to write quicker.
Marissa	Advance Access to PowerPoints	Yeah, a lot of professors have said that to me...Often times what I will say is I might, I take notes basically if I have the PowerPoints, I have that to go off of, but then, now I can focus more on what you are saying about the notes... So basically this year, that [being absent from classes] hasn't even been an option.
Mark	Laptop/Recording Device	(nodding) mm, hmm.
Nick	Laptop/Recording Device	Yeah, I'm not going to sell your lectures.
Sam	Long-term Extensions on Assignments	Yeah. Ok. But, as I said in the beginning, I'll do my best. I try not to ask many accommodations because if I'm ok and healthy and everything, I can keep up with everything.
Scott	Laptop/Recording Device	Yeah but I don't really use the recording...I'll make sure it's not a distraction...I appreciate it. I'll do both, throughout the semester.

Expressing understanding and/or agreement with Professor Williams' concern. Seven participants responded to Professor Williams raising a concern about one of their accommodations by expressing understanding and/or agreement. For example, when Professor Williams expressed concern about laptops being distracting, or their intellectual property ending up on the Internet, responses included:

Arlene: Absolutely, yeah.

Brian: Yeah, I understand.

Mark: (nodding) Mm, hmm.

When Professor Williams expressed concern that “students have a tendency to fall behind” in response to Arlene bringing up her accommodation for extensions of assignments, Arlene nodded and said softly, “Yeah.” When Professor Williams shared their concern about students not coming to class when they provide PowerPoint slides in advance, participants expressed understanding:

Allison: Oh no, I can understand that.

Kimberly: I know that feeling. My professor [for a different course], he did the exact same thing and half the class didn't come. I know what you mean.

Marissa: Yeah, a lot of the professors have said that to me.

Caroline also expressed understanding, telling Professor Williams, “I don't blame you” and then continuing, “Well, I personally, I think that, I mean obviously the teacher isn't just saying what's on the Power Point. There is always so much more than that.” Caroline appeared to be communicating that she understood the importance of attending class and listening to the faculty member, rather than just having Power Point slides prior to class.

Explaining the accommodation and its purpose. Five participants either responded to or preempted Professor Williams' concern by explaining their accommodation, often by elaborating on the purpose of their accommodation. For example, Chris explained the purpose of his accommodations, telling Professor Williams that "I just can't read my notes" after Professor Williams expressed that laptops could sometimes be distracting. When Professor Williams expressed concern to Marissa about students not coming to class when she sends out the PowerPoint slides ahead of time, Marissa explained that "If I have the PowerPoints, I have that to go off of, but then, now I can focus more on what you are saying in class about the notes."

In other instances, participants offered an explanation of the accommodation, even before Professor Williams raised a concern. For example, Allison explained that it's difficult for her to write down all the notes during a lecture if she does not have the PowerPoint slides in advance. Nick introduced the accommodation of using a laptop or recording device by telling Professor Williams that it is helpful for him to take notes, and that he "would still be allowed to keep my computer on and type notes" even if Professor Williams told students to put their computers away. Karen offered the longest explanation of an accommodation when discussing the purpose of long-term extensions. Before Professor Williams even referred to the accommodation, Karen explained that she wanted to preface the discussion of long-term extensions "by saying this is not like a free pass." Karen's description of the accommodation and the associated long-term extensions written agreement led to a discussion about how Karen has used the accommodation in the past and how it might be used in Professor Williams' course:

Professor Williams: Have you had this one [accommodation] before, that you have used? And has it been helpful to you?

Karen: Yes. It has been and it's most helpful determining it in advance and

not like when the crisis happens, when I feel I need an extension. So that's the whole point of that.

Professor Williams: So, technically you still have a deadline. It's just, if need be, short time prior to that, you can arrange a different deadline.

Karen: Yes. And the form will also detail things like how I should let you know, as in via e-mail, or in person, or phone call, like how do you like to be informed.

Karen then summarized the purpose of the accommodation and written agreement stating, "But the main theme with this one is that we are supposed to work out a joint agreement far before the need for actually employing the extension, to make it fair to other students."

Assuring Professor Williams that the accommodation will not cause a problem.

Another common response to the fifth verbal cue was participants assuring Professor Williams that their concern would not cause a problem. In three cases, participants expressed assurance with brief statements. Scott asserted, "I'll make sure it's not a distraction" when Professor Williams expressed concern about laptops being a distraction. Elissa asserted, "I come to class" when Professor Williams expressed that students in the past did not show up to class when he provided the PowerPoint slides ahead of time. Nick assured Professor Williams, "I'm not going to sell your lectures," in response to her concern about intellectual property.

Other participants provided a longer explanation to assure Professor Williams that their concern was not warranted in this case. To alleviate Professor Williams' concern about students not coming to class if they receive PowerPoints ahead of time, Caroline referred to her history of attending a school in which attendance was mandatory and explained that "It gives me almost anxiety to not go to class. So, I'm not one of those students..." Marissa also assured Professor Williams that attendance would not be a problem, though she referred to the attendance policies

of her university classes, rather than her high school experience. Marissa explained that she is accustomed to always attending classes because being absent “hasn’t even been an option” due to the attendance policies in the courses in her major. When Professor Williams expressed to Karen that students sometimes fall behind if they have extensions on assignments, Karen assured Professor Williams that the contract that the faculty member and student create would help to hold the student accountable to the deadline because the student must agree that there are consequences if they do not submit assignments by the agreed upon extended deadline. “So there is definitely a limit on it”, Karen told Professor Williams.

Compromising and/or suggesting alternative uses of the accommodation. Five participants responded to Professor Williams by expressing a willingness to compromise in how they would use their accommodations, or by suggesting alternative uses of the accommodation. For example, both Elissa and Scott expressed a willingness to both write and type their notes, after Professor Williams commented on the use of laptops to take notes. Elissa explained that her shorter notes were “totally handwritten” and said that she appreciated Professor Williams comment and would both type and handwrite notes throughout the semester. In other instances, participants offered alternatives in response to a comment or question from Professor Williams. When Professor Williams told Elissa that he does not post his PowerPoints online because he has noticed that students do not show up for class, Elissa immediately proposed, “Is it possible to e-mail them?” Professor Williams agreed and suggested the Elissa remind him, to which she agreed.

When discussing PowerPoints with Allison, Professor Williams asked Allison how far in advance she would like to receive the PowerPoints. At first Allison answered “Honestly, just the evening before would be totally fine or maybe just a few hours before class,” then qualified this

statement by adding “just whenever before class”, before further loosening the request by adding she could receive the slides after class. Within one moment of the conversation, Allison first requested to have the PowerPoints the night before class, then “whenever”, and finally suggested that after class would be acceptable, despite that the accommodation is written as “advance access” on her letter of accommodations. Allison suggested these alternatives *prior* to Professor Williams communicating the verbal cue about students not coming to class when she provides PowerPoint slides ahead of time, to which then Allison responded, “Oh, no, I can understand that.”

Kimberly’s negotiation with Professor Williams was different from others in that she was discussing an accommodation that was not listed on her letter. After discussing testing accommodations, Kimberly asked if Professor Williams posts his PowerPoint slides online. When Professor Williams said “I usually don’t”, Kimberly proposed an alternative strategy for accessing the lecture notes:

Kimberly: Is it okay if I take pictures of it [PowerPoint slides] in class, because I do know I’m a slow writer? Like as you’re going in class, could I take my cell phone and go ‘click.’

Professor Williams: That may be a little bit of a distraction to the other students, but I don’t want you to not get it.

Kimberly: Can I take, maybe after class, I can come up to the podium and you can go through your slides again and I can take pictures?

Professor Williams: Sure, we could do that. Right, that’s fine.

Professor Williams then followed up about the accommodation that Kimberly suggested, asking, “Shouldn’t that be on the letter if that is an accommodation that you need?” Kimberly clarified,

“Oh no, that’s just like a personal thing,” and then expressed that she would be willing to forgo the accommodation adding, “If you’re not okay with that, it’ll be fine. I’ll just try to write quicker.”

Downplaying the use of an accommodation(s). When Professor Williams addressed a specific accommodation, five participants responded by downplaying how much they would need to use an accommodation. In some instances, participants downplayed their need to use an accommodation before Professor Williams even expressed a concern about it. For example, as soon as Professor Williams mentioned that Scott has an accommodation to use a laptop or recording device, Scott responded, “I don’t really use the recording.” Marissa brought up the accommodation for having advance access to PowerPoints but told Professor Williams she could take notes without the slides if Professor Williams was “not comfortable with” providing the PowerPoint slides ahead of time. However, Marissa then added that “it is helpful” to have the PowerPoint slides when taking notes.

Three other participants minimized how much they would need to use an accommodation by stating that it was contingent on their health. For example, when Professor Williams expressed concern about her intellectual property ending up on YouTube, Brian responded that he would only record lectures “when I’m not having a good day” and that he hoped “I won’t even need” to record lectures. When discussing long-term extensions on assignments, Arlene explained that the extensions would be “when I’m having a flare up. But, I have never actually needed to use the extension yet.” Sam also spoke about long-term extensions by first disclosing a mental health condition. He told Professor Williams, “If it’s ok, I will share my health condition with you” and added, “Don’t tell anyone else.” Sam then described how asking for an extension would depend on his health:

So, I have [a mental health disorder]. And if you are familiar with the condition, there is phases like, the person can be manic. So I do everything I can to prevent it, but I just feel like I'm doing too much or I'm not getting enough sleep, which can lead to that, then I might ask for modification, I just don't know.

After Professor Williams responded by communicating his concern about students falling behind in the assignments, Sam minimized his need to ask for extensions on assignments, "Yeah. Okay. But, as I said in the beginning, I'll do my best. I try not to ask many accommodations because if I'm ok and health and everything, I can keep up with everything."

Together, these results demonstrate that when faced with Professor Williams raising a concern about an accommodation, most participants acknowledged or even validated Professor Williams' concern. Beyond this, participants offered a range of other responses. These included appearing to justify an accommodation by explaining its purpose or offering personal responsibility to ensure that they would use the accommodation in a way that would alleviate Professor Williams' concern. Other participants attempted to negotiate or compromise about how the accommodation would be used, while a few appeared to back down by downplaying their need to use the accommodation.

Verbal cue number six. In the sixth verbal cue, the actors were trained to ask the participant about any accommodation that was listed on the participant's letter of accommodations, which had not already been discussed. The protocol instructed the actor to tell the student that they have not seen that accommodation before, and to ask, "How does that typically work?" The cue was contingent upon the participant in the simulation having an accommodation that was not already discussed up to that point in the conversation. The cue was not communicated in six of the simulations. All accommodations for five participants – Jared,

Karen, Kimberly, Nora, and Sam – had already been addressed by the other verbal cues. Therefore, delivering the cue would not have been appropriate. Elissa had an accommodation (peer notetaker) that would have made the sixth cue a relevant question, but Elissa proactively mentioned the notetaker early in the conversation when discussing using a laptop for notetaking. For the remaining nine participants, the actors communicated the cue in which they identified the accommodation and asked about it using variations in language including, “How does that work” or “Can you tell me about that?” In Arlene’s simulation the actor delivered the cue twice, asking about two different accommodations. Therefore, I identified a total of ten data segments across the nine simulations in which the cue was delivered and each of the participants responded. These data segments are listed in Table 22, along with the specific accommodation that Professor Williams addressed. I identified the following themes based on the participants’ responses to Professor Williams: 1) describing the accommodation(s) and/or its benefit, and 2) expressing uncertainty about the accommodation.

Table 22. *Participants’ Responses to Verbal Cue Number Six*

Participant	Accommodation addressed by Professor Williams	Response
Allison	Use of earplugs during exams	I think at DSO it would be pretty quiet... they have the desks, so it’s not too bad. But just in case.
Arlene	Attendance modification Allow breaks during exams	So it’s just a short sheet with about five questions, and, they ask how many classes I would miss before it affects my grade, whether class participation is factored into the grade. You know, to be honest, I’ve never actually used them. So I don’t really know what that means. If I were to think that I needed to use that I would communicate with you again after I speak with DSO.
Brian	Use of a personal fan, salty snacks, water, medication, leave classroom if	Yeah, these are kind of specific to me...just for treating myself.

	temperatures are too warm	
Caroline	Reduced-distraction environment	Oh, yeah. Just that in DSO, like they have these little cubicles for you to take a test in so you are not so easy to be distracted. There is nothing in the room other than that.
Chris	Use of personal computer (testing)	If it's like a short answer question, I just type it in instead of writing it. That way you can read it.
Marissa	Word bank for exams when possible	Yeah, so in high school this is more relevant to my accommodations. Basically, if I had a "fill in the blank" section or, so it helps with foreign languages, when they do the fill-in-the-blanks or different tenses. It's just basically a way for you to visualize what words I have an option from because I'm like going through and scattering, it's hard to...I've not yet used it in college.
Mark	Laptop and/or recording device	It's like a regular note book and then the pen is a little different. Just it has like a microphone in it. So I can hear it. And then I just write my notes and then whatever I feel that I need recorded, so I can actually focus on listening, instead of writing notes.
Nick	E-text	So I have ADHD. So I get distracted very easily, and I just have a short attention span. So when I'm reading something, if it's not interesting to me, I'll maybe read five sentences, and be like, I don't like this at all and just not get reading done. The E-text is, I get it online first of all, and then I get a second part to it, where it reads to me. And then I read along as it reads to me, so we're both engaged with it.
Scott	Screen reader	I have no idea. I don't use it, though. I think it's supposed to be able to dictate readings, but I don't think there will be any readings in this class.

Describing the accommodation(s) and/or its benefit. Seven participants responded to Professor Williams asking about one of their accommodations by describing the accommodation, and often by adding how it benefits the participant. Arlene simply described how her accommodation worked when Professor Williams asked her about her attendance modification and the associated agreement. Arlene replied that the agreement is "just a short sheet with about

five questions” and then described some of the questions listed on the agreement. Allison and Caroline described the benefits of using testing accommodations, such as using earplugs “just in case” there is noise during a test (Allison), taking a test at the Disability Services Office “so you are not so easy to be distracted” (Caroline). Chris highlighted how using a personal computer would benefit him and the faculty member: that Professor Williams and he will be able to “read it” when Chris types. Mark explained the use of a smart pen and how it allows him to be able to “actually focus on listening [to the professor as they lecture], instead of writing notes.”

Marissa referred back to her experiences in high school to explain a “word bank” and told Professor Williams that it has been beneficial for her “to visualize what words I have an option from” when completing a test. Nick referred to having ADHD when asked by Professor Williams about the “E-text” accommodation and explained that he is easily distracted when reading. Nick then explained that having electronic versions of readings allows him to “read along as it reads to me, so we’re both engaged with it.” Lastly, Brian explained that the accommodation “Use of a personal fan, salty snacks, water, medication, leave classroom if temperatures are too warm” are related to his health condition, telling Professor Williams that the accommodations are “kind of specific to me” and used for “just treating myself.” Professor Williams said that her only concern was that the snacks would not be distracting to the other students. Brian replied, “Yeah, definitely.”

Expressing uncertainty about the accommodation. Two participants responded to Professor Williams’ question about their accommodation by expressing uncertainty about the accommodation. In both cases, the participants stated clearly that they do not use the accommodation. When Professor Williams asked Scott about the accommodation of using a screen reader, Scott replied, “I have no idea. I don’t use it, though.” Scott then added that he

didn't think it would be relevant to Professor Williams' course, explaining, "I think it's supposed to be able to dictate readings but I don't think there will be any readings in this class." Arlene was asked by Professor Williams about her accommodation of taking breaks during exams. Arlene replied, "You know, to be honest, I've never actually used them. So I don't really know what that means." Arlene then said that she would follow up with both the Disability Services Office and Professor Williams if she did decide that she did need to use the accommodation.

Overall, the sixth verbal cue differed from others because each participant was asked by Professor Williams about a different accommodation. Nevertheless, individual participants demonstrated similarities in how they responded to a question about a specific accommodation. Most often, participants explained how an accommodation is typically used and the purpose that it serves. In other cases, participants appeared to be unfamiliar with an accommodation that Professor Williams asked about. Arlene and Scott did not seem to be confident in describing accommodations, such as a screen reader (Scott) or taking breaks during exams (Arlene) because they had not used the accommodation previously.

Verbal cue number seven. In the final verbal cue, the actors were instructed to ask each of the participants "Is there anything else you wanted to talk about today?" and then end the conversation by thanking the participant for meeting with them. The actors communicated this verbal cue, at least partially, in all 15 of the simulations. In three instances—Allison, Elissa and Karen—the actor only thanked the student and said goodbye, without asking them if there was anything else the student wanted to discuss. The actor may have forgotten to ask, or they may have decided it was not necessary given that they had a detailed discussion about the accommodations. In any case, these three participants' conversations ended with mutual expressions of appreciation between the participant and Professor Williams. Of the remaining 12

participants, eight responded to Professor Williams' question by expressing that there was nothing else they wanted to discuss (e.g., "No, that's it", "I think that's pretty much it"). Among the other four participants, I identified two themes in their responses: 1) following up about logistics of an accommodation and 2) further explaining their need for an accommodation.

Following up about logistics of an accommodation. Two participants – Arlene and Nora – responded to Professor Williams' question about anything else they would like to discuss by reiterating that they would follow up with the professor regarding an accommodation they had discussed earlier in the conversation. Nora responded to Professor Williams, "So I'll email you two weeks prior [to the test]" to discuss where she would like to take the test. Arlene had earlier discussed the modified attendance accommodation and responded to Professor Williams, "Just I have to come back to do attendance agreement."

Further explaining their need for an accommodation. Caroline responded by returning to an earlier topic in the conversation, when Professor Williams mentioned that he was concerned that students don't show up to class when he sends out PowerPoint slides in advance. Caroline reiterated that she wanted Professor Williams to provide her with the PowerPoint slides and said that she would not share the PowerPoint slides with other students prior to class:

Otherwise, I mean, I know you mentioned before, when you have sent PowerPoint to students, they don't show up. But personally, I really find it helpful if you could send those PowerPoints because when my note taking is slow, I can have my computer and my notebook, and copy it down.

Caroline then added that she would plan to come back to Professor Williams' office hours to talk through her ideas and asked Professor Williams if she could show him some assignments ahead

of time, “just so I know if I’m on a right track.” Finally, she asked Professor Williams if he could recommend any tutors for the class.

Early in Sam’s simulation, he identified to Professor Williams as having a mental health disorder and shared that he would do his best to not use the accommodation for long-term extensions that he is entitled to use. When Professor Williams asked Sam if there was anything else he wanted to discuss, Sam again returned to explaining that his need for using the accommodation was dependent on his health:

No, as I said just with this condition if I’m healthy and taking care of myself, for the assignment modification I shouldn’t have to ask for anything cause I’m normally able to handle it. But God forbid there is a crisis or something, I’ll just let you know. So e-mail is the best way?

Professor Williams responded, “Not a problem” and ended the conversation with small talk.

Immediately after each participant finished their simulated meeting with Professor Williams, I escorted the participants into a different room for a discussion, in groups of three. The intention of this group discussion was to debrief the simulation – to ask participants to share their experience and feelings just moments after they had finished their conversation with Professor Williams. At this point, I had not seen or heard any of the interactions between participants and the actors in the simulation. The group debriefing interviews were the first opportunity for me to ask questions to gain insight into participants’ experiences in the simulation.

Group Debriefing Interviews

I began each group debriefing by asking the participants to tell me how it felt to participate in the simulation and to what extent they found the simulation to be realistic. Then, I

asked participants to describe their approach to the conversation and to share any aspects of their interaction with Professor Williams. When analyzing the videos of the group debriefings, I identified five themes: 1) reasons why the simulation was realistic/unrealistic, 2) approaches to meeting with Professor Williams, 3) conflicts/tensions in the conversation with Professor Williams, 4) positive aspects of their conversation with Professor Williams, and 5) what participants learned/would do differently in the future.

Reasons why the simulation was realistic/unrealistic. Each of the 15 participants made at least one statement regarding the extent to which the simulation was realistic, or indicative of a real-life conversation with a faculty member. Of the 15 participants, two participants made only statements indicating that the simulation was realistic. Four participants described the simulation only as unrealistic. The remaining nine participants made statements that indicated aspects of the simulation were both realistic and unrealistic. These nine participants often described the simulation as realistic except for a certain aspect which they then specified. In Table 23, I have listed statements from 11 participants that I identified as indicating the simulation was realistic or authentic.

Table 23. *Participant Statements Regarding the Authenticity of the Simulation*

Participant	Data Segment
Allison	Yeah, definitely.
Arlene	Oh yeah, for sure.
Caroline	Yeah... I personally forgot that I was being filmed but I was nervous because in the back of my mind I knew in my mind that it was an actor...but it was really natural. I thought it was pretty realistic that he didn't just accept everything I said. He actually had sort of an opinion.
Jared	I guess it was realistic... He just asked the things professors asked me in the past, when I went in.

Karen	<p>I just sort of greeted and shook hands like normal. I was able to follow the natural flow of conversation pretty easily. I was really scared of getting out of character, like not acting myself...I was worried that I would start giggling or something and totally go out of character and mess the whole thing up. But that didn't happen...I felt that I had no problems being myself...the way I was describing items on my letter and just interacting with her conversationally was just really close to how I do.</p> <p>That part felt realistic to me, in the way that she raised concerns about that one [accommodation for long term extensions on assignments].</p>
Kimberly	<p>I was a little nervous because of being filmed. But once I got talking, he seemed just like another professor.</p>
Mark	<p>Very realistic...I was a little nervous because I was being filmed but then it was like I'm talking about what I'm used to talking about, so it wasn't a big deal.</p>
Marissa	<p>I felt like it was normal questions to ask if they didn't have a student with disabilities in their class before.</p>
Nora	<p>Yeah.</p>
Sam	<p>I thought I was going to giggle, but I didn't. I was able to keep my character...like I asked him if he wanted me to e-mail him my accommodations letter. It felt normal.</p> <p>My Professor Williams asked me about my other classes. So I just told him about some of my actual classes and I told him I had an internship this past summer and that I might want to go to medical school.</p> <p>Yeah, I agree with Scott [that Professor Williams' comment about testing was realistic]. Like I took a chemistry test last week and I was wondering if there is a typo or something, or am I missing out on something.</p>
Scott	<p>I was worried too but then it felt normal.</p> <p>I think like 90% [realistic].</p> <p>It's something I've thought about before [missing information/questions when completing an exam at DSO]...I've actually thought about it and I don't know the answer to it.</p>

In response to my question about whether the simulation was realistic, some participants responded with brief affirmations, such as “Oh yeah, for sure” (Arlene), “Yeah, definitely” (Allison), and “Yeah” (Nora). Other participants provided further elaboration. Six participants — Caroline, Karen, Kimberly, Mark, Sam, Scott — described how they were initially either nervous, scared, and/or conscious that they were participating in a simulated conversation.

However, these same participants indicated that once they began the conversation, it felt “really natural” (Caroline) and “normal” (Sam, Scott), and that Professor Williams seemed like a typical faculty member (Kimberly). Karen and Mark added that how they talked in the conversation was reflective of how they typically discuss accommodations with faculty members. In other words, while conscious of participating in a video-recorded simulated conversation with an actor, the conversation quickly became indicative of a real-life conversation with a faculty member.

Other participants identified specific examples of Professor Williams’ communication that made the situation feel authentic. Sam recalled that Professor Williams engaged in small talk that commonly occurs between a student and faculty member, including talking about Sam’s other classes, a recent summer internship, and Sam’s plans to go to medical school. Jared explained that the meeting with Professor Williams was realistic because “He just asked the things professors asked me in the past, when I went in.” Marissa said that Professor Williams asked “normal questions” that a faculty member would ask “if they didn’t have a student with disabilities in their class before.” Caroline added that she found the fact that Professor Williams made comments and asked questions about her accommodations was realistic because Professor Williams “didn’t just accept everything I said. He actually had sort of an opinion.”

Karen, Sam and Scott felt that the specific comments Professor Williams made about their accommodations were realistic concerns. Karen mentioned that it “felt realistic to me” when Professor Williams expressed concern about students falling behind when receiving long-term extensions on assignments. While Sam and Scott both noted that they had not previously heard a faculty member suggest to them that they might prefer to take the test with the faculty member so that they can ask questions, Professor Williams’ comment resonated with them because they had both recently experienced taking a test at the Disability Services Office and

were wondering if they had missed an opportunity to ask the faculty member a question. In contrast to these comments, participants gave several explanations for why they felt aspects of the simulation were not realistic. In Table 24, I have listed statements from 12 participants in which they describe aspects of their interaction with Professor Williams that were not realistic.

Table 24. *Participant Statements Describing Unrealistic Interactions*

Participant	Data Segment
Arlene	<p>It's the longest conversation I've ever had with a professor about my accommodations. I feel like it's usually shorter. They're kind of like "yeah, okay, cool." ... It was more of a discussion. She went through every single accommodation that I had on the list and she was like "ok, how do we do this? How do we do this?" Whereas usually it's just kind of a general conversation and I have accommodations that I don't use so I won't bring it up in conversation.</p> <p>She talked about things that she was concerned about with my accommodations, which I haven't had a professor bring up before.</p>
Brian	<p>Yeah, I could agree with that [Elissa's comment]. My professor was more like, "let's talk about other stuff too"...it's [usually] just like "yeah, whatever".</p>
Chris	<p>It seemed pretty unrealistic...because professors usually just look at the paper. They don't really comment...they usually just say ok.</p> <p>It was kind of unrealistic though. I've never had a conversation with a professor. Just give them the paper, they don't care.</p>
Elissa	<p>He was chattier than a normal professor... He was more difficult, added more anecdotes than a professor would.</p> <p>He said that he doesn't like to post slides on Blackboard because then people don't come to class. Every professor I've had at Eastern University has posted slides [online].</p> <p>Usually they are worried [about being audio recorded] if they swear or something...They usually joke about it...but they don't really care.</p>
Karen	<p>Usually I wouldn't have gotten that point of concern raised, but it's a good point of concern to raise.</p>
Kimberly	<p>Except for the setting. But the conversation itself was [realistic].</p>
Jared	<p>Yeah...It's kind of like a 10-second thing. You just give them your letter and say "this is my letter" and then that's it.</p>
Mark	<p>Some professors e-mail me later on with concerns about it and then I'll have to meet with them.</p>

Marissa	If there was a professor who actually genuinely didn't know what the accommodations were and was kind of confused and wanted to know more about the student's situation and why they wanted those accommodations, that makes sense. But I never had that long of a conversation with a professor.
Nick	I've never sat down to have a conversation. I usually just give it to them at the end of class. They just say "okay."
Sam	All the professors I have interacted with, in reality, have never asked me that.
Scott	The only thing that wasn't realistic, well I've never experienced, when I said I have a computer accommodation, he said well, maybe you should write [notes in class]. Or, he said it really nicely. But usually my professors are like "ok" but he kind of pushed back a little bit. I've never gotten that before. I usually go after and then if I didn't bring my accommodation letter, which is usually, because I always forget, I'll say "Hey I have accommodations. All I really use in this class is double time. Is it fine if I e-mail it [the letter]?"

The aspects of meeting with Professor Williams that participants most frequently described as unrealistic were that the conversation was longer than usual and that Professor Williams asked more questions and made more comments about participants' accommodations than a typical faculty member. Brian agreed with Elissa's comments that Professor Williams was "chattier than a normal professor," "difficult," and "added more anecdotes than a professor would." Chris described the conversation as "pretty unrealistic" because faculty members "don't really comment" about accommodations and instead "usually just say okay" after looking at the letter of accommodations. Arlene described the conversation as "the longest conversation I've ever had with a professor about my accommodations." Arlene recalled that Professor Williams "went through every single accommodation," whereas typically Arlene only discusses some accommodations, leaving out accommodations that she would prefer not to discuss. Marissa also reported that "I never had that long of a conversation with a professor", and Jared said a typical conversation is "kind of like a 10-second thing" in which "You just give them your letter and say 'this is my letter' and then that's it."

Other participants shared that Professor Williams made comments or questions that they have not typically heard when speaking with faculty members. When discussing Professor Williams' comment that previous students have preferred to complete tests with Professor Williams, rather than at the Disability Services Office, Arlene, Karen and Sam all stated that they have not heard a professor express this idea, though Karen acknowledged that "It's a good point of concern to raise." When reflecting on Professor Williams' concern about his recorded lectures being put on the Internet, Elissa said that this was "something a professor has never said to me before." However, she did note that faculty members do express concerns about recording, and often in a joking manner. "Usually they are worried if they swear or something," Elissa explained. Elissa also mentioned that Professor Williams' concern about students not coming to class if they give out PowerPoint slides ahead of time was not something she has heard before, because faculty members typically upload PowerPoint slides online. Scott shared that the only unrealistic aspect of the simulation was when Professor Williams "pushed back" about Scott typing notes when he suggested that Scott consider handwriting his notes. Finally, Arlene added that generally she had not experienced faculty members expressing concerns about her accommodation.

Four participants expressed the setting was not realistic. Karen and Kimberly were the only two participants to refer to the environment of the simulation being in a room that resembled a medical examination room. Karen laughed at one point when she mentioned "the table" in the room, referring to a medical examination table in the corner of the simulation room. Kimberly stated that the conversation was realistic "except for the setting." Other participants described the setting of the simulation as not indicative of their real-life experiences because they do not typically arrange a meeting with a faculty member. Chris said that "I've never had a

conversation with a professor” in their office and instead gives the accommodations letter to faculty members at the end of class without engaging in much dialogue. Nick also said he gives the accommodations letter to faculty members at the end of class and has “never sat down” to have a conversation. Marissa also mentioned that this was the first time she was having a meeting with a faculty member. Scott described that he usually tells faculty members in class that he has accommodations and then e-mails them the letter. Mark explained that he hands some faculty members the letter in class, though “some professors e-mail me later on with concerns about it and then I’ll have to meet with them.”

Approaches to meeting with Professor Williams. Several participants provided descriptions of their approach when meeting with Professor Williams. Participants also related their approach in the simulation to how they typically discuss specific accommodations, or accommodations in general. Six male participants emphasized that they take an approach that is direct, or straightforward in discussing their accommodations.

Brian: [I did] what I usually do...Just go straight through the bullet points and talk about each one of them as necessary.

Chris: I just talk as little as possible. That’s usually what I do.

Jared: Yeah, straightforward.

Mark: I kind of was upfront too. Because I’m just used to doing that.

Nick: I just went in there like normal, just what I thought I would say...I said ‘Hi, I’m Nick...nice to meet you’ and handed her the letter. Maybe talk a little bit. Then I gave her the letter and we went over the accommodations.

Scott: I get straight to it.

Two female participants – Nora and Marissa – also emphasized a straightforward approach, though with consideration for how the faculty members might receive them. For example, Nora emphasized the importance of introducing herself first, “because I know professors have a lot of students and matching a face to a student is good when you have accommodations. . . . So, yeah, I came in and introduced myself and I think that made it kind of easier and a more personal connection to explaining my accommodations.” Marissa explained that she “was just going to like explain my accommodations” but that she also wanted to ask Professor Williams if she had any concerns or questions.

Other participants talked about which accommodations they chose to discuss and/or the order in which they prefer to discuss certain accommodations. For example, Kimberly explained that “I try to be consistent throughout all of my professors. I start with ‘I take my test elsewhere’ and then I go with my time and a half after that. . . . I have an order, yeah.” In contrast, Caroline explained that she does not discuss accommodations in a specific sequence, and she tries to see where the conversation naturally leads:

I don’t have a specific order when I tell them what my accommodations mean or what I plan on using out of my possible accommodations. I kind of just bounce ideas off of what they say so it’s more natural instead of just stating—I mean I state what I feel is necessary for me to say. I try to request the things that I think I need but then otherwise it just flows, I guess.

Elissa explained that she chooses which accommodations to discuss depending on the course syllabus. She stated that “I only talk about the ones that I see in conflict based on the assignments in the syllabus. So, I went in saying everything looks fine except there is the in-class

exams and I said I need extra time.” Elissa then added that she then always talks about “getting slides in advance because that’s something I need.”

Allison and Arlene both shared that their approach to discussing their accommodations was altered by Professor Williams wanting to discuss each of their specific accommodations.

They explained:

Allison: I was just going to talk about my accommodations and be like “okay this is what’s up” and like, what I need in order to be successful in the classroom. But I wasn’t expecting her to like go through every one. So, I guess my approach was to just like talk about it all at once and I kind of modified it then to fit the flow of the conversation.

Arlene: I have the intention of kind of explaining and introducing it on my own terms, but she wanted to see my sheet and so then she went through each of them individually. So, I had kind of a way that I prepare my explanation, which is just to like explain why I need the accommodations first, and then go over which ones I expect to use. But since she wanted to then go down the list, it got me a little bit confused, about why I was there, what my goals were.

Both Allison and Arlene were not expecting that Professor Williams would reference each of their accommodations (I had not trained the actors to comment on each accommodation, and in most cases the actors only referenced the accommodations that were relevant based on the verbal cues). Whereas Allison and Arlene were expecting to take the lead in discussing the specific accommodations that they wanted to discuss, they instead felt that they were reacting to the comments and questions and offering explanations to satisfy Professor Williams.

Four participants shared how they began the conversation by explaining their disability or challenges related to their disability. Caroline referred to the description that she had told

Professor Williams about her disability not having a specific label, explaining “I told him that my, technically, disability isn’t really clear cut. It’s not like I have a case of this. It’s more of a description and that’s what I have come to accept about it.” Similarly, Kimberly recounted the description of her hearing impairment that she had described to Professor Williams. Just as she did in the simulation, Kimberly took out her hearing aid to show Caroline and Mark in the group debriefing. She recounted, “I kind of told him, this is what I have, I have a hearing impairment. This is what it does it for me. I told him off the bat. Here I’ll show you guys [removes hearing aid]. I do have a hearing aid. That’s how I introduce it.”

Both Mark and Sam discussed how they approach the conversation by explaining challenges that they experience. Mark reflected that “I think I explain what I struggle with. I kind of like let them figure out what they will do for me.” While Mark described a more passive approach to discussing his needs, Sam shared how he is deliberate in framing his needs in relation to his health condition. Sam described, “I told him, and this is what I tell my professors, if I am healthy the whole semester and if nothing happens, I try not to ask for any extensions because I have the capacity to keep up with all the deadlines. But if something happens I’ll let them know what’s going on and I told him my health condition, just so he knows.” Sam had shared the name of the mental health condition with Professor Williams during the simulation but did not in the group debriefing.

The issue of sharing one’s disability identity became a further topic of conversation in the group debriefing with Karen, Sam and Scott. Karen, a senior, asked Sam and Scott, “Do you guys usually disclose your condition, or conditions, to professors because I don’t do that but I don’t know if I should be?” Karen’s question was the only instance in which a participant posed

a question to other participants during the group debriefings. Scott responded to Karen's questions, sharing that disclosing his disability depends on which course he is taking:

I only do it in certain classes. In my major I don't because I feel like I'm going to be judged and they will think, they will think something of it either way. So I just don't want them to know and I usually don't need it. But in other classes, I do. It just depends. ...my thinking behind it is that they're [professors in Scott's major] the ones who are going to potentially hook me up with jobs or something. To me I just feel like if they see "Oh, he has double time, he is just slower than everyone else," when that's just not the case.

Karen followed up on Scott's response, asking "Like they are going to discriminate against you?" To which Scott responded, "Yeah and I just feel like...I've never needed it in any test [in my major]." I then asked Scott to clarify whether he was referring to not disclosing a specific disability identity during conversations with faculty members about accommodations, or that he does not even provide his letter of accommodations to the faculty member at all. Scott reported that he does not show his letter of accommodations to faculty members in his major courses and therefore does not seek to use accommodations in these courses. "If I needed it, I would have given it," Scott explained, "but I just never needed it in my major." Karen and Scott also added that how much they share with faculty members, or how they talk to faculty members, depends on the "vibe" that they get from them. Deciding on how to talk to faculty members about accommodations is a "very intuitive, subjective thing," according to Karen.

Conflicts/tensions in the conversation with Professor Williams. Nine participants shared either conflicts or tensions that arose during their conversation with Professor Williams. The type of conflict that participants most frequently addressed were tensions between their needs and preferences, and the perspectives of Professor Williams towards their

accommodations. When Allison and Nora were talking prior to my arrival in the debriefing room, Allison told Nora about her conversation with Professor Williams, explaining, “I have extra time and she was like ‘oh well maybe you can take it in the classroom,’ and I was like ‘ok, whatever.’” Later in the debriefing, Allison recalled the same part of her conversation and described Professor Williams as “trying to make accommodations to my accommodations.” She continued, “So, for example, I have extended time on tests, so she was like, ‘Oh maybe you could try taking the test in the classroom at some point.’ So, I don’t know. I thought that was interesting.” When I asked Allison what she meant by the phrase “accommodations to my accommodations,” Allison responded that Professor Williams “was kind of trying to like, I don’t know, make it more integrated into the normal testing experience...just like making suggestions.” Allison said that Professor Williams’ suggestion “was a little bit frustrating.” However, Allison added that she “would handle it when it occurred” if the suggestion of where she should complete tests became an outright refusal, “If they were like, ‘No, you have to take it in the classroom.’”

Marissa and Kimberly also voiced concern about Professor Williams’ comments related to testing accommodations because they appeared at odds with the accommodations. During the simulation, Kimberly asked Professor Williams if it was “okay” to take the test at the Disability Services Office. In the debriefing she explained that “I was supposed to take [my test] at DSO... He said, ‘Oh how about you take it in the office instead?’” Marissa also recalled Professor Williams’ suggestion that she might take the test in class and explained that she tried to be flexible to show she understood Professor Williams’ concern, but that she still needed to use her accommodations. Marissa recalled telling Professor Williams that “I was willing to try [to take a

test in class], but obviously if I needed to write an essay I would need a laptop and I thought that would be distracting for the other kids, and that's not fair [to the other students].”

Elissa and Nick also expressed that they experienced conflict regarding specific comments made by Professor Williams about one of their accommodations. Elissa described how Professor Williams made a comment about not liking computers to be used in class, which then made it uncomfortable to discuss using her laptop for taking notes. She explained that “One of my accommodations is computer and also notetaker. And then the person said, when I said the notetaker, ‘Well I don’t like people to use computers in class, so can the notetaker handwrite?’ Meanwhile on my paper it says I was allowed to use a computer, and it was kind of awkward.” Nick recalled that Professor Williams expressed concern about Nick recording lectures, which was one of the accommodations that he said would be helpful for him to use. “I mean I get it, you don’t want to do that [have student record lectures],” Nick said, “it’s not the end of the world, but like it could be helpful to have the recording.” Arlene also shared that it was “awkward” responding to Professor Williams asking about her attendance accommodation because “I don’t know when I am going to need them [excused absences]” given the unpredictability of her health condition.

Allison and Arlene shared instances in which they resolved potential conflicts with Professor Williams when responding to Professor Williams’ concern about recorded lectures being posted on the Internet. Allison recalled that she addressed Professor Williams’ concern by providing more information about the recording device:

Well she brought up the recording device, like she didn’t want it to “end up on YouTube.” So...I just addressed her concern with that. Because it’s like the smart pen. So, I was like, there is not really any way, it’s not like a video. It’s audio. So, there

definitely was some resistance to it but I feel like if you try to explain the situation then, as long as they feel that they are not going to be like in an uncomfortable position or end up on the Internet, then it's fine.

Arlene also described alleviating conflict regarding using any recording device:

Same thing with that [points to Allison]. You know, she said she didn't want to end up on YouTube. I thought that she was initially saying that I couldn't use that accommodation but then she just said you have to keep that confidential, and I said ok, which I thought meant that we had reached an agreement on that, that I could still use it but I wouldn't put it online.

Unlike Allison, Arlene allowed Professor Williams to do most of the talking and simply agreed with Professor Williams' request, with the understanding that Arlene could still record lectures.

Caroline, Chris, Marissa, and Nora described how they communicated with Professor Williams to address comments Professor Williams made about where they would complete tests. Nora described how she "actually asked them what they prefer...they just said to take it in their office hours...I actually prefer [taking it with the Professor]." Chris recalled how he responded to Professor Williams' comment "that students usually prefer to take it in the class because sometimes you have a question, which does happen." Chris described that he "asked would I get more time if I did that. He said yeah." However, Chris then added that "In reality, professors don't give you more time if you don't take it at DSO."

Marissa and Caroline both explained that they responded to Professor Williams' comment about testing by saying that they would consider completing the test with the Professor. Marissa recalled that "I said it depends on the class and how well I'm doing in it, for me, to determine whether I'm taking it in DSO or the classroom because you do want to ask professors

questions sometimes.” Caroline recalled that “I said that I would be potentially open to taking it in the professor’s office,” however she would not want to take it in the classroom with a large group of students. Instead, Caroline explained that she would prefer to take the test at the Disability Services Office, as long as she felt she knew the test information well enough that she would not need to ask the faculty member questions.

While issues of authority were implicit in many of the perspectives shared by the participants in the debriefing, five participants made more direct reference to issues of authority, such as feeling pressure to agree with Professor Williams, or feeling like they were debating or defending the right to use their accommodations. Arlene explained that Professor Williams’ comments about where Arlene would complete the tests made her feel like using her accommodations were up for debate and that she felt compelled to say “okay” to Professor Williams because of the power dynamic of a student-faculty member relationship:

She said that she wanted me to take it there, I mean with her, so I could ask questions and that’s something like I really just took an exam and I needed to ask questions and I was at the DSO office. I said “okay” I guess, but I don’t know, because I think of this as not something that should be debated, like this is something I am granted and it shouldn’t be that much of a discussion. It should be more of me informing the professor...they’re the professor and you’re the student so you just kind of say “okay.”

At least that’s how I responded was just to be like “okay, sure.”

Allison followed up on Arlene’s comment, explaining she felt that she had to justify her accommodation, which Allison described as “unnecessary because like you were saying [pointing to Arlene], it’s not really something that should be debatable. And I feel like I was having a lot of the time to explain myself or like ‘no, like I actually do need this.’” Nick also

described the pressure he felt to agree with Professor Williams when she made a comment about taking the test in the classroom. The actor used the phrase “I prefer” to suggest that Nick take the test with her. Nick recalled:

She was like not happy with it [the testing accommodation] at all. She’s like try taking them in the classroom instead of in the office because sometimes she will point out answers...but I said I like to take it in a quiet area with just myself and not other kids...it was awkward because I didn’t want to say no, but I had to.

Nick found it uncomfortable to express his preference for using an accommodation while perceiving that Professor Williams had a strong preference for an alternative.

Karen spoke about feeling the need to offer a lengthy explanation and be “defensive” when speaking with Professor Williams regarding the accommodation of having long-term extensions on assignments. Karen said, “I feel like when you watch, and I watch my recording, you are going to see me sort of jump on the defensive almost, and I talk a lot.” Karen shared that she gets defensive when anticipating how faculty members will react to the accommodation of long-term extensions on assignments:

And that’s when I tend to get defensive as a student because I feel that my professors are like “what is this?” She did sort of say “well the problem with giving one extension is it turns into multiple ones and I worry about students getting behind.” So, I tried to clarify and say that usually it’s just that one [extension] and then if I miss it, it’s a grade reduction or a completely zero because you have been given that extra chance, and that’s what’s fair...Most people I feel like haven’t heard of this. And I found myself really, like almost like anxious to the point to need to preface it and explain myself beforehand, because this just looks like a free pass, right?

Shortly after Karen expressed concern that faculty members might think her accommodation was a “free pass”, Sam acknowledged that he also receives the accommodation for long-term extensions. Sam and Karen discussed the accommodation for a moment, before agreeing that it seemed to be the same for both of them. Sam then used the same phrase as Karen – “free pass” – and explained that he sometimes feels hesitant to discuss long-term extensions “because I don’t want them to think that I am asking for a free pass.”

Chris and Nick discussed tensions that arose due to Professor Williams making comments or asking questions that they perceived as too personal. Chris and Nick talked with each other while waiting for Marissa to finish the simulation and enter the debriefing room. Nick broke the silence when he entered the room where Chris was sitting, saying, “That wasn’t too bad.” Chris immediately responded by expressing what appeared to be frustration or annoyance with Professor Williams’ comment about laptops being distracting, and also that Professor Williams’ question about what his disability meant for him as a student in the class, was too personal:

Chris: He’s like “what’s your disability?” It’s like, I’m not going to talk about that.

Nick: [laughing] He’s like “how does this one work?” I’m like, “I’m afraid I don’t really know.”

Chris: I have a typing thing. He’s like “you know, laptops can be distracting in class” It’s like, *okay*.

Later in the debriefing, Chris conveyed that he did not appreciate being questioned about what his disability meant for him as a student in the class. Chris explained that “I think it’s a little uncomfortable, some of the comments that they made. They kind of like were trying to ask what your disabilities were and how does this pertain to the class.” Chris said that he didn’t really

respond to Professor Williams' question about his disability because "It's not really their business."

Similarly, Nick expressed that he did not respond to Professor Williams' question because it was "intrusive, personal" and that "She was like questioning me on my disabilities and like why I needed each one for her class. I was like that's not really right. Just accept my disabilities and deal with it and not question it." Nick added that the questions made it feel "like they didn't really want to give me my accommodations that they had to." Marissa was in the same group debriefing with Chris and Nick and began laughing as she followed up Chris and Nick's critical reactions, seemingly because she had such a different interpretation of Professor Williams asking about what Marissa's disability meant for her. Marissa did not interpret the question as too personal. Instead she said, as she laughed, "I just explained it. I was like, some things I process slower so the extended time helps me not stress out. I don't know, I've always had to explain it, so it was just a normal question."

Positive aspects of the conversation with Professor Williams. Compared to the participants who identified conflicts or tensions, there were far fewer descriptions of positive aspects of interactions with Professor Williams. I identified positive descriptions among seven participants, which included descriptions of Professor Williams' attitude or personality, as well as descriptions of the overall encounter. Positive descriptions of Professor Williams' attitude or personality included:

Caroline: He seemed to be super accepting...super open.

Mark: Very agreeing, no problems.

Sam: Seemed like he was pretty tolerant.

Allison: We went through every accommodation...but I thought it was good because she actually demonstrated interest rather than just being like “ok, we’ll just see how it goes.” So, she was actually trying to understand.

Nora: Very easygoing. My professor was cool with my accommodations.

Sam, who described Professor Williams as “pretty tolerant,” further noted that he was more comfortable speaking with Professor Williams compared with some previous faculty members. Whereas he is sometimes hesitant to reveal his mental health condition, he worries that a faculty member will “judge me or look at me differently or grade me differently.” However, with Professor Williams, Sam “was pretty comfortable explaining to him” about his condition and accommodations. Allison’s comment that she appreciated that Professor Williams “demonstrated interest” in each accommodation was in contrast to other participants’ comments mentioned earlier, indicating that they were surprised and frustrated by how much Professor Williams commented or asked questions about their accommodations.

Marissa and Karen also spoke positively about specific aspects of their interaction with Professor Williams. In the group debriefing with Chris, Marissa, and Nick, Marissa was often following up comments from Chris and Nick about conflicts with Professor Williams, by contrasting her more positive encounter. She explained “Honestly I’m not really uncomfortable about it [talking about her disability] so I just answered the questions as best as possible and sort of explained my past experiences with them. I didn’t really get a bad feeling about it.” She continued by recounting Professor Williams’ positive response to Marissa’s explanation of using a recording device for lectures. Marissa shared that, “I explained how it works. You can go back to your notes, click if you missed a note and then play what the teacher was saying. So they [Professor Williams] were like ‘that’s really helpful.’”

Karen and Kimberly also expressed positive reactions when discussing Professor Williams' comments about students potentially missing questions by taking the test at the Disability Services Office. Karen acknowledged that "it's a good point of concern to raise." Kimberly also received Professor Williams' comment as a helpful suggestion, explaining "He was very nice and said 'well what if you have a good question, I won't be able to answer it...so you could take it my office at a different time.' So, it's a reduced distraction and also take it with time and a half." However, Kimberly also qualified her response, adding that she didn't see Professor Williams as being completely flexible because "you know it wasn't like 'oh sure you can take it wherever you want.'"

Other participants spoke positively about the overall encounter with Professor Williams, when I asked participants if they felt that they accomplished what they would like to have accomplished from the conversation. Nora responded that "mine went pretty well." Sam provided a more detailed response, explaining "I feel like he was understanding of what I needed from my accommodations and I felt confident that I could trust him with this and that he would be there for me if I needed an extension or something." Nick, who mostly described conflicts when describing his encounter with Professor Williams, acknowledged that "I think she generally knows that I need the accommodations that I have." Other participants expressed that they felt they accomplished what they wanted to but offered no elaboration other than a simple "Yeah."

What participants learned/would do differently in the future. Without me asking, in one of the small group debriefings two participants provided explanations of what they learned about themselves from the simulation and what they might do differently going forward. Allison explained:

I guess going forward, after having this simulation, I think that I would be more, not firm, but leaving it less up in the air regarding, you know, taking it in a separate testing space or also with like receiving the PowerPoint notes the day after instead of the day before. And I also think I would definitely like to look at my own accommodations more so I would feel more comfortable talking about it and be able to answer her questions in a more detailed and efficient manner.

Allison identified how the status of using some of her accommodations in Professor Williams' class was left ambiguous. Allison may have been referring to how she waived when telling Professor Williams when she would like to receive advance access to the PowerPoints, to the point that she eventually said she would be willing to receive them after class. Or she may have been referring to when she expressed that she might be willing to take exams with Professor Williams, even though she originally stated that she wanted to take the exams at the Disability Services Office. Allison further reflected that she would like to become more familiar with the accommodations on her letter, so she can discuss them in a "more detailed and efficient manner."

A moment later, Arlene followed up on Allison's statement and also shared that she realized that she left the status of how she would use her accommodations ambiguous:

I would say kind of a similar thing [as Allison]. I left a lot of it up in the air and I didn't realize it at the time, but then immediately after I was like wait, I'm still not sure if I am allowed to take the exam at the DSO office. Yeah, so a lot of stuff was pretty unclear and that's definitely been the case in the past. I think for me some of this stuff is hard to talk about and share and so then in doing that I leave it ambiguous.

Arlene stated that leaving decisions about accommodations "up in the air" was an experience she has had in the past. In the simulation, she felt she had left the conversation without really

knowing if the professor had “allowed” her to take tests at the DSO. Arlene attributed the ambiguity during conversations with faculty members to the difficulty of discussing her disability-related accommodations.

Overall, data from the group debriefing provided insight into several aspects of participants’ experience in the simulation. Participants’ evaluations of the authenticity of the simulation were mixed. Participants identified several aspects of the simulation that did not resonate with their real-life experience including the setting (medical simulation), the length of the conversation with Professor Williams being longer than normal, and the fact that some participants do not typically sit down in a faculty member’s office to discuss accommodations. At the same time, several participants indicated that the simulation was authentic because it felt like a typical conversation with a faculty member and that their approach reflected how they would normally approach a conversation in real life. Furthermore, participants shared that Professor Williams raised valid concerns given participants’ experience using accommodations (e.g., students potentially missing information when completing a test at the Disability Services Office).

The debriefings also demonstrated that participants’ immediate reactions to their discussion with Professor Williams tended to focus more on conflicts and tension, rather than on positive aspects of the interaction. Many but not all participants appeared to perceive Professor Williams as at least somewhat resistant towards accommodations. Of those who reported conflicts with Professor Williams, some participants expressed how they tried to resolve the situation, while others acknowledged that they did not assert themselves or express disagreement with Professor Williams. Other participants expressed positive aspects of their interaction with Professor Williams, showing variation in the extent to which participants perceived Professor

Williams as supportive of their accommodations. The debriefings also led to other notable data points not directly related to the simulation, such as Scott sharing that he does not give a letter of accommodations to faculty members in his major.

At the same time, the debriefings were also limited by the structures of students reflecting about a sensitive conversation in a group dynamic and by relying only on their memory of the simulation. I ended each debriefing by reminding participants that I would be contacting them to ask if they would be interested in coming by to watch a video of the simulation and participate in a follow-up interview. Without the presence of peers, and with the benefit of being able to watch the simulation in its entirety, I hoped that the individual follow-up interviews would lead to an even more thorough reflection of participants' experiences than the group debriefings.

Individual Follow-up Interviews

Nine of the 15 participants accepted my invitation to return to the Simulation Center to watch their video and participate in an interview with me. In Table 25, I have listed the participants who did and did not choose to participate in the individual reflection interview. Within the two weeks after the simulation, I sat with each of the nine participants. We watched the video of their simulated meeting with Professor Williams that was recorded by one of the wall-mounted cameras at the Simulation Center. Participants shared aspects of the video that they noticed as they watched. Some participants paused the video occasionally to comment on something they or the actor said. Other times, participants watched the video without stopping it and then shared their reactions. Participants also responded to my questions, including how it felt to participate in the simulation, whether they felt gender, race, and age were influential in the simulation, and if they thought it was overall beneficial to participate in the simulation.

Table 25. *Lists of Participants Who Did and Did Not Participate in an Individual Reflection Interview*

Chose to participate in the individual reflection interview	Arlene; Brian; Elissa; Karen; Kimberly; Mark; Nora; Sam; Scott
Did not respond or declined invitation to participate in individual reflection interview	Allison; Chris; Caroline; Jared; Marissa; Nick

I identified the following 11 themes from the data resulting from the individual follow-up interviews: 1) how it felt to watch the simulation video; 2) the extent to which the simulation resembled a real-life conversation; 3) descriptions of Professor Williams' attitude toward participants' accommodations; 4) Professor Williams' gender/age/race; 5) how it feels to discuss disability and disability-related accommodations; 6) issues of power and authority; 7) prior experiences talking to others about disability; 8) preparation/advice for talking to teachers/professors about accommodations; 9) benefits and lessons learned from participating in the simulation; 10) the potential usefulness of the simulation; and 11) suggestions for modifying the simulation.

How it felt to watch the simulation video. The first question I asked participants after they finished watching the video of their simulated meeting with Professor Williams was to describe how it felt to watch the video. Five participants said that their initial reactions to watching the video was that it was strange. These responses included:

Arlene: It was pretty weird...Even though it was a simulation, I get kind of nervous during those conversations.

Karen: Very cringeworthy [laughing].

Kimberly: Strange...it's hard enough to do when it's in real life. It's kind of strange because I nit-pick, like my posture, this and that. My conversation. My words. It's like, I actually look like this in real life? Wow.

Nora: It was definitely awkward. Weird.

Sam: It was interesting. I don't know, it just feels weird. Every time I watch myself, I feel weird.

In other instances, participants described their initial reaction to the video in positive, or at least neutral terms. Neutral explanations included mentioning that the video of the experience matched what participants remembered from participating in the simulation in the prior week:

Brian: Normal, I guess. It was just reliving what I did last week.

Elissa: Not as bad as I thought. Pretty similar to how I remembered it.

Mark: It's pretty much how I imagined I normally do it... I'm not surprised by what I did, how I explain things.

Scott responded that he was relieved because, "I thought my voice would be really weird and I'd be doing weird things. But it was fine." Nora, who had initially referred to watching the video as "awkward" and "weird", then added that "Overall, I thought it went pretty well. There wasn't really miscommunication between me and the professor. I felt like we were kind of on the same page and agreed on most parts."

The extent to which the simulation resembled a real-life conversation. During the group debriefings directly following the simulations, I asked participants about how realistic they felt the simulation was. In the individual interviews, I again returned to a similar question, asking participants about the extent to which the conversation that participants had just watched resembled a conversation that they might have with a faculty member in real life. I wanted to listen to participants' analysis, after they now had the additional perspective of watching a video of their simulated meeting. Mark was the only participant to respond by stating the simulation resembled a real-life conversation, without any caveats. "It's very similar," Mark said, and then

explained that he said the things that he usually says, such as describing his difficulty with taking notes and the recording device he uses to take notes.

Other participants shared that the simulation was somewhat similar to their real-life experiences, but different in certain aspects. Kimberly described the conversation as an “elongated version of what I do when I talk to teachers after class.” She explained that she usually speaks to faculty members about accommodations directly after class, rather than in their office, and therefore will “condense it, to get my point across.” Conversations about accommodations typically only take a minute, according to Kimberly. Similarly, Scott described the simulation as “pretty real” in terms of the things that he said. However, it was longer than the usual “30-second thing” that he talks to faculty members about after class.

Nora and Elissa also shared that the simulation did not resemble a real-life conversation in the aspects of length and the office location. Nora described that she will sometimes talk to a faculty member in their office, but that it has been “short and sweet,” or “usually it’s just a quick thing after class.” Elissa explained that she “was just surprised how long the conversation was...he talked a lot more than usual.” She added that the conversation is usually no more than three minutes long, compared to the nearly six-minute conversation with Professor Williams. Elissa attributed the length of the conversation to the fact that Professor Williams “wanted to know more and wanted to talk about each of them [accommodations]. And he kind of had feedback about each one.”

Scott and Sam also commented that Professor Williams reacted differently than they were accustomed to. Scott said that he has “never been pressed about my accommodations,” like Professor Williams did, and, “Usually it’s just like ‘okay, do what you want.’” However, Scott then added that he has heard faculty members express a similar concern to Professor Williams’

regarding laptops being a distraction. When I asked him what Professor Williams said that made him feel pressed, he gave the examples of Professor Williams' verbal cues regarding suggestions about where Scott would take his test, and about the benefits of handwriting notes. Sam also had a mixed reaction to how real the conversation was. He said that the simulation showed how he typically interacts with faculty members and that "it just felt natural." Yet, Sam explained that Professor Williams asked more questions than Sam's other faculty members who are usually "just more chill... they are a little more relaxed." Brian explained that the simulation was "not as similar" to past conversations. Like others, Brian shared that Professor Williams talked more than other faculty members about the accommodations, whereas "normal teachers would be like 'oh we can do that, we can do that.'" Brian also added that in his experience, faculty members ask more about his illness and less about the actual accommodations.

Descriptions of Professor Williams' attitude toward participants' accommodations.

As participants described aspects of their interactions with Professor Williams, they sometimes described their interpretation of Professor Williams' attitude regarding their accommodations. In other instances, I asked participants directly to describe Professor Williams' attitude. Participants commonly described Professor Williams' attitude as positive, helpful and accommodating:

Brian: Positive. It seemed like if this was a class, this is going to work out well.

Kimberly: I would say he's very positive about it. He's very accommodating. He's not like "oh you have *accommodations*." He's more like, "oh you have accommodations, let's talk about it."

Mark: Positive. Accommodating.

Sam: Receptive and maybe, empathetic...he tried to get out of you really what you need because he wants to help.

Scott: He's trying to help me. I feel like he had my best interests in the back of his mind. Interestingly, some participants, such as Brian and Scott, described Professor Williams as being positive and supportive despite also discussing conflict with Professor Williams (e.g., Scott feeling "pressed" about his accommodations).

Participants were divided in their interpretations of Professor Williams' tendency to make comments, or suggestions, about their accommodations. Both Kimberly and Mark appeared to interpret Professor Williams' comments as being suggestions intended to help them. Kimberly explained that "It's good that they are voicing their opinions... it could be more of a discussion that way." She further added that she interpreted the suggestion that Kimberly consider taking the test with Professor Williams as "trying to help me." Similarly, Scott said that "I definitely felt like he wanted me to do well...he was saying 'I want you to handwrite it because you retain it better' and he was saying 'I don't want you to miss anything, so take it with me.' I feel like he had my best interests when he was saying that." Mark added that Professor Williams "also suggested things that might help me."

In other instances, participants interpreted Professor Williams' comments as demonstrating negative, or rigid attitudes towards accommodations. Elissa spoke at length about the challenge of interacting with Professor Williams. She said that his way of addressing accommodations was a "catch-22." She explained:

He's really welcoming and wants to help. But at the same time, he seemed like he's set in his ways, that his ways of knowing are better...[He was a professor] speaking from their experience, versus someone who is newer and would be open to you and your differences, to learn off of.

Elissa later elaborated that the challenge of Professor Williams' attitude was that "Because he is so nice, I want to agree with him. But at the same time, I know what's best for me." Elissa reported experiencing a similar attitude before and said that Professor Williams "could have been a (real) professor." Elissa recounted and likened Professor Williams to another faculty member who was similarly "nice", but also "set in his ways" and "did not like computers in class."

Arlene also had mixed feelings when describing Professor Williams. Arlene referred to Professor Williams as sympathetic, but also as somewhat rigid. She explained that Professor Williams was:

...protective of certain aspects of the way she conducts her class. Because I felt like the conversation was at times going well, but then she would say something like 'I don't want you to put this on YouTube' so it was her kind of putting up a wall around certain things...like 'oh we can have a conversation on this but I'm not going to budge in these areas.' So, I felt like how agreeable she was, was qualified to an extent.

Both Elissa and Arlene felt that despite wanting to help, the comments that Professor Williams made were indicative of an underlying unwillingness to be flexible regarding accommodations. Scott also expressed that Professor Williams could have shown a willingness to be more flexible, rather than making specific suggestions about Scott's accommodations. "He could have said 'hey obviously do whatever you want...at the end of the day, do whatever you need.'" Scott explained, "I feel like he could have said it better, in a more supportive way."

Professor Williams' gender/race/age. Having requested certain demographics of actors to portray Professor Williams, I wanted to know whether participants felt that the gender, race or age identities of the actors had any impact on the conversation. None of the four male participants mentioned race or gender as having any impact on the simulation. In fact, three of

the four stated explicitly that race, gender, or age did not have any impact on the simulation. Brian, who met with a female African American actor, responded that these identity categories “had absolutely no impact on the meeting” because faculty members “vary in their age, gender and race.” Sam, who met with a white male actor, said that he “didn’t really think about it” because so many of his faculty member are white males. Mark met with a white female faculty member and responded that these identities had no impact, and that he would not have “acted different or felt different if I knew Professor Williams’ age, gender, or race was different.” Scott met with a white male faculty member and commented on the actor’s age, explaining that “Definitely. I would talk more loosely with a young professor than I would with an older one.” Scott was the only male participant to respond that one of the identities of the actor impacted the conversation.

Each of the five female participants responded that one or more of the actors’ identities influenced their meeting. Two participants—Elissa and Karen—seemed to be waiting to discuss the role of gender in the simulation. When I asked about gender, Karen said that it was “a good topic to bring up,” and Elissa said she was planning to ask me about the gender of the standardized faculty member. Karen met with a white female actor in the simulation. She spoke about being anxious and needing to offer long explanations of her accommodations during the meeting, but that she would have been significantly more anxious had she been meeting with a male faculty member:

I think I would have felt more uncomfortable with a male. I tend to do better talking about things that I consider sort of personal [with a female]. So, yeah I think it would have been substantially more anxiety and more of that explaining sort of behaviors if it

was a middle-aged male or even a younger male professor like yourself...that definitely does play a role.

When discussing gender, Elissa said that the fact that the faculty member in the simulation was a white male made it more difficult for her to speak up and assert her needs:

It might just be me, but if it was a female I feel like I could argue but he seemed pretty adamant in his ways...I feel that had it have been a woman, I just feel like I would have connected better from the beginning. I don't feel like we ever connected. I feel like he bothered me from the beginning because he was set in his ways. And even when he said something in agreement, he had to like preach on it. He wouldn't just listen.

Nora spoke with the same white, male faculty member as Elissa. Nora also shared that she felt she would connect better to a woman and would be better able to open up about how she feels. She explained that "I don't feel as intimidated by women and am more willing to express how I truly feel to someone who is a woman rather than a man. I feel as though I can relate with a woman on a more personal level and that's why it is easier for me to express myself around them."

Arlene was the only participant to mention the racial identity of the actor, and also the only participant to speak about all three identities that I asked about (race, gender and age). Arlene met with a female African American actor. She said that she has "definitely...noticed the gender thing a lot, because a lot of my professors are male." Arlene recalled that throughout the simulation she was thinking in the back of her mind about the demographics of who is more likely to have the same physical health condition as she has. "This is specific to my situation, but women are a lot more likely to get [physical health condition]." She then added that "especially African American women have the highest rate." Arlene explained "that's something that I just

know and it made me wonder, because I always wonder when I am talking to a professor if they have had experience with that disease, or if they have even heard of it.” Finally, when speaking about age, Arlene added that “I’ve noticed younger professors to be more flexible when accommodating.”

Karen, Kimberly, and Elissa also commented about the impact of age when meeting with faculty members. The common idea amongst them was that older faculty members tend to be more rigid, or set in their ways. However, Karen also added that she might feel judged by a younger faculty member because they are “almost a peer.” Karen explained, “I almost felt like her age might have made her have more antiquated views and less open to these sorts of things.” Kimberly noted that the actor in the simulation “is a lot older than me” and that she thought he might be the kind of faculty member who wanted to “control” students’ behavior. Elissa also discussed the role of age, explaining that the age of the faculty member influences how much she will assert herself if there is a disagreement:

If it was a young professor, I would likely push more, but it feels like he has been teaching forever and so in my mind I think he knows what’s best...so I wouldn’t do that [argue]...If someone is younger, I would just be like ‘this is what I need’ and explain my situation more. But he kind of just seemed like ‘I know it all’...I wouldn’t care as much about pushing back [with a younger professor].

Elissa later added that she felt she could assert herself more with a younger faculty member because they “are new at it” and “they get technology more.”

How it felt to discuss disability and disability-related accommodations. A frequent issue that participants spoke about when reflecting on their video was how they felt about discussing a disability and disability-related accommodations with faculty members. In some

instances, participants reflected on the moment in the video when Professor Williams asked them about what their disability meant for them as a student in the course (verbal cue number 3). In other instances, participants shared aspects about how they understand their disability and accommodations when speaking about how they present themselves, or how they talk about different individual accommodations.

Several students said that they were either surprised or confused by Professor Williams asking them about what their disability meant for them as a student in the class. Both Brian and Mark shared that they weren't sure what Professor Williams meant by asking about their disability, and both assumed that Professor Williams was referring to what their accommodations meant for them in the class, rather than their disability. Karen shared that "I didn't quite know how to answer" the question because it was "really open ended" and a "private" question. Scott reported that he was "definitely thrown off" and "not prepared for that" question, so he "kind of had to think on the spot." Arlene explained that she "didn't really know what it was asking. So I just kind of explained what disability I have...I wasn't really sure what she wanted from that question."

Other participants spoke about how they feel about being asked and talking about their disability. Elissa discussed how she sometimes gives "glimpses" of characteristics related to a learning disability, such as saying that she is a slow writer, but she does not typically share details nor reveal any disability label. She expressed that she does not think faculty members need to know about students' disabilities:

I don't think it's any of their business. Like they don't need to know. Maybe I'm blind in one eye. Maybe it's a physical disability and I can't write. Like they don't need to know and they don't need to have any information to make an assumption about my academic

work. [Sometimes people ask] but I'm hesitant to say anything because I don't want anyone to think that I am not smart...and I don't want to be treated differently because I have accommodations, which often, I think, happens.

Elissa reported being strategic about when to discuss accommodations because she is concerned about how she will be perceived. She referred to the opening of the simulation when she took the lead in discussing “only” the accommodations that she felt were relevant to the assignments and structure of the course. Elissa said that she attempts to frame the discussion around a few specific accommodations, in hopes to avoid talking about accommodations that she believes are not relevant for succeeding in a course. “I don't want to emphasize that I get accommodations,” Elissa explained when sharing why she does not discuss “a whole long list of” accommodations. “I don't want him to think of me as someone with a DSO letter, but just a student who might need some additional support,” she continued, “So I only really talk about things that are relevant for that class...I don't want him to associate me with someone who needs all this extra time.”

Because Elissa prefers to only talk about accommodations that she believes will support her success in a given course, she further explained that she wished that the letters from the Disability Services Office could be customized, so “then I can specify it for a class...within the six accommodations that I get, I can choose how many I want printed on an individual letter that I give to a teacher.” Elissa acknowledged that a customizable letter could present a challenge if a student decided to add an accommodation in the middle of a semester. However, she said she would still prefer a letter which a student could tailor for each class, so that way she could “hide” the accommodations that she did not want to show to the faculty member. Elissa explained that hiding some accommodations would be beneficial because having a shorter list might make it

less likely that teachers would question her abilities or, make a “generalization or assumption before they get to know me.”

Elissa further suggested that even participating in conversations about accommodations with faculty members in the first place puts students in a negative position. She explained that beginning a semester by disclosing to a faculty member that a student has a disability and accommodations is not the way a student and faculty member should begin their relationship:

I feel like there is a systematic problem around disability...Because part of the problem with the academic letters is you give them to them [faculty members] before you have any chance to make a relationship with them. So, you are setting yourself up to be like, ‘I have some challenges.’ Whereas basically it’s just I have some differences. And once they get to see my work and know what I am really capable of...but then it lets them judge before they have anything on you.

To Elissa, providing a letter of accommodations to faculty members at the beginning of the semester is likely to lead the faculty member to view her as less capable and to make her feel that she needs to prove herself more than other students. Elissa added that an additional problem with revealing a disability identity is that accommodations single her out. She gave the example of faculty members who have a policy of not using laptops in class. Since Elissa has a laptop, she has heard faculty members make statements such as “there is only one student” who should be using a laptop, which singles her out “when I am the only one who is using a computer.”

Karen also discussed at length how it felt to be asked about her disability and to discuss her disability and accommodations. She said that Professor Williams’ question in the simulation reminded her of a previous interaction with a faculty member, where Karen was asked “why do you have accommodations?” Karen explained that she felt the question was “sort of personal,

like, you can't really ask me that." Karen associated this previous interaction with Professor Williams' question in the simulation. She described how she reacted in the video of her simulation:

I sort of felt myself getting on the defensive and putting my guard up about it...All of a sudden, I felt the need to sort of explain myself. I felt like I was being questioned and maybe not fully believed, like 'tell me why you have these and justify them to me as a professor.' I felt like at least the character that the actor was portraying, I don't know if she feels this way, obviously she was acting, was sort of hesitant about academic accommodations.

For Karen, being asked about what her disability meant for her as a student in the class immediately made her feel that she needed to justify her accommodations to a faculty member who was skeptical or hesitant about accepting the accommodations.

Sam discussed factors he considered in deciding how to discuss his disability and accommodations. Sam shared that he occasionally does not give his letter of accommodations to a faculty member of a course. Sam explained that, "If it's a class where I feel like I don't really need the accommodation, I'll just not tell them anything about it." When I asked Sam how he decides when to disclose his disability to faculty members, he explained that he does not disclose his disability in classes in which most of the assignments are group projects:

So I didn't want to have to tell the professor and then have to tell the group. I don't know, I just felt shy about it. Because if I need an extension on an assignment, almost all the assignments are group assignments. Then I would have to explain to the group that I can't keep up. And I felt like, for this semester, I can keep up with it. I don't need the assignment extensions.

While Sam shared that he did not disclose his disability status because he felt like he would not use an accommodation for long-term assignment extensions in a class with group assignments, he also recalled a previous class involving group work in which he did disclose his disability status to the faculty member. Sam explained that the faculty member told him that Sam “should be keeping up” with the assignments and that Sam should tell his group members about his condition.

When I asked Sam why he felt reluctant to share his disability identity with his group members, he explained that he feels a stigma about his mental health condition.

I don't know if it's just because it's a mental illness, or what. But I still feel a stigma...It's just I feel like I can do anything that anyone else can do, without any setbacks, but it's just sometimes...there's cases where if I can't handle it, I can't do what other people can do. But I feel like if I am on top of it and I'm taking care of myself, then I should be able to do the assignments that other people are doing. I don't need to have extensions.

In addition to feeling a stigma regarding sharing his mental health condition with classmates, Sam also shared that he is unsure about whether to disclose his specific mental health condition when meeting with faculty members to discuss accommodations. In the simulation, he did disclose his specific mental health condition, but he sometimes does not. “I always debate with myself if I should disclose [the specific condition] or not,” Sam explained, “But if all things were equal, I wouldn't disclose it to anybody...I prefer that people don't know.”

There were two instances in Sam's conversation with Professor Williams in which he told Professor Williams that he would try his best to not use the accommodation for long-term extensions on assignments. After watching the simulation video, Sam explained he commonly

makes these comments because “I don’t want the professor to think that I’m slacking or that I can’t perform as well as other students or think that it’s a free pass or something.” He added that he wants the faculty member to know that the accommodation for long-term extensions is “just in case something happens” because his condition only affects him sporadically and he may “go a year or two without ever having to deal with anything wrong,” such as difficulty sleeping. Sam also expressed that he wants the faculty member to understand that his condition is different from other types of disabilities, a “different kind of disability.” Sam explained that when he thinks about disability, “I think about someone in a wheelchair or is blind. They really need something to help them. But for me it’s kind of invisible. You can’t tell by looking at me that I have a condition.”

Sam also shared that his approach to talking about his accommodations depends on how the faculty member might perceive the specific accommodation. He expressed that he is not too concerned about sharing his accommodation for extended time on tests. “When I ask for test modifications,” Sam explained, “I feel like, okay, time and a half.” However, when Sam shares his accommodation for modified assignment deadlines, he said he feels “a little guilty that I have to ask for an extension of a deadline. I don’t know why, I just feel that way. I just feel like I have to explain myself so that I don’t feel as bad about myself.” By explaining why he may need extended deadlines, Sam hopes that faculty members will “know that this is why I need modifications...then maybe they better understand me, or better empathize with me, than if I am just saying ‘I need medications.’” Sam acknowledged that in explaining the rationale for having the accommodation of long-term extensions on assignments, he is sometimes “defensive about it.” Letting faculty members know that he can “keep up” as long as he is healthy, is one way Sam felt he can more comfortably talk about the accommodation.

Like Sam, Scott also shared that he has a stigma around his disability identity and that he considers what faculty members might think about him from revealing a disability identity. Scott did not share his disability label in the simulation and explained, “I try not to. Especially with ADHD, I think it comes with a very negative stigma. So, I don’t feel the need to do it.” When discussing Professor Williams’ question about what Scott’s disability means for him as a student in the class, Scott recalled, “I was thinking, I know how it really affects me but I can’t really explain everything because the faculty member does not have ADD and he wouldn’t really understand everything.” Scott then explained his response to Professor Williams in the simulation, when he said that the disability did not mean much and that Professor Williams could expect him to be hardworking, just like other students:

I feel as if a kid comes to a professor and has something that is different from the normal, they are automatically going to think...they are a little bit less...So by me saying I am still going to work really hard, I think that sends a message to them...I think it’s a way to counterbalance, ok I have accommodations but...I don’t have double time just so I can sit there for longer than other kids. I am going to work hard and I need this accommodation.

For Scott, telling Professor Williams that he is going to work hard was an attempt to manage how Professor Williams might perceive him, and to “counterbalance” any prejudice Professor Williams might have towards students who receive accommodations.

Other participants shared that they are, to varying extents, more comfortable with talking about their disability and disability-related accommodations. Brian shared that he typically uses the terms “condition” and “illness” to describe his physical health-related illness, as he did when talking to Professor Williams. Brian shared that sometimes he is asked about his condition directly, such as a faculty member asking, “Do you mind if I ask you what you have?” Brian

responded that he is comfortable with and accustomed to describing his needs related to his condition. Mark identified with dyslexia and explained that he is also “open about it” when talking about his dyslexia. However, he reported that faculty members don’t typically ask about his disability. “I think they just want to know what accommodations you need...I assume that people don’t necessarily care,” Mark explained, and continued, “They have other students. They want to know what I need and if they can do it, they will do it.”

Arlene also expressed that she is comfortable talking about her physical health condition to faculty members. She shared that one reason why she might be open about discussing accommodations is because faculty members are more sympathetic to her physical health condition:

I feel like I get a sympathy from professors when I talk to them...professors will say ‘oh that sounds really hard, I’m impressed that you have stayed in school’ or ‘that you have come back to grad school’ and I wonder...something that I have been thinking a lot since the simulation, if professors respond differently when you have a physical [condition].

One reason Arlene said that she has been thinking about the level of sympathy that faculty members give to students is because her condition differs from her sister, who also receives accommodations. “My sister has ADHD,” Arlene explained, “and she’s had a lot of trouble talking to professors about that and she has dyslexia too, but when I say I have [physical health condition] professors are kind of like...‘I’ll take this seriously.’” Arlene added that she didn’t think students should be perceived differently based on their disability identity. “I mean I think that everyone has these accommodations for a reason,” she explained.

Issues of power and authority. Participants frequently referred to the power dynamic between them and Professor Williams, especially how the authority Professor Williams held as a

faculty member influenced what they chose to say or not say during the conversation. For example, Scott and Brian recalled how they initially reacted to the comment that some students prefer to complete tests with Professor Williams, so that Professor Williams could answer questions about the test. Scott said that he wanted to say, “well you should make sure your exams are right,” but instead he did not say anything. Brian also said that he did not appreciate this comment because it implied he would be missing information when he takes the test in the Disability Services Office. Brian felt like stopping Professor Williams and saying “wait, what?”, but he said “I’m not going to say that to a teacher” because it could be interpreted as rude. Mark recounted the moment in his simulation in which Professor Williams pointed out that the accommodation for advance access to PowerPoint slides was not on his letter. Mark said he wanted to tell Professor Williams why that accommodation was important to him, but he felt he “wasn’t going to fight it for no reason.” Mark clarified that he did not realize that this accommodation was not on his accommodation letter, and that he thought it was because a previous faculty member had proactively suggested sending PowerPoint slides to him ahead of time.

Elissa and Arlene both spoke at length about feeling that they did not assert the ways that they wanted to use their accommodations in their conversation with Professor Williams. Arlene explained that she was more agreeable with Professor Williams than she would have preferred:

I don’t want to be too hard on myself, but I found it a little bit almost pathetic that I was so agreeable. I remember leaving and being kind of unsure as to what accommodations I was given. Because it felt like more of a discussion rather than me announcing what these accommodations were...[I was] confused about what my actual accommodations were

that I could use and what kind of agreement we had reached...because I kind of like backed down from things.

Arlene felt that she was debating her accommodations and that she did not perceive concrete decisions had been made in the meeting regarding using her accommodations. Arlene cited an example in which she did not assert her right to use her accommodation, when she told Professor Williams that she could complete tests at the Disability Services Office or during office hours, “whatever is easiest” for Professor Williams. “I think it’s a little bit weird that I chose to say that, upon reflection,” Arlene said, “because technically I should be able to take it at the DSO office if I want to, you know?”

Arlene shared that ambiguity of the conversation and that not asserting how she wanted to use her accommodations was a result of the power dynamic between Professor Williams and her:

There is an inherent power difference there. I mean, they are the professor. They are an authority figure. So even though I consider DSO accommodations to be things that are granted to you, you know, they are rights, essentially, it’s an awkward situation where you are coming to a position who is an authority figure and saying that these are rights that you have to give me.

Arlene then referred to when Professor Williams said that she had students who received accommodations in her class in the past and that she didn’t think Arlene “will have any problem” in the class. Arlene said that she has often interpreted similar statements as aimed at alleviating any worry or anxiety. Upon reflection, however, she felt that coming from a faculty member, this statement carried a certain authoritative connotation that could be interpreted as “you *shouldn’t* have a problem in this class.” “I think that has the unintended consequence” Arlene explained,

such as making her question whether she would feel comfortable “to bring up a future problem in the class.” To Arlene, Professor Williams’ statement implied that “no one else has had a problem” before and that, as a student, “you don’t want to be the first person to have a problem.”

Elissa also shared that she did not assert herself as much as she had liked to, though she attributed this to what she perceived as the dominant personality of Professor Williams (portrayed by a white male actor, as opposed to the African American female actor who spoke to Arlene). Elissa discussed the moment in her conversation with Professor Williams in which she said that she would handwrite, rather than type some of her notes, in response to Professor Williams’ concern that laptops can sometimes be a distraction. She spoke about not asserting her need to type because Professor Williams “had showed that he didn’t like people to use their computer in his class.” Elissa explained that “in reality, I would prefer to type all the time. But because he was so strongly...that he didn’t want me to use a computer, I was afraid to ask for myself, even though it’s on the letter. So I said I would try.”

Elissa then continued by elaborating on how the dynamic with Professor Williams influenced her agreeing to handwrite notes, and how she felt about Professor Williams’ attitude toward the accommodation to use a computer for typing notes. She explained:

I felt like I couldn’t ask for it [using her computer in class]. I kind of agreed because I didn’t want to fight with a professor. So, I figured I might as well try it the way he wants it and then go forward. But I feel like because it’s on my accommodations letter, he is supposed to be like ‘well if you need it, go ahead and use it’ and really support my needs, based on my letter, because he legally has to. But he was still so distant on it that I was like, I need to compromise, because I felt scared.

Despite knowing that she is legally entitled to use her accommodations, Elissa felt too intimidated to assert her need to use a computer for notetaking. When I asked her if she felt that she agreed to something that she really didn't want to do, Elissa responded "100 percent. And I feel like I do that a lot." Elissa added that she "doesn't like conflict" and did not even bother to bring up using a recording device for lectures because Professor Williams "kind of scared me away from even saying 'let's give it a try'" after Professor Williams expressed a concern about intellectual property.

Elissa further explained that because she did not assert her need to use a computer in class, her accommodation for having advance access to PowerPoints would not be useful. She explained that while she did ask Professor Williams to e-mail her the PowerPoint slides before class, the purpose of this was for her to have them on her computer screen so she can take notes directly on the slides. If she was not using the computer for taking notes, then her accommodation for advance access to PowerPoint slides was not useful for her. Despite describing that having the PowerPoint slides on her computer in class was her "most important" accommodation, Elissa said that she did not bring up the issue because "I didn't want to start the semester off with a professor on a bad note."

Elissa then added one more example in which she felt Professor Williams' authority might influence how she would use an accommodation. During the simulation, Elissa stated that she preferred to complete tests with extra time in class, with Professor Williams. She confirmed in the interview that this is her typical preference. However, Elissa reflected that if she was a student who preferred to complete tests at the Disability Services Office, she felt that she still would have agreed to complete tests with Professor Williams because he "harped on" his rationale for why students have preferred to complete tests with him. Furthermore, because

Professor Williams was “adamant” about his preference, Elissa said it would be uncomfortable for her to change her mind later in the semester. “Let’s say I have a struggle doing it in the class the first time. Now I am going to be afraid to say that it didn’t really work for me this time and I want to go to DSO next time,” Elissa explained.

Karen spoke at length about feeling that she needed to appease Professor Williams by offering a detailed explanation of her accommodations. As she watched her video, she noted that she was nervous when talking and would not let Professor Williams “get a word in” as she explained the accommodation for long-term extensions on assignments. Karen explained that her tendency to offer a lengthy explanation that would address any potential concerns about the accommodation was related to her anxiety about being discriminated against and about the image faculty members have of her:

I feel that sometimes professors might subconsciously sort of have these underlying thoughts about students with disabilities or that have DSO accommodations, and that can affect how well that student does in their course. And again, I don’t think it’s a purposeful discrimination. I think that it might just be like underlying, preexisting notions, that come into play later on...I want to make sure that, again, that they have this image of me as a hardworking student that’s not just going to take advantage of any accommodations...I’m very worried that they are going to perceive me as like a slacker student or somebody that doesn’t try hard enough...I am hardworking and smart and intelligent, but like presenting this letter is going to negate all of that. So I find the need to get on their good side. It’s a lot of my own personal anxiety.

With concern over how she would be perceived or treated by a faculty member who has control over her course grade, Karen prefaced the discussion of the accommodation and provided lengthy explanations to Professor Williams' questions.

Scott discussed two contrasting responses he gave to Professor Williams, one in which he seemed to assert the way he wanted to use his accommodation, and the other in which he said he was being deliberately agreeable. In the first instance, he definitively told Professor Williams that he wanted to take tests at the Disability Services Office, while in another instance he said he would be willing to "do both" regarding handwriting and typing notes, despite not wanting to handwrite notes. Scott acknowledged that "It's interesting" that he directly stated his preference in the first instance (testing location) but compromised in the second instance (notetaking). Scott added that "I think that is how I would actually react with a real professor. I think I would react the same way."

Scott then elaborated that the interaction with Professor Williams was indicative of how he tries to balance the authority of the faculty member with his own needs. Scott explained that he is willing to assert his needs, as he did when discussing the testing accommodation. However, he also shared that when he said he would be willing to handwrite some of his notes, he did so because he was trying to manage his relationship with Professor Williams by showing respect for an authority figure who was offering him advice:

I was kind of trying to say, 'thank you and I'm going to use your advice.' I didn't want to say I'm not going to use your advice and I probably wouldn't use his advice...I guess in my mind I was thinking I can do both. The first one I couldn't do double time and be in class. But this one I can type and write. So, I was kind of like 'yeah I'll do both. Thanks for your help'...That way I am not saying that 'I'm not going to use your advice, I don't

care what you're saying.' I'm going to say I'm using your advice, but I'm also going to do what works for me...That way he thinks I'm listening and that I value his opinion.

Despite having no intention to handwrite his notes, Scott responded in a way that was desirably intended to make Professor Williams believe that Scott valued, and would apply, his advice.

Scott further explained that “you have to pick your battles” when deciding whether to assert his preference about using an accommodation, or when he will try to accommodate a faculty member’s preference. “You have to keep your relationship with the teacher in mind” and “keep in mind being respectful” when discussing accommodations, Scott explained.

A few participants discussed whether they would, hypothetically, assert their needs to a faculty member if they felt it was necessary. When reflecting on Professor Williams’ comment that some students prefer to take tests with her, instead of at the Disability Services Office, Brian explained that he was fine with taking the test in the class, but he would feel comfortable speaking up if he wanted to take the test at the Disability Services Office. “If it was an issue with me,” Brian explained, “I would speak up and say, ‘you know what, I do a lot better taking it at DSO. Is there any way we can figure out how to negate the fact that I’m missing questions?’” Like Brian, Mark did not offer a response to Professor Williams’ comment about the location of taking tests during the actual simulation. Mark explained that he was “open” to the option of completing a test with a professor but he believed he would assert where he would want to complete the test if he developed a strong preference. “If I feel that I need to take the test in DSO,” he explained “even if the teacher doesn’t necessarily want me to or recommends taking it in the class, I still have final say...to say, ‘no I want to take it at DSO.’”

Nora said she would feel comfortable telling a faculty member that she wanted to take a test at the Disability Services Office if she changed her mind, because “that should be my right to

take it where I want to if I have that accommodation.” However, Nora said that she would not proactively suggest that she wanted to take a test in a faculty member’s office hours because that is not what she was “granted” in her accommodations. Kimberly also said she would not express a preference to take a test in a faculty member’s office hours, because she “wouldn’t want to be infringing on their space” or “to be too imposing” by requesting a faculty member be at “two separate testing sessions” (in the classroom and in their office). In contrast to other participants, Kimberly and Nora offered more positive descriptions of compromising with Professor Williams about their accommodations. “I was very compromising,” Kimberly said, “Not in a bad way. I wasn’t like, ‘this is what I have been given, I want to do it my way.’ I was very flexible, and I could work with the professor.” Nora also shared that reaching an agreement was a positive aspect of the conversation. “A lot of the parts I agreed with him,” she noted, “which kind of created that positive relationship between us.”

Prior experiences talking to others about disability. One of the questions I asked participants was whether they have ever discussed their disability or accommodations with other peers who also identify with disabilities, either in person or virtually. I was curious whether the group debriefing was the first time participants had discussed accommodations with other students who receive accommodations. Six of the nine interview participants—Arlene, Karen, Kimberly, Mark, Nora, and Sam—said that this was the first time that they discussed disability and accommodations with other students. Kimberly elaborated that “I have friends who have accommodations, but we never really talked about it.” Arlene shared that sometimes she will tell a friend about her accommodation when they notice that she was not in the classroom to take a test, but she has “never spoken to anyone else who said ‘yeah me too’ about accommodation stuff.”

Arlene also shared mixed feelings about talking to other students who receive accommodations in the group debriefing. She said “it was kind of nice” and a “unique experience,” but also that she is reluctant to identify with disability:

...just coming to terms with the whole idea of having a disability status is really hard for me and I was unclear for so long as to whether or not it qualifies as a disability or what even a disability means. And so it was interesting [the debriefing] but...for whatever weird emotional reasons, I don't like to talk about having a disability specifically.

Arlene appeared to appreciate the chance to exchange ideas with other students about accommodations, but she felt apprehensive about discussing the idea of disability, since she does not share this identity as much as other students might.

The other three participants—Brian, Elissa, and Scott—shared that they did have experience talking to peers who also receive accommodations. Brian explained that he attended a three-week program during his freshman year of high school “with tons of kids, some students who weren't even attending high school, because they couldn't [due to their health conditions].” Brian recalled that he talked with other teenagers at the program about “how to handle school” and about accommodations. Scott shared that his brothers have accommodations, and he also talked to friends in high school about accommodations, such as discussing what accommodations they have. Elissa explained that she talks with other students at the Disability Services Office before tests and that she also talked with other students at the “learning center” in her high school. Elissa was the only participant to report that since coming to Eastern University, she has talked about accommodations with other students who receive accommodations.

Preparation/advice for talking to teachers/faculty members about accommodations.

I also asked students if they have ever received advice from anyone about how to talk to teachers

(i.e., prior to college) or faculty members about their accommodations. Elissa, Kimberly, and Nora did not report receiving any advice about how to talk about accommodations. Other participants responded to this question by referring to advice they have or have not received from staff at the Disability Services Office:

Arlene: When I met with the DSO counselor, she said I had a choice of whether or not to reveal why I have a disability status, but I always decided to reveal it...And they asked if I had questions, I just didn't take them up on it.

Sam: We are not really trained on how we should present it [the letter]...at least for me, I'm not really given much advice, or I'm not really warned that I might get pushback, or I might feel uncomfortable

Scott: The only thing I was told is that you need to talk to professors about accommodations.

Karen also referred to the Disability Services Office, explaining that she was “never really coached” about how to talk to faculty members. However, she added that her counselor explained the process of completing the agreement with faculty members for long-term extensions, and that Karen refers to that process as the structure for discussing accommodations with faculty members.

Other participants discussed learning how to talk to faculty members based on advice about talking to teachers prior to attending the university. Brian explained that “I have gathered from doctors” how to explain to teachers about his condition and need for accommodations. He also referred again to the three-week program where he learned from other high school students and adults about how to talk about accommodations. Mark discussed how he became accustomed to talking to teachers in high school about his accommodations. He recalled attending a meeting

with teachers in 7th grade when he was first diagnosed with dyslexia and auditory processing. At the meeting, Mark said that they discussed “having extended time and using a laptop for typing essays and to talk about having extended time with teachers.”

Benefits and lessons learned from participating in the simulation. One of the final topics I discussed with participants was whether they felt they benefited and learned anything that they might apply in the future, after participating in the simulation, talking with peers in the debriefing, and watching their simulation video. Four participants spoke about watching their video as being beneficial to them, in that it provided a different perspective, or opportunity to stop and notice aspects of how they communicate:

Karen: [watching the video] did give me some insight. I knew I tend to ramble and explain and overexplain and get on the defense, but it showed me how much more than I even knew I did...I'm so wrapped up in the emotion during the actual thing, that I'm not even able to take a step back and realize that I'm doing it...you are definitely able to see it, watching it over.

Kimberly: I know now how it looks on their end...I now know to best present myself.

Mark: I think it was interesting to see how I talk about my disabilities and like, I'm not surprised how I talk about them, but I'm seeing them from a different perspective.

Scott: I never really looked back at how my talks with professors went...It's kind of nice to see how I talk to professors, from like posture, to being respectful. And it was cool to see when I didn't really know how to respond, it was interesting to see that you could see my breaks. I would say 'um' and then something. So it was cool to see that. I could literally see what was going on in my brain.

For participants, watching their video gave them an opportunity that they do not typically have, to stop and reflect on a conversation with a faculty member about accommodations.

Six participants shared how participating in the simulation and watching their video helped them recognize aspects of how they discuss accommodations that they would like to change. Kimberly explained, “Now I know to be a little bit more upfront and say ‘okay this is my accommodation’ and lay it out for them.” Mark noted that in the future, “I definitely think I can explain the smart pen better,” since he realized in the simulation the way he explains how this recording device works was “very complicated.” Scott shared that he was pleased that he was “polite” and responded well during uncomfortable moments in the conversation, but that he would think about acknowledging possible concerns from faculty members before they are brought up. He gave an example, “When talking about my computer, I may start off right away saying, ‘I know it can be a distraction. I’m going to make sure it’s not.’” Nora shared that in the future she would plan to be more familiar with her accommodations, “so I wouldn’t have to look down at the sheet [letter of accommodations]” as she did during her conversation in the simulation. Arlene explained that participating in the simulation and watching the video encouraged her to reflect and realize that “I should come forward in a more firm position in these [conversations].”

Kimberly and Elissa reported that they felt more confident and prepared to express themselves to a faculty member. Kimberly expressed that she now felt “more like 90 percent” confident and prepared to talk to a faculty member, instead of 75 percent previously. Elissa shared that she learned “that I really need to stand up” and assert how she intends to use an accommodation. “I gave in there when I know I need a computer,” Elissa said, referring to how she agreed to handwrite some of her notes after Professor Williams expressed concern about

laptops being a distraction. Elissa then suggested that in the future she would talk to her counselor about her previous evaluation of having a learning disability so that she could “talk about the reasons behind each of my accommodations” and to let the faculty member know that “I have a DSO letter for a reason.”

Nora and Karen shared how they better understood how they would like to express their emotions, or present their personality, in future conversations with faculty members. Nora expressed that she would like to change her tone when speaking to faculty members, “to be a little more enthusiastic, to make a better first impression on the professor.” Karen described how reflecting on the simulations helped her to realize that she can slow down and start “attuning to the emotions,” of the conversation, such as “what I’m feeling when I’m talking about these things.” Through watching the video she noticed “those sort of nervous, anxious, get ready to launch into your explanation, moments” as she explained her accommodation for long-term extensions on assignments. In the future, Karen said she is “going to try to take more of a step back and relaxed approach and let them ask me the questions before I start feeling the need to explain everything.” By talking less and allowing faculty members to ask questions, Karen thought “that will allow for more open lines of communication.”

Sam and Brian were the only two interview participants to share that they did not feel they benefited from the experience of the simulation and subsequent reflections. Sam explained that after participating, he didn’t “think that my interaction will be much different in the future.” However, Sam did acknowledge that after participating and watching the video, he was aware that he disclosed his specific mental health condition. Sam wondered if it was really necessary to tell faculty members about his specific condition. “Maybe for in the future, maybe next semester,” he said, “I’ll be more conscious that I don’t have to tell them what my health

condition is. I'll just tell them about the accommodations.” Brian also expressed that he didn't think he particularly benefited from the simulation because he already feels “prepared for pretty much any question.” However, he also noted that watching the video of the simulation showed him that he “could receive a wide range of questions from a teacher.”

The potential usefulness of the simulation. In the final part of the reflection interview, I asked participants questions designed to elicit their evaluation of the simulation. One question I asked students was whether they thought that participating in the simulation would be a useful exercise for other students as a way of practicing conversations with faculty members. Some participants shared that they felt the simulation would be useful for students who were nervous or who were not accustomed to talking about accommodations:

Mark: I would say it's beneficial. Especially if you are not used to talking about it. It's a good way that you can practice.

Nora: I felt like it was really realistic of what actually could happen...it could be used as a tool for helping students who are nervous about approaching their professors. Give them a little practice with that.

Scott: I think it would be great because I think a lot of kids may be nervous to go talk to professors.

Other participants spoke about how the simulation could be useful in helping other students to analyze their approach to discussing their accommodations. Brian said that watching a video of a student's simulation could allow them to “see how they talk and then go back and say ‘yeah I didn't want to say that’ or ‘I should have said that here.’” Similarly, Arlene shared that participating in the simulation could help a student reflect and “think a lot about how I would approach a professor and things that I would change.” Scott also expressed that the simulation

could help students to practice talking about their accommodations and “know what your accommodations are and know what you want before you walk in there.”

Kimberly emphasized that the simulation would be useful for new students who might not know what to say or how a faculty member would react. “When I was a freshman, I didn’t know what to do. It would be nice to have this,” she explained. Kimberly suggested that the simulation could be optional for new students and done casually, “like one of the staff over there [at DSO] are pretending to be a professor. Give them at least a little more of a preparation.” Elissa suggested that videos of the simulation could be shown to new students who register at the Disability Services Office, as a way to show different approaches to discussing accommodations. “Just watching it might help because...you are unsure what usually happens. What does a professor usually say?” Elissa felt that watching videos could help model different approaches and could accompany participating in an actual simulation.

Sam initially responded that he did not feel the simulation would be useful for other students to practice. “I don’t think so,” he said, when speaking about whether the simulation might “improve my performance interacting.” Sam also added that the simulation would be time consuming to do for a large group of students, and that it is hard to simulate the conversations in a useful way because “each professor and each class may not be the same. So like one rehearsal of this would not be that helpful.” However, Sam then added that he thought that participating in the simulation before students actually experience talking to a faculty member could raise students’ awareness about how they talk about their accommodations. For example, Sam mentioned that watching the video could help students think about whether they want to disclose their specific disability, or whether they are talking in way that shows that they have to justify their accommodations. Brian also mentioned that the simulation could be useful for practice, but

that the benefit would likely be marginal because participating in a simulation would not change how comfortable a student is about talking to a faculty member.

Suggestions to change the simulation. Finally, I asked students to share any changes that they would make to the simulation to improve the experience of participating or make it a more valuable experience. Participants offered the following suggestions for improving the simulation:

- Create a mock syllabus that includes the professors' course policies and assignments, so that students can refer to it during the simulated meeting, as they might in a real-life meeting (Elissa)
- More clearly communicating or emphasizing what course the student is enrolled in and discussing with the professor (Mark)
- Create an opportunity for the student and professor to have some sort of contact prior to the simulated meeting as they would likely have seen each other in class in real life (Sam)
- Develop a simulation for professors that would make them better informed about how to talk to students with disabilities (Sam)
- Do not have a doctor's examining table in the simulation room, which is likely to remind students of talking about medical issues (Brian)
- Write a script for the actor that allows the students to lead the conversation more, rather than the actor making frequent comments or asking questions (Scott)
- Design the debriefing in a way that allows participants to share while still protecting their disability identity (Arlene)

- Conduct the simulation as a program within the Disability Services Office, so that students are more comfortable (Karen)

I followed up on Karen's suggestion by asking her about the discomfort Karen felt regarding the simulation. I explained that I was uncomfortable with the idea of asking students to participate in an experience that provokes anxiety (Karen had previously expressed that she felt anxious during the simulation). Karen responded:

I don't feel like I was subjected to anything like so traumatizing, or anything. Because I do this all the time. It just was a little bit more anxiety producing because I knew it was a simulation and it was recorded and all of that. But I wouldn't view it as something that was more negative than positive...it was like a neutral experience.

Overall, participants' suggestions addressed several aspects of the simulation, including planning the simulation (e.g., selecting an appropriate setting, writing a script and student introduction), debriefing the simulation, and considering the use of the simulation (i.e., for faculty members, rather than students).

Conclusion

In this chapter, I have reported the results of 15 university students who have been identified as having a disability (SID) participating in a single simulated meeting with a standardized faculty member named Professor Alan/Alicia Williams. In the first half of the chapter, I reported what participants said during the simulation. I used the verbal cues that I trained the standardized faculty members to communicate as a structure for reporting these results, while also including other participant data points that were not necessarily in response to, or directly related to these verbal cues. In the second half of the chapter, I reported themes that emerged from five group debriefings of the simulations, and nine individual reflection

interviews. The purposes of reporting the results in this chapter were to show patterns and variations in the way students engaged in conversations with a standardized faculty member when discussing accommodations (research question # 1) and to show the varied meanings and interpretations that participants conveyed when reflecting on participating in the simulation (research question # 2). In the next and concluding chapter of this study, I describe the significance of these results in relation to existing literature and suggest implications for practice and future research.

Chapter Six:

Conclusion

When I was a high school Special Education teacher, I taught several students identified as having a disability (SID) who had been admitted to colleges and universities for the following fall. At the annual meeting to discuss the Individualized Education Program for Desiree, one of my students, Desiree's parent expressed concern about the transition from high school to college. Desiree's parent was particularly concerned about whether Desiree would seek out the support she needed, now that she would not have the structured supports provided in high school. One suggestion I made to the parent and student was that we could do a role play activity to help Desiree practice advocating for supports, such as classroom accommodations similar to the accommodations that she was currently provided in high school. I explained that I would play the role of a college professor, sitting in his office, and Desiree would play the role of a first-year college student who was coming to discuss their accommodations. Both Desiree and her parent agreed that this could be a helpful activity to help prepare for Desiree's transition to college.

A few weeks later, we prepared to do the role play. To try to make the activity more authentic, I provided Desiree with an adapted version of a letter outlining accommodations that I was granted as an undergraduate student. I also provided Desiree with an example syllabus from a course I took during my first year of college. I suggested that Desiree look over the letter of accommodations and the syllabus and begin to think about: 1) how she would introduce herself to a professor; what, if anything, she would say about her disability identity; and what she would say about her accommodations in light of the assignments and course policies that she read in the course syllabus. My effort to create authenticity in our conversation about accommodations quickly fell apart when we sat down and began roleplaying. Desiree hadn't finished introducing

herself before she started to giggle and said, “Wait, can we start over?” We started again. This time I phrased a question awkwardly and the student smirked with the same expression she always used when I made a mistake in front of the class. I started to giggle and asked if we could start over.

In developing this study, I attempted to create a more authentic version of the student-professor role play that Desiree and I did in high school. I wanted to provide university students who have been identified as having a disability (SID) with the opportunity to practice a conversation that research, and my own personal experience as a SID, have demonstrated to be a difficult conversation on many levels. I also wanted to build on the existing surveys and interview-based research about interactions between SID and faculty members by using a simulated meeting to gain an understanding of how students communicate with faculty members, in the moment, when discussing disability-related accommodations. With the belief that SID are best positioned to speak about these conversations with faculty members, I partnered with current SID through a focus group and asked them to help me craft the protocols that would direct the simulations in which other students would participate. I then asked the SID participating in the simulation to teach me, as the researcher, about how they talk about accommodations with faculty members, and especially, to shed light on the encounter they had with Professor Williams in the simulation. Finally, I tried to position SID in an evaluative role in which they suggested whether the simulation was beneficial to them, whether it could be beneficial to other SID, and what they would change about the simulation to make it more meaningful and beneficial.

The results of this study provided insight into the two research questions I asked when developing this study – how university students identified as having a disability engage in and

reflect upon a discussion about disability-related accommodations with a standardized faculty member. The 15 simulation videos demonstrated different approaches students use to discuss accommodations, including how they frame the role of accommodations in their participation in a university course. The simulation videos also provided glimpses of how students respond to a standardized faculty member's concern about an accommodation, with male participants tending to assert their preferences more directly than female participants.

The group debriefing and individual follow-up interviews allowed participants to reflect on the simulation, explaining how they felt about the discussion and explaining the rationale for how they communicated with a standardized faculty member. As the nine participants who returned for follow-up interviews watched the simulation videos, they provided particularly insightful explanations of how they advocate for their needs and preferences. The data from these reflective interviews illustrated an array of tactics that participants used to manage their identity, while advocating for their needs, with careful consideration of issues such as power, authority, and gender, within the context of a student-faculty member relationship. Perhaps most importantly for considering the significance of the results, most participants indicated that the way they talked about accommodations in the simulation was indicative of how they discuss accommodations in real life, despite also identifying aspects of the simulation as feeling inauthentic.

In this concluding chapter, I discuss these results further by considering literature that I introduced in Chapters One and Two. I first discuss the results in light of existing research about postsecondary students who seek disability-related accommodations. In this section, I highlight the implications of this study in relation to research about encounters between SID and faculty members within the sociocultural context of postsecondary education. I then discuss the results

of the study with consideration for existing research about self-advocacy. In this section, I return to the grounded theory framework of my data analysis to discuss how the themes that emerged from the reflection interviews of the simulation challenge and expand existing theories of what it means to self-advocate. I then return to the methodology of this study – the clinical simulation. I discuss the results of this study in relation to existing research about the use of simulations, and the ways in which the results both reinforce existing literature about the use of simulations and also how this study suggests ways to expand the use of simulations. After discussing the significance of the study in relation to existing findings, I share implications of this study for practice and future research. Finally, I discuss several limitations of this study. I include in this section a discussion of problems within the design and implementation of the simulation used in this study, and the need to make changes to improve the simulation for future use.

“Is that okay with you?”: The Importance of Social Identities and Authority in Conversations between Students and Faculty Members

The context in which I examined how students discuss disability-related accommodations was a university whose processes are generally indicative of the biomedical approach to disability that is common in the United States and Canada (Hutcheon & Wolbring, 2012). Disability is treated as an individual problem of a minority of students and the institution’s response is to provide accommodations that are intended to level the playing field on a case-by-case basis. A notable departure from a purely biomedical approach to disability is that the staff members from the Disability Services Office emphasized that they value students’ self-reporting of needs over medical/educational documentation of a disability label. Nevertheless, each of the students who participated in this study had their disability status previously verified by Eastern University’s Disability Services Office prior to receiving a letter of accommodation. Each

participant, therefore, took on the identity of being a student who has a disability, despite some students not identifying with the term *disability*. As is common in U.S. postsecondary education, the students identified as having a disability (SID) in this study are expected to communicate with faculty members about their accommodations by delivering their accommodations letter, either electronically or through an in-person conversation (Cole & Cawthon, 2015). Consistent with other previous studies, there was overlap between many of the accommodations that students in this study received (Orr & Hammig, 2009) and the most common accommodations were extended time on tests (Becker & Palladino, 2016).

The findings of this study reinforce and build upon existing research about the importance of social identities for students identified as having a disability (SID), and how SID manage these identities when disclosing their eligibility to use disability-related accommodations. First, consistent with past research (e.g., Albanesi & Nusbaum, 2017; Denhart, 2008) participants in this study conveyed a sense of stigma related to seeking disability-related accommodations. Participants related feelings of stigma to several factors. One factor that participants reported as influencing feelings of stigma was their specific disability identity. For example, Elissa (learning disability), Sam (mental health condition), Scott (ADHD) expressed feeling reluctant to reveal their disability identity because of how they would be judged. In contrast, Kimberly demonstrated her openness to talk about her hearing impairment, and Arlene shared that she was comfortable telling Professor Williams about her specific physical health condition because she feels there is less stigma associated with the condition. These findings are not surprising, given that postsecondary students report high levels of stigma related to invisible disabilities, especially in the category of mental disorders (Corrigan et al., 2016).

However, the stigma participants experienced appears to relate more often to feelings of seeking differential treatment, rather than their specific disability identity. Similarly to the students in Denhart's (2008) and Marshak et al.'s (2010) studies, participants expressed concern about being treated differently by faculty members, or that the faculty members might have lower expectations of their abilities because they are seeking to use accommodations. Participants specifically expressed concern about being perceived as less capable than other students (Elissa), as a "slacker" (Karen), and "slower than everyone else" (Scott). Scott revealed that he neither discloses his disability status nor requests accommodation from faculty members in any of his major classes because of his concern that it would harm his future job opportunities when faculty members that have professional connections think that he is less capable.

The prominent role that stigma had in the meetings between SID and a standardized faculty member is further exemplified through the various ways that participants framed themselves and their accommodations. Goffman (1963) described how individuals who have stigmatized identities make deliberate attempts to influence how they will be perceived. The use of a clinical simulation in this study created the opportunity to watch how students manage their identity when meeting with Professor Williams, and listen afterwards to how they explain what they said and did. The results illustrate how students frame their requests for accommodations in an attempt to manage how their requests would be received.

Both Brian and Sam's comments to Professor Williams that they would try not to use accommodations unless they were really needed appears to align with previous research suggesting that students want to appear that they are self-sufficient and that their accommodations are a backup plan (Lyman et al., 2016). Arlene, Elissa and Scott's desire to only discuss a few of the accommodations on their letter could reflect an attempt to manage

stigma by trying to pass as having normative abilities, so as to not completely ‘out’ themselves as disabled students (Shallish, 2017). Or, as Elissa put it, she doesn’t want to be seen as “someone with a DSO letter,” despite handing faculty members a letter from the DSO. Karen’s lengthy reflection about the need she feels to preface and explain her accommodation for assignment extensions, and Scott ensuring Professor Williams that he will “be hardworking like everyone else” despite having an accommodation, are further examples of how students attempt to anticipate and influence how faculty members will perceive them. Even Caroline, Jared, Nora and others’ framing of the conversation as “just” wanting to discuss accommodations could also be interpreted as an attempt to frame the conversation from the beginning by minimizing or apologizing for what they have come to discuss. Together, these examples provide a glimpse of how students actually enact their awareness of their stigmatized identity within a conversation with a faculty member.

Another important finding related to how students navigate conversations with a faculty member is the tactics they use to manage their relationship with a faculty member. For example, Scott explained that when he agreed to use Professor Williams’ advice to sometimes handwrite his notes, despite preferring to type, he was using a tactic to make the faculty member believe that “I’m listening and that I value his opinion.” For Scott, it was a matter of “pick[ing] your battles” in order to maintain a positive relationship with a faculty member. I was surprised by the number of participants who described being strategic about their communication with Professor Williams, with consideration for their ongoing relationship. When I initially developed the simulation, I was concerned about the authenticity of the situation because the participants knew that this was an isolated meeting and that they would not meet the actor again. Nevertheless, participants made statements that echoed previous student concerns identified in research,

including that asking for accommodations might damage their ongoing relationship with a faculty member (Lyman et al., 2016; Marshak et al., 2010).

Participant reflections about how they attempted to manage their relationship with Professor Williams also revealed coercive elements related to the authority of a faculty member and gendered aspects of power. Participants in this study reported holding back negative reactions to some of Professor Williams' comments or questions, out of awareness of Professor Williams' authority as their professor. While attempting to show respect to a faculty member is not surprising, what is more alarming is that participants' accommodations became compromised as they attempted to maintain a positive dynamic with Professor Williams, especially amongst the female participants. Several participants asked permission from Professor Williams to use their accommodation, including Kimberly asking if it was "okay" with Professor Williams to use an accommodation. Elissa reported feeling too intimidated to even bring up her accommodation to record lectures. Karen reported that she was trying to appease and bargain with Professor Williams. And both Allison and Arlene reflected that they left decisions about their accommodations ambiguous, with Arleen going as far as to call it "pathetic" that she was not more firm about how she would use her accommodations. In other cases (Allison and Marissa), participants volunteered to give up their accommodations, even prior to Professor Williams expressing a specific concern about the accommodation. Further, when reflecting on the role of gender in follow-up interviews, female participants described being more comfortable talking to female actors and Elissa noted that she was intimidated by Professor Williams in part because of his gender.

While more detailed analyses (e.g., discourse analysis) are needed to identify more of the subtle, gendered aspects of the data, the examples above are illustrative of "how gender operates

as a regulatory system in the lives of disabled individuals” (Gill, 2016, p. 1). The female participants in this study were not only enacting advocacy as a student identified as having a disability (SID), they were doing so while simultaneously managing the normative expectations of being female.

Regardless of the gender of the actor, male participants more often asserted themselves with simple, declarative statements (e.g., Nick: “I’m not going to sell your lectures”), while female participants more often qualified their requests, offered to compromise, and expressed sympathy with Professor Williams concerns (e.g., Caroline: Oh, really? I don’t blame you...). These examples illustrate not only how gender and disability can intersect to oppress students, but also the subtle ways that privilege operates, such that male participants *did not* feel the need to express qualifications or sympathy (Yuknis & Bernstein, 2017). The findings also demonstrate how privileged social groups (male, white male/female) are ignorant of the dynamics related to other minoritized identities. No male participants expressed that gender had an impact on the simulation. Arlene was the only participant to mention racial identity in relation to the simulation, when she mentioned that she was aware of Professor William’s racial identity because African Americans have higher rates of acquiring the same physical health condition that Arlene has. No participants mentioned sexuality as having an impact on the simulation, though I did not interrogate this directly.

Participants’ reflections about the dynamic between themselves and Professor Williams have important implications for research about the attitudes of faculty members towards accommodations and students identified as having a disability (SID). Previous research has underscored the importance of faculty attitudes, and studies have found that faculty members report having positive attitudes toward SID and accommodations (e.g., Becker & Palladino,

2016; Murray et al., 2009). Descriptions about typical faculty members from both the focus group and simulation participants in this study support the idea that faculty members do, in fact, display what students perceive as positive attitudes towards disability and accommodations. Yet, the simulation and reflection interview data showing perceived positive attitudes of a faculty member do not equate to positive outcomes in a conversation about accommodations. Some of the same participants who described Professor Williams' attitude and personality positively (e.g., "positive", "nice", having the student's "best interest in mind") also expressed frustration and conflict related to communicating with Professor Williams about their accommodations.

While this finding may seem contradictory, there are explanations within the data. For example, several participants perceived Professor Williams' comments about their accommodations as supportive and in their best interest (consistent with the design of Professor Williams' character). However, Professor Williams' authoritative position contributed to well-intended comments being perceived as somewhat coercive. Allison and Nick perceived Professor Williams as trying to alter or deny their accommodations. Arlene perceived Professor Williams as believing that they knew better than Arlene about using accommodations. Elissa shared that Professor Williams' comments made her question whether she could change her mind later in the semester about how she uses an accommodation. The fact that Professor Williams was "nice," only made it "harder to speak up" for Elissa. Together, these findings suggest that efforts to support faculty members to have positive interactions with students need to look beyond the levels of attitudes and beliefs, to focus on how faculty members actually engage with SID, in situ, when discussing disability-related accommodations.

The dimensions of self-advocacy in postsecondary education

This study is grounded, in part, within special education research on self-advocacy. Researchers have emphasized the need for postsecondary students to advocate for themselves in transitioning into and succeeding in postsecondary education settings (e.g., Sarver 2000; Holzberg et al., 2018). If self-advocacy is understood broadly as knowledge and awareness of one's rights, needs, and the ability to articulate those rights and needs when seeking available resources (Sarver, 2000; Test et al., 2005; Schreiner 2007), then the context of this study is highly relevant to the issue of self-advocacy for postsecondary students. In meeting with Professor Williams, participants initiated a conversation in which they were in a position to articulate their needs and preferences, and demonstrate their understanding of the resources available to them (e.g., accommodations). The simulation and reflective elements of this study allowed me to examine the issue of self-advocacy from the bottom up, grounding the results in how students describe what it means for them to advocate in the context of talking to a faculty member about accommodations, and what if anything, they learned from both participating in the simulation and analyzing their own approach to self-advocacy in post-simulation group and individual follow-up interviews. The results of this study both underscore the importance of self-advocacy as it is defined within special education literature, but also indicate the need to expand how self-advocacy is theorized.

Some results of this study underscore existing theories of what self-advocacy entails. Participants demonstrated differences in the extent to which they articulated knowledge of rights and resources (Test et al., 2005), such as the meaning of specific accommodations and processes that relate to using the accommodations. For example, Karen was the only participant to respond to Professor Williams' comment about the location of testing by informing Professor Williams

that he could communicate last minute changes to the exam to the student by calling or emailing the staff at the Disability Services Office. Another prominent component of Test and colleagues' (2005) model of self-advocacy that resonated in the data was the extent to which participants used assertions, persuasion, and compromise in their communication with Professor Williams. The results of this study demonstrate that participants commonly did *not* assert their needs and preferences. Instead, some participants asked permission to use their accommodations, such as when Kimberly said to Professor Williams that she preferred to complete tests at the Disability Services Office, and then added, "Is that okay with you?" Or, participants left the status of their accommodations ambiguous or unclear (Allison and Arlene). However, there were instances in which participants attempted to compromise with Professor Williams, such as when Allison suggested that she would be willing to receive PowerPoint slides *after* class, as a way to use the accommodation for *advance access* to PowerPoint slides. While Nora and Kimberly described their willingness to be flexible and compromise as a positive characteristic, others felt that they were unduly pressured into compromising about accommodations that are their right (Allison, Arlene, Elissa, Nick).

Participants in this study also demonstrated behaviors that were, to various extents, consistent with those previously identified as target behaviors for requesting accommodations (Palmer & Roessler, 2000; Holzberg et al., 2018). For example, Marissa demonstrated behaviors such as describing her previous experience using accommodations and explaining the benefits of her accommodations (Palmer & Roessler, 2000). These behaviors appeared to contribute to effective communication, which Marissa acknowledged in the group debriefing when recalling that Professor Williams acknowledged that her accommodations sounded "helpful." Participants were less likely to display target behaviors of self-advocacy (Palmer & Roessler, 2000; Holzberg

et al., 2018) when a conflict arose. For example, participants seldom specified or reflected on their own understanding of Professor Williams' concerns. However, several participants did respond to potential conflicts by suggesting alternative ideas and attempting to compromise to reach a mutual agreement (Palmer & Roessler 2000; Holzberg et al., 2018). Together these findings suggest that students in this study demonstrated aspects of self-advocacy, as defined in Special Education literature, to various extents when speaking to a faculty member about accommodations.

Yet, other aspects of results of the study draw into question whether current definitions of self-advocacy capture the reality of what it means for students to represent their interests in the context of a conversation with a faculty member. For example, participants not asserting themselves or asking permission to use their accommodations, could be interpreted as a lack of participants' knowledge about their rights, or ability to assert themselves by carefully articulating their needs. However, data from simulation reflection interviews indicate that at least some students were aware of their legal rights to accommodation and had ideas of how they could have asserted themselves when speaking to Professor Williams. Participants' reluctance to assert their needs appeared to be a result of a different approach to serving their interests, including a concern to maintain a positive relationship with the faculty member within the power dynamics of the situation. Scott, for example, explained that he was using a deliberate tactic to try to make Professor Williams feel that his advice was valued, when he agreed to take Professor Williams' suggestion about notetaking. Arlene recognized the "inherent power difference," when speaking to a faculty member when she explained that she left things ambiguous to avoid creating an "awkward situation" by asserting that using her accommodation was her legal right. Current conceptualizations of self-advocacy in Special Education do not address issues of power and

pressure to conform to normative expectations held by faculty members, issues which were central to the ways that participants in this study advocated.

Further, participants were acting in what they perceived to be their best interests, even when not communicating in ways that match current definitions of self-advocacy. For some students, avoiding conflict with a faculty member is more beneficial than confronting conflict in order to ensure that they can use their accommodations. Some participants would prefer to avoid even revealing certain accommodations (Arlene and Elissa) or seeking accommodations at all (Scott) because they perceive that the faculty members will judge them in ways that will ultimately be harmful to their academic success or future employment opportunities. Current approaches to self-advocacy take for granted that it is better to assert one's needs and preferences than not. Yet, these examples illustrate Matthews' (2009) point, that hiding one's disability identity or needs is not always an irrational decision, but rather a strategic decision or tactic. Participants in this study demonstrated that advocating means making strategic decisions to serve their best interests, even if this means forgoing accommodations altogether.

Using Clinical Simulations in a New Context

In this study I created a simulation based on Dotger's (2013; 2015) model of clinical simulations for teacher and school leader education. The simulation that I designed, supported by debriefing and reflection interviews, allowed me to gain a glimpse into how students identified as having a disability (SID) engage in conversations about accommodations with faculty members. I attempted to avoid creating a simulation that would serve as an assessment of competencies, as is common in medical education (Epstein, 2007), or as an intervention for an area of concern in participants' behavior or knowledge (e.g., Dotger, 2011). Instead I was more interested in how students act and reflect upon their interaction when asked to practice a

potentially difficult conversation (Dotger, 2013; Dotger & Smith, 2009). The results of this study reinforce the potential benefits and challenges of using a clinical simulation that have been previously suggested. The results also suggest ways that a clinical simulation model can be adapted to work with different populations and for different purposes.

One important finding of this study was the challenge of creating a simulation that reflects the common experiences of participants. I chose the context of the simulation based on Barrows' (1987) simulation design tenet of *prevalence*. I believed I was designing a simulated context – meeting with a faculty member in their office to discuss accommodations – that is important because of the frequency with which participants experience the context in their lives. As it turns out, several participants seldom or never meet with faculty members in their office, instead most often opting for a brief disclosure of their disability accommodations in the classroom at the end of a class. This finding is not altogether surprising, given that the data I collected in the design phase of this study (i.e., student focus group, staff interviews, simulation pre-interviews) indicated that many students choose to disclose their disability accommodations in the classroom or via e-mail, rather than by going to a faculty member's office.

Yet, the data also revealed that even when participants do meet with faculty members in their office, the conversation is typically shorter than the simulation was, because faculty members make fewer comments, or ask fewer questions, than Professor Williams did in the simulation. This finding is consistent with Beullens et al.'s (1997) findings in medical education that standardized patients are perceived as asking more questions than typical patients. Because aspects of the location and character of Professor Williams did not reflect the most common experiences for some students, this simulation would need to be adapted if used again in the future, to reflect a more prevalent experience for a wider range of future participants. In its

current form, the simulation was indicative of a prevalent experience for some students, while for others the simulation was more indicative of Barrows' design tenet of *clinical impact* – a situation which is seldom experienced (e.g., a faculty member who wants to discuss accommodations in more detail than usual) but that has a potentially important impact (i.e., students getting the accommodations that they need for the course).

The finding that aspects of the simulation did not represent the experiences of many of the participants has implications for research about student-faculty member communication about accommodations. The results of this study provide further evidence that at least some students choose not to meet faculty members in their office to discuss accommodations, despite disability service professionals reporting that they encourage students to do so (Marshak et al., 2010). Some students in this study shared that they typically approach faculty members to discuss accommodations briefly in the classroom as a way to minimize conversation related to their stigmatized identity, or because of the ease of giving faculty members the letter in the classroom or via e-mail, rather than giving up time to visit each faculty member's office on campus. Given that most participants are accustomed to brief conversations about their accommodations, it makes sense that they perceived Professor Williams as initiating more conversation than a typical faculty member. The extent to which students expect to have brief conversations appears to be related in part to their preference, but also to a perception that faculty members do not have an interest in discussing accommodations. Chris captured this when he said that he will “just give them the letter. They don't care.”

Despite participants' reporting some aspects of the simulation as inconsistent with their typical experience, the results of this study demonstrate benefits of using a clinical simulation to gain a deeper understanding of the experiences of students identified as having a disability (SID).

The use of wall-mounted cameras to capture a conversation between SID and a standardized faculty member afforded a perspective of how students talk about their accommodations with a faculty member. While participants shared that they were not accustomed to hearing some of Professor Williams' comments and questions, they consistently indicated that the ways in which they presented themselves, and responded to Professor Williams, were consistent with how they typically interact in real life. Being able to see how SID interact, in an otherwise confidential real-life conversation, was arguably the biggest success of this study and demonstrates how a simulation can both provide an opportunity for SID to practice and for researchers to better understand how SID engage in an approximation of a real-life encounter (Dotger, 2015).

More specifically, this study reinforces the usefulness of clinical simulations, as reported in previous studies. First, the results demonstrate how simulations provide a glimpse of the knowledge base that participants draw on during an interaction (Dotger, 2013). For example, the simulation videos showed the various extents with which students explain accommodations and related processes to a faculty member. Secondly, the simulation was a useful tool for examining how participants describe their identity in relation to their encounter in the simulation (Dotger & Smith, 2009). After reflecting on the simulation, several participants in this study shared how they identified different aspects of their personality and thought differently about their purpose and role when talking to faculty members. Third, the results of this study also reinforce the benefit of using simulations as a low-risk opportunity to practice potentially important and difficult conversations (Dotger, 2015). While several participants shared that they were initially nervous – a common experience because of the unfamiliarity and uncertainty of the simulation (Dotger, 2013) – participants consistently said that they were able to be themselves. Karen was the only participant to share that she felt anxiety in the simulation, though she assured

me that she did not feel that it caused her to have a negative experience, and that anxiety is a part of all conversations she has with faculty members.

The results also demonstrate how a simulation can supplement other forms of research to provide an alternative approach to understanding a problem. For example, rather than doing a simulation, I could have interviewed participants and asked them to share about how they talk with faculty members, (e.g., Cole & Cawthon, 2015), as I did when conducting the focus group. Or, I could have surveyed students about their conversations with faculty members (Albanesi & Nusbaum, 2017). I also could have attempted to observe real conversations between students and faculty members. However, the simulation afforded me opportunities not afforded by these other methods. In addition to being able to see how participants act, in the moment, during the simulated meeting, participants were able to watch videos of themselves and use self-observations as a way to support their reflection of many aspects of their conversation with Professor Williams and other conversations they have had with faculty members in real life. Further, the simulated environment provided a lower risk opportunity to practice compared with intruding on the confidentiality of a real-life conversation with a faculty member who the student must maintain a relationship with for the remainder of their course, or beyond.

The results of this study also demonstrate elements of using a clinical simulation that differ from previous studies. First, this study demonstrated how clinical simulations can be used for a population outside of professional education. While simulations have been used as a tool to help prepare doctors, teachers and school leaders (Dotger, 2015), this simulation designed for the benefit of students in the immediate context of their academic careers, rather than for preparing for a professional career. Another difference between this simulation and past studies was the element of standardization. Whereas the protocols for standardized individuals have previously

been written with the intent of actors communicating the same verbal cues to each simulation participant (Dotger, 2013), I designed the protocol for this simulation to instruct the actor to adapt based on the participant and their specific accommodations. This design likely produced a more authentic encounter, but decreased the element of shared reflection in the small-group debriefings because not all participants heard the same comments or questions from Professor Williams. Future simulations might attempt to use different verbal cues (i.e., not specific to individual accommodations) that create a greater shared experience, while still allowing students to discuss the accommodations that they actually use in real life.

Finally, the design of this simulation differed from previous simulations in that it included an individual follow-up reflection. Previous studies have analyzed videos of the simulation and group debriefings (e.g., Dotger & Ashby, 2010), as well as written reflections after watching the video of their simulation (Dotger & Smith, 2009). However, this study added an individual reflection in which participants watched the entirety of their video while participating in an interview in which they discussed individual moments in the simulation, as well as the experience as a whole. The data suggest that the reflection interview is a useful method of data collection that can help researchers better understand students' rationale for the ways they interacted in the simulation, their identity in relation to the simulation, and their critical feedback about the simulation as a tool.

Implications for Practice

The use of a simulated meeting between a SID and standardized faculty member has implications for practitioners working within the areas of secondary education (e.g., high school Special Education) and postsecondary education (e.g., college and university disability service providers). Variations of the simulation done in this study could be used as a transition practice

used to provide an opportunity for middle or high school SID, or first-year postsecondary students to practice and reflect on how they articulate their needs and advocate for their rights and resources. In their evaluative comments about the simulation, participants in this study said that the simulation could be most useful for students who are nervous (Scott) or not used to talking about their accommodations or disability (Mark), and less useful to someone who is accustomed to these types of conversations (Brian). While participants in this study did not speak of the small group debriefing as beneficial, several said that watching and reflecting on their videos individually was the most helpful part of the simulation. As it did for several students in this study, participating and reflecting on a simulated encounter with a standardized faculty member could help students to become more aware of how they talk about their disability and accommodations, and whether they would like to change how they approach the encounter in the future.

In addition to being used as an opportunity for students to practice self-advocacy, the simulation could also be used with faculty members, as an opportunity to practice communicating with students identified as having a disability (SID) about disability-related accommodations. Actors could portray a SID who comes to talk to the faculty member about accommodations for their faculty member's course. Faculty members could receive feedback from SID about how they communicated in the simulation. Short of conducting a simulation, the transcripts of the simulation, such as the one in this study, could be used as part of a faculty training about disability-related accommodations. Faculty could examine sections of the transcripts alongside participants' reflections from the post-simulation interviews as a way to gain a better understanding of how students might react to their comments and questions. For example, analyzing participant reflections might allow faculty members to reconsider how they

express suggestions, so as to avoid the unintended consequences of students feeling pressured or coerced.

Building a clinical simulation into transition planning at the secondary level or as support for incoming postsecondary students or faculty members would require resources. In this study, I took advantage of an existing partnership between a university and a medical university that had a fully operating Simulation Center. While this partnership made the design and implementation of this simulation efficient, it is not necessary to conduct simulations. Outside of partnering with a medical university, secondary and postsecondary schools could conduct the simulations on their own. Video recording equipment (e.g., tablet technologies) is more readily available and affordable. More significant costs would be designing a simulation and the time and money to find and train actors who could portray the standardized individual (i.e., student, faculty member). Postsecondary faculty, community actors, or teachers in a school district could serve as actors in the simulation. Since many students transition into employment in addition to, or in place of, attending postsecondary schools, a simulation could be adapted to provide an opportunity for a student to discuss the job-related needs with a standardized individual portraying an employer. Outside of conducting an actual simulation, the transcripts of these simulations could also be shown to SID as a way to encourage them to consider different ways of self-advocacy, though the benefit of reading transcripts or watching videos may not be as beneficial as actually engaging in a conversation.

While the results of this study suggest that simulations can be used as an opportunity for students to practice self-advocacy, the results also suggest the need to reexamine the policies and procedures that place a burden on students to advocate for themselves in the first place. After students disclose a disability status at the institutional level (e.g., to a university's Disability

Services Office) they take on the additional burden of having to disclose their disability status and eligibility for accommodations directly to faculty members. A student sharing a letter of accommodations with a faculty member presents an opportunity for the faculty member to know a student more intimately, early in the semester. Yet, the message from students in this study was consistent: the practice of asking SID to disclose their disability and need for accommodations makes students feel stigmatized, particularly because students feel that they are placed in the position of asking for ‘special’ treatment, which reflects poorly on their capabilities as a student. Placed in the awkward position of having to bargain for their right to use accommodations, participants used various tactics to manage their identity and the power dynamics with faculty members, which included downplaying their needs, not asserting their rights, and even foregoing disclosure of a specific accommodation or their accommodations altogether.

Disability-related accommodations are intended to provide equal access to postsecondary education for all students (Madaus, 2011). Yet when the responsibility is placed on SID to inform faculty members and negotiate how accommodations will be used, the implementation of accommodations simultaneously creates attitudinal barriers. Literature about self-advocacy in Special Education creates the impression that if SID can be better at self-advocating by exhibiting certain communication strategies, then they will have better access and outcomes (e.g., Holzberg et al., 2018). However, the notion of self-advocacy as an ability that SID must improve is an ableist conceptualization that perpetuates the notion that people with disabilities are responsible to overcome barriers in order to achieve the same individual access that is afforded to others.

Listening to the voices of the participants in this study suggests that improvements in self-advocacy will have a marginal impact on the context of meaningful access to education.

What most participants struggled with was *not* related to a lack of knowledge of their rights or needs, or difficulty articulating themselves. Instead, they reported that they were navigating potentially discriminatory attitudes and inflexible policies, most of all, a systemic approach that highlights their *inabilities*, in a postsecondary cultural that is predicated on the value of ability (Dolmage, 2017). It is therefore no wonder that participants' conversations with Professor Williams were ridden with apologies and acquiescence.

Yet individual access through self-advocacy and accommodations is only one approach to supporting meaningful and equal access to education. Another approach is creating universally-designed policies that support diverse needs and preferences through flexible policies and providing choice to users. Participants in this study underscored the importance of flexible policies and choice regarding the design and implementation of disability-related accommodations. Elissa's suggestion that she have access to a customizable accommodations letter is an example of how a student would prefer an adaptable process that she can use to manage her identity (i.e., by choosing which accommodations she reveals to faculty members for a given course). Several students expressed different ways of communicating with faculty members about their accommodations other than meeting in their office, including a brief conversation in the classroom, or e-mailing the letting of accommodations. While Eastern University's Disability Services Office staff suggested that a conversation in the faculty member's office was ideal, student perspectives reinforce the benefit of having the choice of how they would like to disclose their accommodations for each individual class.

However, choice in how students present their accommodations does not address the underlying concerns of students about how they will be perceived or treated by faculty members

in response to their accommodations. Elissa described that the fundamental problem is that students are putting themselves in a deficit position, simply by seeking accommodations:

I feel like there is a systematic problem around disability.... Because part of the problem with the academic letters is you give them to them [faculty members] before you have any chance to make a relationship with them. So, you are setting yourself up to be like, 'I have some challenges.' Whereas basically it's just I have some differences. And once they get to see my work and know what I am really capable of...but then it lets them judge before they have anything on you.

Elissa's perspective suggests a need to consider alternative ways to providing students with access that meets their needs without placing them in a position of having to begin their relationship with every faculty member by seeking differential treatment. Within a social justice framework, an alternative approach would consider removing barriers in the environment that make accommodations necessary in the first place, and the expectations that people with disabilities should conform to dominant norms (Evans et al., 2017).

Universally-designed instruction and course policies are one way to begin to think of alternatives to retrofitting courses through individual accommodations (Dolmage, 2017). Often classroom policies that do not support the diversity of students go unquestioned and the burden is placed on students to advocate for accessible instruction through discussions with faculty members. Alternatively, faculty members could build what are typically considered accommodations into their course for *all* students to access. If a separate testing environment is made available to all students, or Power Point slides are made available to all students in advance of class, the participants in this study may be less likely to feel stigmatized; they would be less likely to asking to be for anything 'more' or different than their peers if faculty members have

designed course policies that welcome diverse learning characteristics (Dolmage, 2017). I am not suggesting that universal design approaches are a substitute for all accommodations, as individual needs vary (Evans et al., 2017). Rather, I am highlighting how the stigma that participants in this study experience is directly related to choices by those who create the norms of what is expected of students.

Limitations and Simulation Design Considerations

There are several limitations of this study that should be considered when interpreting the results of the study. First, this study is limited by the characteristics and size of the sample of participants. One characteristic of the sample that was limited was disability. The participants in this study were mostly representative of students identified as having disabilities at Eastern University and postsecondary institutions in the United States (Evans et al., 2017). However, there were no participants in this study who identified with visual impairments or identified as autistic (e.g., Autism Spectrum Disorder). Additionally, the participants only represent typically admitted, or typically matriculating, postsecondary students. There was no representative from the increasing number of students who are students enrolled in inclusive postsecondary education programs, where students who have more complex needs (e.g., identified as having an intellectual disability) and who increasingly are accessing typically postsecondary courses (Grigal, Papay, & Smith, 2017). Further research would need to be done to examine how these students, who have different characteristics and different accommodations than the participants in this study, talk about their accommodations with faculty members.

Another limitation of the sample in this study is the lack of racial diversity. There were no participants in this study who identified as African American and only one participant who identified in each of the categories of Hispanic and Asian. The site I chose for the study likely

contributed to the lack of racial diversity. Eastern University is a private university that is cost-prohibitive in comparison to other postsecondary schools, a factor that likely contributes to the small minority of students of color who are enrolled. Further, I recruited students who are registered with the Disability Services Office (DSO). A staff member who works at the DSO speculated that the students who register with the office are “whiter” than the university population and that I therefore may have difficulty recruiting students of color for this study. It is not clear why students of color might not be registering at Eastern University’s DSO. The financial cost of attaining a disability evaluation may be one reason. For example, the DSO offers evaluations of learning related disabilities for a fee. Students of color, such as African Americans, might also experience increased stigma related to disability within their cultural communities, which may make them less likely to associate with a disability identity (Jarman, 2011). Or there may be some aspects of the Disability Services Office that students perceive as unwelcoming to minoritized students.

The lack of students of color was also a result of my recruiting methods. At the time of planning recruitment for this study, I was concerned with whether any students would be interested in participating in the simulation, and I did not carefully consider that I was likely to end up with a sample of so many white students. In retrospect, I could have used additional recruitment methods, such as recruiting through student organizations whose membership is primarily students of color. I could also have added an additional site, such as another postsecondary school that is more racially diverse than Eastern University. In the end, the sample was an overrepresentation of white students, even for the predominantly white Eastern University. The overrepresentation of white students and lack of discussion of racial analysis renders this study as white Disability Studies/Special Education research. Contributing only to

research about whiteness and disability is a serious shortcoming of this study, given that students of color are overrepresented with U.S. Special Education, yet underrepresented in research studies (Annamma, Connor, & Ferri, 2016). Given the prominent role that gender dynamics had in this study, it seems likely that racial dynamics are also significant within conversations between students and faculty members about disability-related accommodations, and these should be studied in the future.

Another limitation of the sample was the size ($n=15$). When I originally recruited participants for this study, I was hopeful that even 10 participants would agree to take part in the study. Having 15 student participants in the simulation and debriefing and 9 in the individual reflections yielded some clear patterns in the way students interacted in the simulation and the issues that they consider important in shaping their approach to talking to faculty members about accommodations. At the same time, a larger sample would likely reveal outliers in certain aspects of how students discuss accommodations. Or, a larger sample would reveal that outliers within this study are actually more common. Regardless, considering limitations of the sample in terms of size, racial diversity and disability diversity, the results should not be interpreted as applicable to all postsecondary students identified as having a disability (SID).

The results are also limited by the type of analysis I did and did not do when I reported the data. While I coded to identify themes within the ways that students participated in the simulation and reflected upon the experience, there are many methods with which the data could be analyzed. For example, my analysis did not include close examination of the non-verbal communication of the participants and actors during the simulations. Future analysis could examine the facial expressions and body language in instances such as when participants gave non-committal responses. Discourse analysis would also be a useful form of analysis that I did

not use in this study. For example, a discourse analysis could examine both the sociocultural ideas, or cultural models, that participants reference when prefacing or framing their accommodations during the simulation. Or, a discourse analysis could examine micro-level linguistic utterances within sections of dialogue between the participants and Professor Williams.

The critical perspectives with which I framed this study, while useful, may also have limited potential findings of this study. In Chapter One, I framed this study around sociocultural and social justice approaches that foreground the physical, anecdotal, and political barriers that disable postsecondary students. In Chapter Two, I cited research in which postsecondary students reported facing many of these barriers, especially concerns about faculty members' attitudes towards disability and accommodations. When I designed the simulation in this study, I paid close attention to what current SID in a focus group said about the kinds of questions and concerns faculty members express about students' accommodations or disability status. However, I did not deeply explore the ways that participants in this study describe the positive interactions with faculty members.

While I did write Professor Williams' character as someone who has a positive attitude about accommodations, I could have attempted to elicit specific language from SID in the focus group with a question such as, "Tell me what faculty members say that makes you feel that they are supportive?" Crafting the simulation around verbal cues and behaviors that make students feel supported, and asking students to reflect about (potentially) more positive interactions, might have produced results that reveal more clear recommendations for the ways faculty members could engage with SID in conversations. Instead, the implications of the results of this study are mostly limited to what faculty should *not* do when talking with students. My own bias towards examining ableism and how students respond and reflect upon potential conflicts related to

accommodations led me to forego other aspects of conversations with faculty members that may have yielded important results.

In addition to these limitations, there are a number of considerations about the use of a clinical simulation design. When considering the results, it is also important to consider that the participants took part in a single simulation, for which it was their first time. There were elements of uncertainty and nervousness that are common when participating in a simulation for the first time (Dotger, 2013). Participants would likely have been more comfortable after participating in multiple simulations. Furthermore, data indicating how participants interacted in this single simulation should not be assumed to reflect how they would interact in another simulation, with a different standardized faculty member. The individual follow-up interviews were helpful in this regard; students pointed out aspects of their verbal and behavioral communication that are common across their conversations with faculty members and aspects which they felt were unique to their conversation with Professor Williams.

It is important to remember that the participants' meeting with Professor Williams was in a simulated environment. Participants met with an actor, not a real faculty member for an actual course in which they were enrolled. The meetings took place in a room that resembles a medical examination room. Several participants stated that they were aware of being in a simulated environment and that this contributed to them initially feeling nervous. Participants generally said that they quickly adjusted to being in the simulation and that the interaction felt typical. However, the incident in which Sam forgot that he had his letter of accommodations in his hand is a clear example of the nerves that can occur when participating in a simulation and a reminder that a simulation is not fully authentic.

A key elements of the environment of the simulation are the actors who portrayed Professor Williams. Having watched the videos and read the transcripts of each simulation, I was frequently comparing what the actors said to what I wrote on the protocol I had written and the notes about the trainings I did for the actors. I sometimes noticed discrepancies in the standardization of how actors communicated with participants. For example, there were differences in the amount of ‘small talk’ the actor attempted with the participant at the beginning of the simulation. Or, there were differences in the language actors used when delivering a verbal cue (ex., “My preference is...” versus “some students in the past have preferred...”). It is difficult to say how these differences impacted the simulation. It is possible that the amount of small talk an actor attempted made little difference for how the student felt in the conversation, or perhaps the actor attempting more small talk contributed significantly to the participants feeling comfortable. Other differences in language likely had a more significant impact. When the actor told Nick that “my preference is...”, it likely conveyed a clear and authoritative preference that may have contributed to Nick’s feeling that the actor was resistant to his accommodations.

Considering the actors’ communication in retrospect, I would have made different choices when designing Professor Williams’ simulation protocol and facilitating the actors’ training. For example, I would have reduced the amount of verbal cues so that there were not as many for the actors to memorize and therefore less margin for error when communicating specific language. In the training I would have been more explicit to the actors that they did not need to make comments or ask questions about accommodations beyond what was asked of them through the verbal cues. There were a few instances in which actors read aloud and commented

on nearly every one of a participant's accommodation, which may have conveyed a greater sense of concern or resistance to the accommodations than I hoped.

A final important consideration relating to the actors' role in the simulation is that I did not examine the potential role that their individual beliefs had in the simulation. For example, I did not examine ideas they might hold about disability or accommodations due to their personal or professional experiences outside of acting in the simulation. I did not interview the actors or take notes during the training of actors to determine what perspectives they expressed relating to disability and accommodations. The reason for this is that the actors were not participants in this study (though they certainly had an important role). In the approval I received from Eastern University's Institutional Review Board, I was asked that the role of the actors be pay-for-service only, rather than the actors being involved in the study as participants. The actors' status as non-participants was also why I did not refer to them as individuals during the study, but only by vague identification such as their gender and race. A future study might include actors as participants and examine the role that their prior experiences have in shaping their views about disability and accommodations that could potentially come through in the simulation.

Final Thoughts: Why Self-advocacy in the First Place?

In the spring of 2018, I presented the preliminary findings of this study at an academic conference. During the audience discussion following my presentation, a debate occurred between a graduate student who identified as having a disability and a staff member of a disability services office. The graduate student asserted that a student should never be expected to disclose their disability directly to a faculty member, while the staff member argued that discussions between faculty members and students are a valuable opportunity for students to advocate for themselves. The findings of this study do not lead to simple answers about how

students and faculty members should communicate, if at all, about disability-related accommodations. However, this study does suggest the importance of learning from expertise of students, so as to ground theories of what it means to advocate in the lessons of students who experience, firsthand, the stigma of seeking accommodations in postsecondary education.

Learning from students in this study underscores the importance of shifting away from policies that focus on individual access, to instead create collective access through designing approaches “*with and by*” those who do not fit within the normative expectations of ability (Hamraie, para. 58, emphasis in original, 2013). Collective access would also mean shifting away from a focus in research and practice on perceived deficits in constructs such as self-advocacy. While advocacy can be important for any student, a focus on self-advocacy comes at a cost of not addressing barriers created by a biomedical approach that demands self-advocacy as the price for equal access. As long as students are placed in a stigmatizing position, the idea that they need to improve self-advocacy is a self-fulfilling prophecy; the barriers that they face will require ever increasing self-advocacy that is not demanded of other students.

Appendix A: Interview protocol with staff members from Eastern University's Disability Services Office

1. Could you please introduce yourself, however you feel comfortable doing so?
2. How would you describe your role at the Disability Services Office?
3. In what capacities do you work with or encounter students?
4. Could you tell me a little bit of the process of how a student registers with the Disability Services Office?
5. Tell me about any guidance that staff from DSO provide for students about discussing their disability and accommodations with faculty members?
6. Are students required to meet with professors to discuss accommodations?
7. How would you describe the kinds of attitudes or dispositions that students encounter when meeting with faculty members?
8. Could you give me some examples of specific language students have reported to you, that faculty members have used when engaging in conversations about accommodations?
9. If you are aware of any, what are some specific examples of responses from faculty members when students discuss accommodations with them?
10. Do you have any direct communication with faculty members? If so, could you describe typical topics discussed during this communication?
11. If you communicate with faculty members, what are some challenges when it comes to working with faculty members regarding accommodations? What about positive experiences?

Appendix B: Initial draft of student protocol

Professor: Alicia/Alan Williams

Meeting Type: Student-initiated

It's the first week of classes for the fall semester at Eastern University. Last week, before classes began, you received an e-mail from the Disability Services Office. Attached to this e-mail was a letter that lists the accommodations you are provided as a student registered with the Disability Services Office. When you registered at the Disability Services Office, you were strongly encouraged to meet with each of your professors, face to face, to discuss how the accommodations will be implemented in each course. Your counselor also strongly suggested that it's better to meet your professor during office hours, instead of giving them the letter at the end of the first class. You were told that meeting during office hours would allow you to have more privacy and to have the professor's full attention when discussing your accommodations.

One of the classes you are enrolled in is Economics 301 (Principles of Economics) with Professor Williams. The course began a few days ago. On the first day, Professor Williams introduced the course and passed out the syllabus on the first day of class. Professor Williams discussed how your grade would be calculated through several assignments which included:

- (3) In-class exams (short answer)
- (10) Homework assignments, due weekly
- (1) Individual 15-minute presentation in class

- (1) Paper, 5-6 pages in length

After discussing the syllabus, Professor Williams began his first lecture, using a PowerPoint with a few dozen slides. Students were taking a lot of notes throughout the lecture. At the end of his lesson, Professor Williams told students to expect most classes to be like this - a lot of lecture and at a quick pace. "We've got a lot of information to cover in this class, so I'll try to get through these PowerPoints quickly, and leave time for questions." Professor Williams told the class.

As you were leaving at the end of the first day of class, you looked down at the syllabus and noticed Professor Williams has office hours scheduled later in the first week. You decided you will stop by Professor Williams office during office hours to share your letter from the Disability Services Office outlining your accommodations.

Appendix C: Protocol for open-ended questions during focus group

1. What is the first thing you say to a professor when you meet with them?
2. What is the first thing they say back to you?
3. Tell me about the attitudes you encounter from faculty members when discussing your disability or accommodations.
4. Could you give me some more examples of specific things professors have said to you during conversations about accommodations?

Appendix D: Revised Student Protocol

Simulation Introduction

Description: Student-initiated meeting with professor during office-hours

Professor: Alicia/Alan Williams

It's the first week of classes for the fall semester at Eastern University. You are registered with the university's Disability Services Office. At the beginning of the semester you received a letter from the Disability Services Office, describing your accommodations. When you first registered with Disability Services Office, your counselor recommended that you meet with each of your professors in their office to discuss how you plan to use your accommodations in that specific course.

One of the classes you are enrolled in is Economics 301 – Principles of Economics, with Professor Alicia/Alan Williams. On the first day of class, Professor Williams passed out the course syllabus. They discussed how your grade would be calculated through several assignments which included:

- (3) In-class exams (short-answer/open-ended questions)
- (10) Homework assignments, due weekly
- (1) Individual 15-minute presentation in class

- (1) Paper, 5-6 pages in length

Professor Williams mentioned that their office hours are on Thursday afternoons. Professor Williams also pointed to a statement on the syllabus regarding disability accommodations and announced that students who receive accommodations should come talk to them “sooner rather than later.”

In professor Williams' first lecture, they used a PowerPoint with a few dozen slides. At the end of their lesson, Professor Williams told students to expect most classes to be like this – a lot of lecture and at a quick pace. “We've got a lot of information to cover in a short time, so expect to take a lot of notes,” they told the class.

After class, you decide you will stop by Professor Williams' office hours on Thursday afternoon to discuss your letter of accommodations.

Appendix E: Revised Standardized Faculty Member Protocol

Standardized Individual: Alan / Alicia Williams
(confident, concerned)

Conference Type: Student-Initiated

You are Alan/Alicia Williams, an Associate Professor at Eastern University. You teach undergraduate students in the Department of Economics. It's the first week of the fall semester of 2017 and you are teaching three courses this semester, including Economics 301-Principles of Economics. There are about 50 students enrolled in this course. You have taught Economics 301 several times and enjoy teaching the course. You like providing interesting examples to illustrate economic concepts for your students. Yet, the course always gets stressful as the semester gets going because you have a lot of material to cover and you often feel you are behind. To try to keep up, you move through information quickly, using extensive PowerPoints to guide each of your lectures. You invite students to ask questions during the lecture and you also save the final few minutes of each class for questions.

A few days ago was the first day of class for the semester. You introduced the syllabus to students and informed them that their grade would be based on the following assignments:

- (3) In-class Exams (short-answer questions)
- (10) Homework assignments due weekly
- (1) Individual 15-minute presentation in class
- (1) Paper, 5-6 pages in length

You encourage students to come to class, but you don't have a specific attendance policy for your course.

Later this week, you will hold your first office-hours session. You typically have a few students who come to give you a letter from the Disability Services Office and to discuss disability-related accommodations. One student already handed you a letter from the Disability Services Office at the end of the first lecture, and another e-mailed you the letter. However, you expect a few more students will stop by your office to give you the letter and have a face-to-face conversation about accommodations.

Important Characteristics/Background Information for Standardized Faculty Member

1. The letter students give to you in your office is not new to you. You have been teaching at the university for almost 15 years and you have had many conversations about accommodations with students with disabilities. Most commonly, student let you know that they have testing accommodations and often that they prefer to take the exams at another office on campus (Disability Services Office). Students don't typically disclose their disability, but you assume that their disability is related to difficulties with learning. With your experience, you feel you are knowledgeable and understanding of students who have disabilities.

2. When students give you a letter from the Disability Services Office, you notice that they sometimes try and leave quickly. You prefer to sit with students and discuss the accommodations for a few minutes. You are positive and encouraging when students talk about potential concerns they may have about your course.
3. Since you have taught this course before, you feel you have a good idea about how certain accommodations will impact the course and students' learning. You are not shy about politely offering advice to students about how they might best use accommodations to succeed.
4. Generally speaking, you are willing to comply with accommodation requests that have been approved for students on their accommodations letter. However, you have a structured routine and schedule for your course, so you tend to be apprehensive about accommodations that require you to alter your typical teaching practices, or to change aspects of your course policies.

Questions/Information to Present to the Student (Verbal / Behavioral Cues)

1. The student has come to your office hours to initiate a meeting. Greet them as they enter and briefly engage in any small talk (e.g., "How's the semester so far?") If the student does not immediately say who they are or why they are here, ask them "So what can I help you with today?"
2. At some point early in the conversation, the students should present a letter detailing their accommodations. Let the student know that you appreciate them giving you the letter. Tell them that you "always prefer to discuss these in person so we can make sure we are on the same page."

Once the student hands you the letter, tell them that you need a minute to look over the letter.

3. By the time you have looked over the letter, the student may already be volunteering further explanation about their accommodations or characteristics. If they do not volunteer this information, ask the student to tell you a little bit more about themselves. Ask them, "So what exactly does your disability mean for you as a student in this class?"

Respond in a assuring manner to the students, UNLESS they bring up one of the accommodations below, in which case move down to the next verbal cue.

4. Discuss the "testing modification" accommodation(s) that is listed on the student's letter. Ask them: "Do you typically take your exams at the Disability Services Office?"

Most likely the student will respond "Yes." Politely but confidently explain to the student, "That's fine. But some students in the past have preferred to take the tests with me, so they don't miss any questions during the test."

If the student reiterates that they will take the test at the Disability Services Office, agree with them with slight apprehension.

OR

If the student originally says "No," they will take it in your class, nod in agreement and say.

‘Okay, is there anything you need me to do on my end?’

5. Choose ONE of the following two, depending on which accommodation the student has.

If the student has accommodation - Note taking assistance: laptop and/or recording devices:

Explain to the student that you are a little concerned about students using laptops in class. You have found that it’s a distraction to the student using it and even other students. Also, you recently read about a study that concluded that students learn better if they handwrite their notes.

You also don’t like having your lectures recorded because “I don’t want my intellectual property to end up on YouTube.”

OR

If the student has the following accommodation: Assignment Modifications (time extensions):

Explain to the student that you are generally okay with giving extensions on assignments. However, sometimes you have seen students fall behind in the class and you don’t want that to happen for this student. Ask the student, “Does that make sense?”

6. End by thanking the student for coming to meet with you. Ask them, “Is there anything else you wanted to talk about today?”

Appendix F: Protocol for initial (pre-simulation) interview with simulation participants

1. Could you please introduce yourself, however you feel comfortable doing so?
2. How old are you?
3. When did you register with the Disability Services Offices?
4. Could you tell me about the accommodations you are approved to use by the Disability Services Office?
5. Do you identify with any specific disability?
6. About how many times have you talked to professors about accommodations?
7. Where did you usually speak with professors about accommodations?
8. Did you receive any accommodations prior to coming to this university?
9. If so, did you have an Individualized Education Program (IEP) or 504 Plan?
10. If you did have an IEP, did you ever attend an IEP meeting?
11. How do you identify in terms of race or ethnicity?
12. How do you identify in terms of gender?
13. Is there anything else you would like to add?

Appendix G: Final standardized faculty member verbal/behavioral cues

Questions/Information to Present to the Student (Verbal / Behavioral Cues)

1. The student has come to your office hours to initiate a meeting. Greet them as they enter and briefly engage in small talk (e.g., how's the semester so far?) If the student does not immediately say who they are or why they are here, ask them, "So what can I help you with today?"
2. At some point early in the conversation, the student should present a letter detailing their disability-related accommodations. Let the student know that you appreciate them giving you the letter. Tell them that you "always prefer to discuss these in person so we can make sure we are on the same page."

Once the student hands you the letter, tell them that you need a minute to look it over.

3. Take 15-30 seconds to review the letter. By the time you have looked over the letter, the student may already be volunteering further explanation about their accommodations or characteristics. If they do not volunteer this information ask the student to tell you a little bit more about themselves. Ask them, "So what does your disability mean for you as a student in this class?"

Respond in a reassuring manner to the students, UNLESS they bring up one of the accommodations below, in which case move down to the next verbal cue.

4. Discuss the "testing modification" accommodation(s) that the student has listed on their letter. Ask them: "Do you typically take tests at the Disability Services Office?"

Most likely the student will respond "Yes." Politely but confidently explain to the student that "That's fine. But some students in the past have preferred to take the tests with me, so they don't miss any questions during the test."

If the student reiterates that they will take the test at the Disability Services Office, agree with them with slight apprehension.

OR

If student originally says "No" and that they will take it in your class, nod in agreement and say,

"Okay, is there anything different you need me to do on my end?"

5. Choose ONE of the following three, depending on which accommodation the student has.
 - A. If the student has the following accommodation: Note taking assistance: laptop and/or recording devices

Explain to the student that you are a little concerned about students using laptops in class. You have found that it's a distraction to the student using it and even

other students. Also, you recently read about a study that concluded that students learn better if they handwrite their notes.

Allow the student to respond, then add:

You also don't really like having your lectures recorded because "I don't want my intellectual property to end up on YouTube."

OR

- B. If the student has the following accommodation: Assignment Modifications: Long term extensions

Explain to the student that you are generally fine with giving extensions on assignments. However, sometimes you have seen students fall behind in the class and you don't want that to happen for this student. Ask the student, "Does that make sense?"

OR

- C. If the student has the following accommodation: Advance access to PowerPoints

Tell the student that in the past you have given out the PowerPoints before class, but that students don't tend to show up.

6. If the student has any other accommodations, pick ONE and tell them that you haven't seen that one before. Ask them "How does that typically work?" Allow the students to offer an explanation and ask any follow-up questions that seem appropriate.
7. Ask them, "Is there anything else you wanted to talk about today?" End by thanking the student for coming to meet with you.

Appendix H: Example of mock letter of accommodations**EASTERN UNIVERSITY**

DATE: August 30, 2017

TO: Professor/Instructor/Professional Staff

FROM: DS Office Staff

RE: Accommodations for student ID # 000000

This student is registered with our Disability Services Office. As the student's counselor, I worked with the student to identify accommodations that are necessary to have equal access to your class and course content. The following academic accommodations have been approved for this student for the fall 2017 semester:

- Testing Modifications/Extended Time for Test - 1.5x
- Testing Modifications/Avoid back-to-back exams
- Classroom Modifications and Auxiliary Aids/Advance Access to PowerPoints
- Note Taking Assistance-Laptop and/or Recording Device

Appendix I: Post-simulation group debriefing interview questions

1. Tell me a little bit about how you felt participating in the simulation.
2. Do you feel this simulation was realistic?
3. How would you describe your approach to the conversation with Professor Williams?
4. Tell me about some of the things you said or heard when meeting with Professor Williams.
5. How would you describe the way Professor Williams responded to your requests for accommodations?
6. How do you feel about how you responded to Professor Williams' comments and questions?

Appendix J: Post-simulation individual follow-up interview questions

1. Tell me about what it was like to watch the video of the simulation?
2. To what extent was the simulation indicative of typical real-life conversations you have had with professors?
3. How would you describe Professor Williams' attitude towards your accommodations?
4. Did Professor Williams' gender, race, or age have any impact on your discussion?
5. Before the simulation group debriefing, had you ever discussed disability or accommodations with other students, either in person or virtually?
6. Have you previously received advice about how to talk to professors or other teachers about accommodations?
7. Do you feel you benefited or learned anything from this experience?
8. Do you think that the simulation would be a useful exercise for other students?
9. Is there anything that you would suggest to change the simulation, or any aspect of your experience?

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- Weis, R., Erickson, C. P., & Till, C. H. (2017). When average is not good enough: Students with learning disabilities at selective, private colleges. *Journal of Learning Disabilities, 50*(6), 684-700.
- Weis, R., Till, C. H., & Erickson, C. P. (2017). ADHD assessment in college students: Psychologists' adherence to DSM-5 criteria and multi-method/multi-informant assessment. *Journal of Psychoeducational Assessment, 0734282917735152*.
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Yuknis, C., & Bernstein, E. R. (2017). Supporting students with non-disclosed disabilities: A collective and humanizing approach. In E. Kim & K. Aquino (Eds.), *Disability as diversity in higher education* (pp. 3-18). New York, NY: Routledge.

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EDUCATION

Doctor of Philosophy, Special Education Syracuse University, Syracuse, NY Dissertation Committee: Dr. Benjamin Dotger, Dr. Christine Ashby, Dr. Beth Ferri Certificate of Advanced Study, Disability Studies	December 2018 May 2016
Master's of Education, Special Education The College of New Jersey, Ewing, NJ Advisor: Dr. Shridevi Rao	December 2012
Bachelor's of Arts, History and Secondary Education The College of New Jersey, Ewing, NJ Advisor: Dr. Collette Gosselin	May 2011

UNIVERSITY TEACHING POSITIONS

Rowan University, College of Education, Glassboro, NJ Assistant Professor	September 2018-Present
Syracuse University, School of Education, Syracuse, NY Instructor and Teaching Assistant	August 2013 – May 2018
Long Island University, School of Education, Brooklyn, NY Adjunct Professor	Summer 2016
Harvard Graduate School of Education, Cambridge, MA Teaching Fellow	Summer 2015

UNIVERSITY COURSES TAUGHT

Syracuse University

Instructor of Record

- EDU 200/201: Practicum in Pre-K/Elementary Education Fall 2017-Spring 2018
- DSP 621: Sociology of Disability (Online) Summer 2017
- ENL 610: Oral Communication in Teaching (Laboratory) Fall 2015 – Spring 2018
- EDU 203: Introduction to Inclusive Schooling Spring 2016

Co-instructor of Record

- CFE 614: Critical Issues in Dis/Ability Summer 2015

Teaching Assistant

- SPE 705: Psychoeducational Evaluation & Planning Spring 2017
- SPE 612: Adapting Instruction for Diverse Students Spring 2015, Fall 2016

- SPE 634: Collaboration in Schools Fall 2014
- CFE 614: Critical Issues in Dis/Ability Summer 2014
- SPE 311: Perspective on Disability Spring 2014
- EDU 203: Introduction to Inclusive Schooling Fall 2013, Fall 2015

Long Island University

Instructor of Record

- TAL 803: Perspectives on Disability Summer 2016

Harvard Graduate School of Education

Teaching Fellow

- Dimensions of Diversity: Special Education Summer 2015

PUBLIC SCHOOL TEACHING EXPERIENCE

Amherst Regional High School, Amherst, MA

Special Education Teacher, Grades 9–12

January 2013 – June 2013

Young Scholars Charter School, Philadelphia, PA

Social Studies Teacher, Grades 6–8

June 2011 – July 2011

TEACHING CREDENTIALS

University

Certificate of University Teaching (CUT), Future Professoriate Program

Spring 2016

Secondary School

Certificate of Eligibility with Advanced Standing, NJ Dept. of Education

Teacher of Students with Disabilities

December 2012

Teacher of Social Studies

May 2011

REFEREED PUBLICATIONS

Peer-Reviewed Journal Articles

Freedman, J.E. & Ferri, B.A. (2017). Locating the problem within: Race, learning disabilities, and science. *Teachers College Record*. 119(5).

Freedman, J.E. & Honkasilta, J.M. (2017). A critical discourse analysis of the diagnostic criteria for Attention Deficit Hyperactivity Disorder and Hyperkinetic Disorder. *Disability and Society*. DOI: 10.1080/09687599.2017.1296819.

Freedman, J.E. (2016). An analysis of the discourses on Attention Deficit Hyperactivity Disorder (ADHD) in U.S special education textbooks with implications for inclusive education. *International Journal of Inclusive Education*. 20(1), 32-51.

Freedman, J.E. (2016). Disability Studies in Education (DSE) and the Epistemology of Special Education. In Michael A. Peters (Ed.). *Encyclopedia of Educational Philosophy and Theory*. Springer.

Book Chapters

Freedman, J.E., Jaffee, L., Roquemore, K., Song, Y., & Veitch, H., (in press). Beyond Compliance: Lessons learned about disabled student activism on campus. Authors contributed equally to this book chapter

REFEREED CONFERENCE PRESENTATIONS

Freedman, J.E. & Song, Y. (April 2017) *Following through on South Korea's commitment to inclusive education: the role of teacher education*. Annual Meeting of the American Education Research Association, San Antonio, TX.

Freedman, J.E. (June 2016) *Race and self-control: From Thomas Jefferson to the 21st century*. Second City Disability Studies in Education Annual Conference, Des Moines, IA.

Freedman, J.E. & Ferri, B.A. (April 2016) *Locating the problem within: Race, learning disabilities, and science*. Annual Meeting of the American Education Research Association, Washington, DC.

Freedman, J.E. & Honkasilta, J.M. (April 2016) *A critical discourse analysis of the diagnostic criteria for Attention Deficit Hyperactivity Disorder and Hyperkinetic Disorder*. Annual Meeting of the American Education Research Association, Washington, DC.

Freedman, J.E. (December 2014). *Autism and the use of metaphor in parent memoirs*. TASH Annual Conference, Washington, DC.

Freedman, J.E. (December 2014). *ADHD discourse in special education textbooks*. TASH Annual Conference, Washington, DC.

Freedman, J.E. (July 2014). *The power of medicalization: Attention Deficit Hyperactivity Disorder and feble-mindedness*. Disability Studies in Education Conference, Victoria University, Melbourne, Australia.

Freedman, J.E. (July 2014). *Locating the problem within: Race, learning disabilities, and science*. Disability Studies in Education Conference, Victoria University, Melbourne, Australia.

Freedman, J.E. (March 2014). *Locating the problem within: Race and learning disabilities*. Conference on Equity and Social Justice, Syracuse University, Syracuse, NY.

Freedman, J.E. (February 2014). *The power of medicalization: Attention Deficit Hyperactivity Disorder and feble-mindedness*. Mental Illness and Power Conference, University of Memphis, Memphis, TN.

INVITED PRESENTATIONS

Freedman, J.E. (March 2019). *Universal Design and Disability Accommodations in Post-secondary Education*. University of Buffalo, NY

Freedman, J.E. (October 2018). *What can we learn from how university students talk to professors about disability-related accommodations?* Meeting of the New York State Education Department's Advisory Council on Post-secondary Education. New York, NY.

Freedman, J.E. (June 2018). *Universal Design on the Educational Landscape*. Conference of the New York State Disability Services Council. Thousand Islands, NY.

Freedman, J.E. (May 2016). *Disability Studies as a lens to understand disability in the classroom*. Soon Chun Hyang University, Asan, Chungnam, South Korea.

Freedman, J.E. (March 2016). *Understanding Attention Deficit Hyperactivity Disorder (ADHD): a disability studies perspective*. Seoul National University of Education, Seoul, South Korea.

Freedman, J.E. (October 2014). *Living with and without ADHD and LD* (Keynote Speaker) Disabled and Proud Conference. Syracuse University, Syracuse, NY.

FELLOWSHIPS AND GRANTS

Research and Creative Writing Grant Competition (\$1000) Syracuse University, School of Education, Syracuse, NY	May 2016
<ul style="list-style-type: none">Conducted research on inclusive education in South Korean teacher-education programs	
Department Travel Grant (Total of \$1600) Syracuse University, School of Education, Syracuse, NY	2014, 2015, 2016, 2017
Graduate Student Organization Travel Grant (\$300) Syracuse University, Graduate Student Organization, Syracuse, NY	2016
Disability Studies in Education Conference Grant (Total of \$900) Syracuse University, The Center on Human Policy, Syracuse, NY	2014, 2015
Himan Brown Funding (\$3000) Syracuse University, School of Education, Syracuse, NY	Winter 2014
<ul style="list-style-type: none">Used funds to participate in <i>Disability Access in Vietnam</i> Winter Program in Vietnam	
Warren/Spector Fellowship Syracuse University, Syracuse, NY	2014
<ul style="list-style-type: none">One-week professional-development seminar in Houston, TX and subsequent workshops in Syracuse, NY, that prepared future educators to teach about the Holocaust and genocide in their classrooms	

AWARDS

Phi Beta Delta Honor Society for International Scholars Alpha Sigma Chapter, Syracuse University, Syracuse, NY	April 2017
Special Education, Language, and Literacy Book Award The College of New Jersey, Ewing, NJ	December 2012
Cold Stone Creamery National Employee of the Year	November 2005

PROFESSIONAL AND COMMUNITY SERVICE

Manuscript Reviewer International Journal of Inclusive Education	2015-2016
Bank Street Occasional Paper Series	2016
SoJo Journal: Educational Foundations and Social Justice Education	2015
Proposal Reviewer AERA – Disability Studies in Education Special Interest Group	2016-Present

Syracuse University, Syracuse, NY

President, Beyond Compliance Coordinating Committee Spring 2015 – Spring 2017

- Designed trainings and collaborated with students, faculty, and staff to advocate for increased campus accessibility

Reviewer, Education Teacher Performance Assessment (edTPA) Spring 2014 – Spring 2016

Graduate Student Member, Tenure Review Committee, School of Education Spring 2016

**Bonner Center for Civic and Community Engagement,
The College of New Jersey, Ewing, NJ**

Community Scholar January 2009 – May 2011

- Performed 300 hours of community service per academic year, including tutoring and coordinating after-school programs
- Created and presented workshops on education and leadership at 2009 and 2010 *NJ AmeriCorps State Conference*

“The Community” of Lawrence Township, NJ

Co-Founder/President May 2008 – August 2011

- Founded a nonprofit organization dedicated to creating service projects for Lawrence Twp. community members
- Drafted and received a grant (\$1500) from the Princeton Area Community Foundation (PACF)
- Mobilized over 150 volunteers, resulting in more than 400 hours of community service

RELATED WORK EXPERIENCE

The Graduate School Program, Syracuse University, Syracuse, NY

Teaching Mentor Spring 2014 – May 2018

- Facilitated small-group instruction of new teaching assistants during week-long orientation
- Developed and facilitated workshops for university teaching assistants on using Universal Design for Learning and creating safe classroom communities

Urban Teacher Academy, The College of New Jersey, Ewing, NJ

Program Assistant July 2012, July 2013

- Worked full-time at a two-week program for high school students aspiring to become teachers
- Facilitated conversations between program participants and carried out daily administrative operations

Tutoring Center, The College of New Jersey, Ewing, NJ

Graduate Assistant – Supervisor of Math and Science Tutors August 2011 – May 2012

- Oversaw daily operations of Math and Science undergraduate tutoring
- Managed daily schedule and monitored client progress

Career and Community Studies, The College of New Jersey, Ewing NJ

Residential Mentor August 2009 – May 2011

- Resided with and mentored three students diagnosed with disabilities, including one student diagnosed with autism

- Taught students independent-living skills and strategies for adapting to different social environments

PROFESSIONAL AFFILIATIONS

- American Educational Research Association (AERA)
- Association for Higher Education and Disability (AHEAD)
- Council for Exceptional Children (CEC) – Teacher Education Division (TED)
- Society for Disability Studies (SDS)

REFERENCES

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School of Education, Syracuse University

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School of Education, Syracuse University