

Pushing limits in higher education: inclusion services' perspectives on supporting students with learning disabilities in Spanish universities

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ABSTRACT

The unprecedented growth of universities in recent years has meant that there are more students with learning disabilities attending courses. Consequently, universities have had to adapt, improve and create new resources to ensure greater inclusivity. These resources, their design, and development are managed by inclusion support services, aiming to the full inclusion of students with disabilities and the promotion of community awareness. This article aims to shed light on the current role of inclusion services in supporting students with learning disabilities, and the link these services have with the different university stakeholders, using a thematic analysis from the experiences of this services staff in eight Spanish universities. The results show that: i) there is no uniformity in the support services; and ii) more resources and work are needed to ensure increased inclusion and awareness. The discussion and conclusions drawn highlight the trends, challenges, and opportunities for universities improving their inclusion.

KEYWORDS

Learning disabilities
inclusion support services
higher education
university
inclusive education

Introduction

With the global massification of higher education, the number of students with disabilities is increasing year on year (McNicholl, Casey, Desmond, & Gallagher, 2021). In the case of Spanish Universities, the number of students with disabilities enrolled in the 2020/2021 course grew by 1,033; a rise of 4.5% from the 22,818 students with disabilities enrolled in the previous year (Universia Foundation, 2020). As numbers increase, so too does the research on how support services can help these students succeed. In this context, some institutions assert that although there are regulations and strategic plans at the national level, their implementation at the tactical level is not controlled, and depend on the degree of involvement of the pertinent authorities (i.e., the rectorship and education ministries). In this regard, Spanish universities are required by law to proactively provide adequate support and

counselling services for students with specific learning needs derived from disability (Royal Decree 1393/2007). As a result, most Spanish public universities currently have disability support offices and mental health and wellbeing advisers.

Disability is a very heterogeneous phenomenon, a complex reality that includes a diverse array of phenomena, which can be analysed from the prism of different models: medical or epidemiological (limitations caused by medical illness or disease), social (social barriers and discrimination), relative (measures and adjustments for gap reducing), and cultural minority model (recognition of cultural diversity) (Hedlund, 2009). The definition of the United Nations Convention on the Rights of Persons with Disabilities includes 'those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others' (UNCRPD, 2006).

Students challenged with learning disabilities (LD) in the higher education sector are generally of average or above average intelligence (Stage & Milne, 1996), but there often seems to be a discrepancy between an individual's potential and their actual academic achievement. For this reason, LD (an umbrella term for several neurological conditions) are referred to as hidden disabilities: the disabilities presented by a person that are not easily observed, due to the fact that there are no physical indicators of the disability, and which, as a result, may be unrecognised (Couzens et al., 2015).

The social model of disability is adopted as a lens for the study, proposed by Oliver (1983). As opposed to the prevailing medical model, the social model suggests that people are not disabled by their impairments or differences per se, but rather at least in part by societal barriers that prevent them from participating fully in community life (Oliver, 2013). Therefore, the social model of disability states that disability is a problem created by the social environment and solving the problem requires assuming the responsibility of society to modify this environment by identifying and eradicating disabling barriers. Accordingly, we adopt the position that disability is a consequence of a dynamic interaction between, on one hand, one individual's impairments and, on the other, the environment and attitudes towards them. In this sense, the social model (Oliver, 1990) is introduced in this research in a broader social and environmental context that has to incorporate issues such as disabling barriers, availability of aids and personal assistance, among others to achieve the design for all or universal design in services (e.g., higher educational services). Understood this way, we suggest that universities, as a social construction (a notion that a certain group of people have developed or built in order to centre their beliefs and behaviours around it), have the means, through support services, to mitigate disability-related barriers caused by impairment and environment.

Although significant progress has been made in university support services to address the needs of students with LD, various studies have reported that this is not enough to ensure university success (Clouder et al., 2020). Evidence from 27 European countries indicates that the proportion of students with some type of disability who attain a higher education level, aged 30–34, is 30%, compared to 44% for those without a disability (Eurostat, 2019). In Spain, the problem similarly lies in presence on campus: the higher the university stage, the lower the presence of students with LD. Students with a disability account for 1.8% of the total in undergraduate studies, 1.2% in postgraduate studies and 0.7% in doctorates (Universia Foundation, 2018). Therefore, more developments are still necessary to achieve a more inclusive education.

Research on LD and higher education has highlighted the importance of better understanding contextual processes and support services within university settings (Madaus & Shaw, 2004). In order to better understand the effectiveness of support services, the process should be viewed from the ground up, by taking into account the views and opinions of the different

university stakeholders. While a growing body of research has focused on the perspectives of students (Rodríguez Herrero, Izuzquiza Gasset, & Cabrera Garcia, 2020; Osborne, 2019; Shpigelman, Mor, Sachs, & Schreuer, 2022) and academic members (Lipka, Khouri, & Shecter-Lerner, 2020), see for example (Osborne, 2019; Shpigelman, Mor, Sachs, & Schreuer, 2022). However, only a few studies in the international literature have examined what support services staff think about their role and the university support system in relation to support of students with LDs. Furthermore, Lopez-Gavira, Moriña, and Morgado (2021) considered they developed an innovative research including the perspective of support services staff given that most of the publications in the field have focused only on analysing the perspective of the students with LDs.

Support services staff play an important role, because they are a critical point of contact for students with LD on campus, and as such, an essential element in the effectiveness of the support process (Koca-Atabey, 2017). It is therefore opportune to better understand this role and draw on the perspectives and experiences of support services staff regarding inclusive practices, and their collaboration with students, academics and staff across campus to ensure a university that is fully inclusive (McCarthy, Quirke, & Treanor, 2018).

The objective of this article is to explore the role of support services staff in attending to students with LD in eight Spanish universities, and their relationship with the different stakeholders of the higher education system (management, administrative staff, other areas of support, academic members and students). In contrast to most of the published work in the field, which has mainly focused on the viewpoints of students or academic members, this study analyses the perspective of the support services staff addressing students with LD. Additionally, contrary to the existing literature, which mostly focuses on the functioning and the challenges of support services partially considering the relationship with the teaching staff mostly (e.g., Lopez-Gavira, Moriña, & Morgado, 2021), this study also focuses on how the different stakeholders linked to support services (university government, teaching staff, students, among others) impact the correct development of their functions and can contribute to inclusion.

The remainder of this article is as follows. Section 2 provides an overview of the theoretical background of LD in the higher education context and the academic resources (i.e., support service office). Section 3 describes the research design and methodology used. Section 4 explores the functioning of the support services and their relationship with other university stakeholders, not only by examining the support processes and participants involved, but also considering the views and opinions of the support services staff. Finally, Section 5 concludes by identifying the challenges, gaps and trends derived from the results, which contribute to the inclusion of students with LD at the university level.

Learning disabilities at higher education. An overview of the academic resources

Due to a lack of consensus regarding the nature and characteristics of LD, a universal definition of the term has been proven difficult to formulate (Grünke & Morrison, 2016). In Spain, the concept of LD is officially applied in a broad sense and is equivalent in practice to specific education needs. A student has specific education needs if they require educational attention other than ordinary due to special education needs (physical, sensory, or psychical disabilities; or severe behaviour, communication, and language disorders) or other reasons, including developmental delay, developmental language or communication disorders, attention or learning disorders, serious lack of knowledge of the language of learning, being in a situation of social or educational vulnerability, high educational abilities, late access into the education system, or personal conditions (Ley Orgánica, 2020).

The side effects can be very profound and last into adulthood, and can affect the individual, their family and/or society (including here their admission to college, and their academic and career success). The primary consequences of poor academic performance manifest as a number of differences detectable by family, peers and teachers, and can represent a real stigma. The secondary consequences go further and range from self-esteem and relationship problems, through school dropout, to anxiety, behaviour problems and lack of integration in society (Firat and Bildiren, 2021).

To ensure the inclusion of such a significant part of society at the university level (30% of the European higher education students according to Eurostat, 2021/2019), policy-makers, education systems and other stakeholders in the European Union are making efforts to create the university support plans and services needed for students with LD to reach their full potential and succeed (United Nations Educational, Scientific and Cultural Organization UNESCO, 2020). Student services are specifically designed to satisfy students' emotional, academic, and social requirements, playing a key role in good academic performance, acting as a link between the institution and the students, and influencing educational outcomes that indirectly affect retention and even graduation rates (Couzens et al., 2015). These can be classified as academic (career designing services, academic student information, etc.) and non-academic services (IT facilities, industrial links, etc). In many institutions, the latter includes the services for students with LD (Sajiene & Tamuliene, 2012).

Services for students with LD are not independent from other student services, cannot be isolated from other departments, and should maintain permanent contact not only among departments/services within the same institution (e.g., legal or financial department) but with student supports services from outside, to better address the physical and social barriers faced by the students (Harbour & Madaus, 2011). In this regard, Graham (2013, pp. 40–41) coined the term 'pedagogical partnership' to refer to the support of professional staff working in a collaborative way to attend to students with LD and learn about their needs. Along the same line, Korbel, Lucia, Wenzel, and Anderson (2011) affirm that barriers can be removed by conducting workshops on a diversity of disability-related topics for different units, which also serve to create cooperative partnerships, and by promoting collaboration within units across campus.

There is a variety of professional support staff at universities to attend to students with LD: disability advisors, mental health advisors, special educational needs coordinators, learner support and study skills support staff such as study assistants and non-medical helpers (Taylor, 2005). These staff figures are conceived as support for developing initiatives within two main approaches: interventions and accommodations. Interventions enable students to build higher academic skills by changing the method of instruction or content, for instance through compensatory or remedial strategies, tutors, and courses (DuPaul et al., 2017). Where the support service acts as a driver of change, serves as a connector between the parties (i.e., tutor-students, professor-institution), analyses the student's needs, and distributes the resources that best meet them. Accommodations, in turn, focus on accessing the learning environment and creating standardised protocols to provide these students an equal opportunity to access academic content and assessments and succeed despite their disabilities. Students with LD may also need support services to accommodate their needs, and enable them to fully participate in higher education on an equal basis with others (Hadley, 2007).

Efforts to support students with LD have also reached the academic world. Figure 1 shows the number of publications on the Web of Science in recent years with 'learning disabilities' or 'specific learning disorders' or 'dyslexia' or 'ADHD' or 'dyscalculia' or 'dysgraphia' or 'dyspraxia' and 'higher education' in the title, abstract, and/or keywords, which are the most common LD according to the American Psychiatric Association (APA American Psychiatric

Association, 2013). Results show a general increasing trend, specially in the last 10 years. However, there is still room for improvement for research regarding dyscalculia, dysgraphia, and dyspraxia. The research areas related to LD in a higher education context are: education/educational research (32%), psychology (22%), rehabilitation (20%), neurosciences/neurology (8%), paediatrics (6%), psychiatry (6%), and others (7%). The main areas in which academic studies are framed respond to the different understanding of disability or conceptual frameworks. Thus, there are areas that are related to the ‘Medical or epidemiological model’ (psychology, neurosciences/neurology, paediatrics or psychiatry); those related to ‘social models’ or cultural minority models (education/educational research); and the one allied to the relative model (rehabilitation).

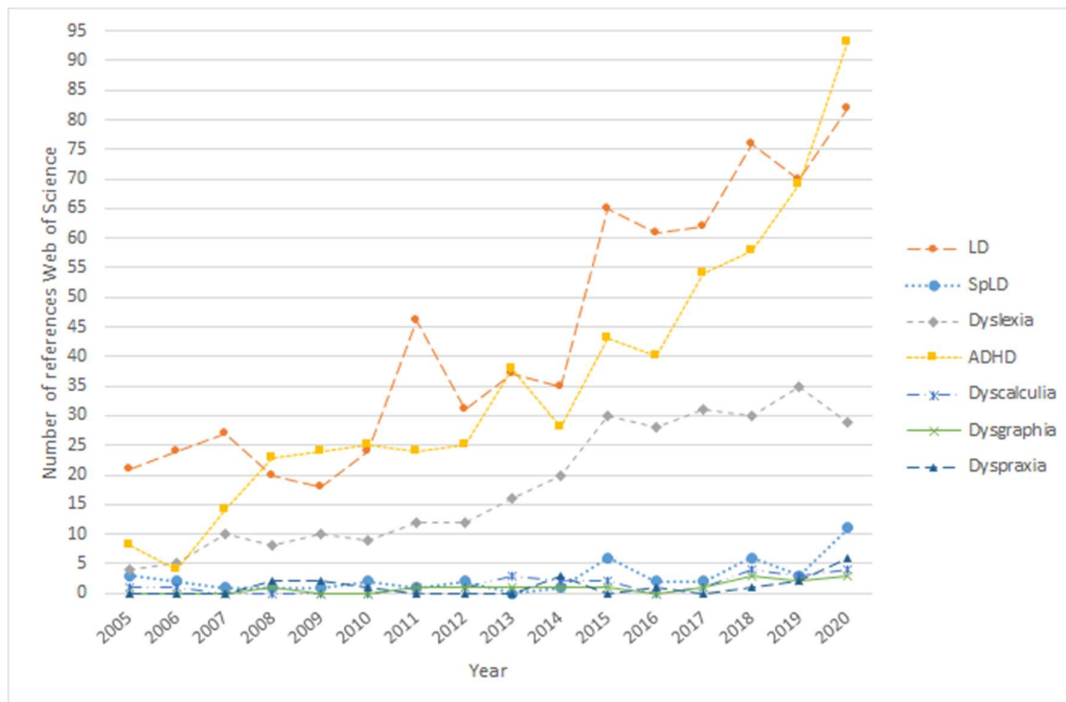


Figure 2 .Yearly evolution of the number of publications in Web of Science containing the terms ‘LD’, ‘SpLD’, ‘Dyslexia’, ‘AHDH’, ‘dyscalculia’, ‘dysgraphia’ or ‘dyspraxia’.

Research design and methodology

Research design

The thematic analysis (TA) method was used in order to examine the work experiences of support services staff, and their opinions of their role within the university support system. We also explored the staff’s experiences of their relationships with students, academic members, administrators and management during their daily work. TA makes possible to identify similarities, common traits or trends by the way in which a topic is treated (in written or spoken) by a group of individuals. In this way, TA permits the researcher to make sense from the collective point of view of those individual shared meanings and experiences (Clarke, Braun, & Hayfield, 2015).

Semi-structured interviews were conducted with each participant in relation to different issues in the service process: the individual’s job role and responsibilities, actions carried out by the service, procedures that students need to fulfil to access inclusion support services, the

level of management support available, mentoring and empowerment programmes, awareness-raising actions, barriers encountered to assist students with LD, and proposed solutions to improve the service. The interviews lasted for 45–60 minutes, were recorded using Google Meet (videoconference platform that facilitates the conduction and recording of interviews), and transcribed verbatim. All participants gave their informed consent to take part in the research.

Participants

The participants of this study were inclusion staff members from eight Spanish universities. There were eight participants in the study, seven of whom were women and one a man. We assigned an identifying number to protect the anonymity of participants and confidentiality of information (i.e., Participant 1). The specific universities were selected for the study through heterogeneous purposive sampling. According to Creswell and Clark (2011), purposive sampling can be defined as purposely selecting individuals that are specially knowledgeable about or experienced with the phenomenon of interest. Heterogeneity of the sample was highlighted in terms of significantly different location, size, reputation, budget, education and campus facilities.

Four of the participants graduated in Psychology, Pedagogy or the Neurosciences, and the rest graduated in other areas. Most had taken complementary training courses regarding support for disability, and three had developed research in the field. The mean work experience in inclusion support services of participants was approximately nine years.

Context of inclusion services at Spanish universities

Inclusion services at Spanish universities are characterised by their considerable heterogeneity (see, for example, Moriña Díez, López, & Molina, 2015), which affects the quality and type of services provided to students with LD. In our study, the participant universities varied in name, the organisational structure in which they were embedded, the number of staff members, the objectives and the services offered, and the specific protocols developed. The name of the support service differed across universities. In decreasing order of frequency, the name contains the term ‘disability’ (3 universities), ‘inclusion’ (2), ‘integration’ (1), ‘diversity’ (1), and ‘social action’ (1). Similarly, the support service was not embedded in the same organisational area of the university. In some universities, it was linked to the Students’ Vice Rector, in others, to the Student Service Department, and, in one institution to the Innovation and Community Cabinet. Most of the inclusion support staff consisted of a single professional, except for three universities, which employed 3, 6 and 10 professionals, respectively. The majority of the universities explicitly guaranteed the equality of opportunities (7 universities) and accessibility to higher education (5 universities). Two universities described their objectives as no discrimination and integration. All the studied universities are governed by the same European and state legal framework, h. However, each university has developed its own policies and programmes for implementing their support services. The inclusion services mainly serve students and academic staff with disabilities. However, the university community in general can also be considered a beneficiary of the service, as any member of the university can request information, advice or receive training on disability. The number of support services users at the participant universities ranged from a dozen to a thousand.

Categories of analysis

Following Miles and Huberman (1994), the data analysis was structured based on the number of comparative categories of analysis that were inducted using MAXQDA.10 software that codifies, transcribes and supports the analysis of interviews (e.g., the software finds connections in data) systematically.

Results of the analysis

The participants' responses can be organised into three main categories related to: i) their relationship with the administration and government of the university; ii) their interactions with teachers and the resources that can be provided to them and iii) their experiences with students and programmes designed. Figure 1 summarises the main categories, subordinate themes, and its keywords and issues.

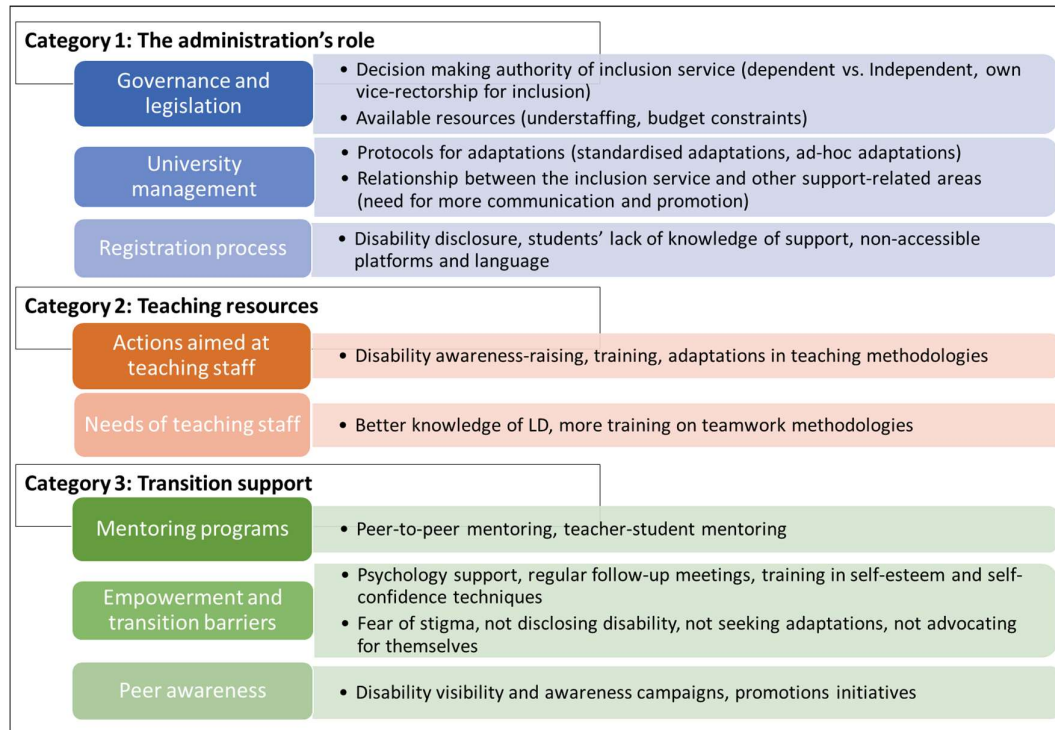


Figure 1. Categories, subordinate themes, keywords and issues.

Category 1: The administration's role

Governance and legislation

One of the main perceptions of the participants around their experience in supporting students with LD is that their available resources, and, as a result, the quality of their service, directly depends on their level of independence in decision-making and the will and commitment to inclusion of the university governing bodies.

'When the governing bodies are committed to inclusion, the service improves. Recently, a new Vice-Rector has been appointed who is highly involved in the development of the inclusion services, and this incorporation has helped improve our service significantly' (Participant 3). (Participant 3).

In this sense, Participants 6, and 7, and 8 described an independent inclusion service at their universities. Specifically, Participant 6 described an independent department for psychopedagogy, inclusion, and personalised attention for the entire university community. Going a step further, Participants 7 and 8 have both created a vice-rectorship for ensuring proper compliance with the normative framework and the establishment of new quality standards from a social perspective.

The available resources (in economical and personnel terms) are not equal in all participating universities. The participants (mainly those with a higher volume of students – with and without disabilities) suggested a feeling of overwhelming pressure due to lack of resources. *'We feel overwhelmed, we are a small office, but the number of students we receive is increasing, we need more staff to cope with the growing demand' (Participant 5).*

'Every time we need to acquire specific expensive devices (for example, hearing aids, special screens, etc.), we have to turn to the rectorship. This makes our work difficult, we need our own resources and budget' (Participant 4).

'The service is clearly undersized. The initial report is prioritised and then the follow-up is very difficult to do. Greater coordination with academic staff is necessary in order to make adaptations as much personalised as possible' (Participant 2).

University management

One of the common perspectives on support services apparent in the participants' views is the need for standardised protocols for adaptations. Some institutions have standardised protocols (agreed with the university authorities and experts), and others do not have protocols and the adaptations rely on the awareness and experience of the advisor assigned to each student.

'There is a standardised protocol for each disorder/disability, designed jointly with university stakeholders (psychologists, psychopedagogues, social workers, university authorities) and previous experience with students with similar profiles. Each consultant/team thus knows what must be done at all times and all students have the same available resources. This standardisation permits us to ensure the principles of equality and inclusion' (Participant 6).

'Lack of standardisation, especially among international students, is a problem. For instance, extra time for exams may vary greatly depending on the university of origin. Criteria among universities should be standardised' (Participant 1).

There are two types of institution without protocols: i) those that advocate a model free of standardisation, which allows ad-hoc adaptations to be designed according to medical, advisor experience, and awareness criteria (University 8), and ii) those that, although not having protocols (or one only for those more common SpLDs, such as dyslexia and ADHD), consider it essential to avoid subjectivity and to facilitate the implementation of standardised resources (Participants 6 and 7).

Most participants expressed that there is room for improvement in the relationship between the inclusion support services and the other support related areas, specifically in terms of coordination and communication.

'Inclusion has always been a minor issue at the university management level, not because it is not considered important, but because it is still very incipient. The relationship with other support related areas is good but we are trying to improve it with many meetings and communication efforts' (Participant 3).

'In order to improve communication it is necessary to enhance the promotion of the service inside and outside the university' (Participant 2).

'The student delegation also participates in these inclusion issues, for example, in the development of the protocol for acute and chronic diseases for students' (Participant 1).

Registration process

When students arrive at university they are legally adults, and, therefore, consent is required in order to access their data, study their profiles and facilitate learning adaptations if

necessary. This consent is given at the time of enrolment, and students must decide whether to give their consent for the inclusion services of the university to study their case.

According to some participants, there are two problems in this process: a lack of knowledge of the support available at the university stage, and/or problems in the design of the platforms. *'The design of the registration form is not user-friendly, many students are unaware of the options they have and do not give their consent, not because they do not want to, but because they do not know that they should give it' (Participant 4).*

'All the information is available on the website. However, the format is not attractive to students and is not easily accessible. Consequently, the students are unaware of the protocols and resources available in case they need them. Consent is therefore perceived more as an intromission than as a right. Further, the students have told us the information needs to be presented in less formal language, so they can easily understand the contents' (Participant 1).

'The most important barrier is communication. At the end of the day, although it is reported upon arrival, it has not been formally communicated through the different channels: web, intranet, and newsletter, among others. We are working on this communication plan so that before the students arrive, as well as during their stay with us, they know what to expect' (Participant 7).

'Frequently we have found out that students learn about inclusion services only after they express their needs to a teacher who redirected them to our office. We need to improve communication so students are able to find us through as many channels as possible' (Participant 2).

Category 2: Teaching resources: actions aimed at teaching staff and needs of teaching staff

All participants expressed that the relationships they have with the teaching staff (in terms of communication channels, resources, and training) can make the difference between the success or failure of the actions carried out; that is, whether the learning, integration, and equality objectives are achieved. The most frequent activity aimed at teachers tends to be awareness-raising (Participants 1, 6, 7, and 8), however, some also implement training, both at the individual level (i.e., about specific learning disabilities and their effects) and the system level (i.e., providing training on universal learning design) (Participants 1, 6 and 7).

'We provide the teaching staff constant support in order to facilitate the proper performance of their tasks and the classroom environment management. We offer an integral service that brings together the diagnosis and characteristics of the disability, the standardised adaptations to be implemented, possible changes in teaching methodologies, and available resources' (Participant 6).

'The interrelation with the teaching staff is what we are missing, so we can design the adaptations in the most personalised way possible to each case' (Participant 3).

'The inclusion service serves as a reference where the whole university community can get help in case it is needed. Teaching staff can thus come to us to ask for clarification, help, and resources so that they know how to address students with disabilities in class. In addition, specific training courses are prepared on the adaptation of methodologies, if necessary. In fact, to facilitate feedback, a reference professor has been designated for each college, who serves as a link between our service and the rest of the professors. This new figure has training in methodologies (especially for those LD with higher prevalence), knows the resources of the service, and participates in the coordination and design of activities. Over time, we have perceived that increasing help between peers is more efficient' (Participant 7).

Although the universities studied provide awareness-raising and training for academic staff, the participants pointed out that they are not sufficiently trained and need better knowledge of LD.

'Coordination can be greatly improved, this is the reason behind we have been working on drafting an action protocol that can turn the situation over' (Participant 8).

Participant 1 identified the challenge of teamwork, since some students with LD work more individually and find teamwork difficult:

'It is important to provide academics and students with techniques to better work in teams, and to provide training to academic staff in order to adapt their teaching to the needs of students with LD. We found that a way to improve the involvement of academics is to ask for their doubts and questions, and deal with them during the training course afterwards. This format prompts academics participation and involvement in their training' (Participant 1).

All the participants felt that it is necessary to improve support regarding the use of technologies for attending virtual classes and taking online exams.

Category 3: Transition support

Mentoring programs

The interviews revealed that participants are conscious that the transition to university is difficult and see mentoring programmes as essential to facilitate this transition (Participants 1 and 6). Mentors are volunteer students (with or without disabilities) from higher courses, who (in a peer-to-peer relationship), accompany and guide these new students.

'The transition from high school to higher education can be overwhelming for anyone, but especially for those students with a disability. We have a mentoring program aimed at students with sensory disabilities, because it is more difficult for them to adapt to the university, since they have difficulties in relating and communicating, so in that way we intend to make the transition much easier for them' (Participant 2).

However, as highlighted by Participant 1, students may not be willing to disclose their disability. Others, such as Participants 5 and 8, advocate teacher-student mentoring programmes in this phase of their education. The academic mentor is a teacher who will accompany a student who requests it in their integration process. The academic mentor will act as a link between their teachers and the inclusion service.

'Students with LD are initially wary of disclosing their learning disabilities due to perceived stigma, and do not seek these mentoring services. It is only after the first exams that they start considering participating in such services' (Participant 5).

Empowerment and transition barriers

One result that was apparent from the participant experiences is that, after reaching the support office, many students with LD speak their mind and let the support services staff know that they consider their disability as an impossible difficulty to overcome, which prevents them from keeping up with their classmates. Additionally, according to the participants, students with disabilities continue to encounter barriers in higher education, but with adequate inclusion support services, the university can instigate changes to remove barriers, and help students with disabilities to overcome their challenges and accept and advocate for themselves, and unlock their full potential. The participating Universities 1, 2, 3, 4, 6, 7 and 8, offer a free psychology service to their students throughout the year. This service is in close contact with the inclusion service and their teachers. University 2 has designed a mentoring programme for transition barriers:

'Currently, we have a mentoring program called 'Inclusion Meetup'. It is just for students with autism spectrum, since they struggle communicating, and thus the designed intervention facilitates the transition process. Considering the results, we believe it would be beneficial to replicate this experience for those students with other LDs' (Participant 2).

In order to reinforce monitoring, regular meetings are scheduled with the service. Participant 6 points out that 'the periodicity of these meetings is agreed between the student and what the experts consider necessary. The most frequent are held every 15 days and the least every three months, coinciding with more stressful periods'. Others, such as Participant 4, explain that the design of these follow-up sessions is based on the high-school service model, 'in this way, we expect the students to feel the same degree of support and availability in their university stage'.

Finally, Universities 1 and 6 carry out specific training in empowerment, self-esteem, and self-confidence techniques. As Participant 1 states:

'It's the students themselves who are responsible for communicating their needs, but, at the same time, they often struggle with low self-esteem and self-perception, so we want to empower them to seek support services so their needs can be adequately addressed'. Participant 6 added that 'all these actions produce a call effect. That is, those universities with better services and greater resources are more likely to receive a larger number of students with disabilities. This shows that students with disabilities are concerned about their performance and are willing to enrol at those universities which they consider will provide more resources and better options for their future' (Participant 1).

Peer awareness

One result that was striking from the participants' experiences is that despite the increasing numbers of students with LD accessing to higher education and the increase of support services, many students are not aware of disabilities and their impact.

'According to our experience from seminars, many students are unaware of disabilities, how to behave with a disabled colleague, or how to work with them' (Participant 2).

'Students with LD are generally supported by their non-disabled peers. Similarly, the Student Delegation, which acts as the student voice in the governing organs of the university, is especially committed to promoting and defending the rights of students with LD' (Participant 1).

In order to create the visibility of disability and sensitise all students about inclusion, Universities 2, 6, 7, and 8 have implemented education programmes.

'It is very important that we can all place them in the shoes of a person with disabilities, and that we understand that a particular behaviour may not be insidious, but caused by a disability. We hope that these awareness and training activities will favour inclusion, so everybody can feel more integrated' (Participant 7).

'Inclusion of students with disabilities will enrich student lives, allow them to learn about other life experiences, facilitate the implementation of adaptations (which will be seen not as an advantage, but rather as a right), and will help them to learn the principles of equality' (Participant 4).

'The role of advisors and the attitude of the teaching staff is key, although it is true that the strength of social action activities on campus has generated a culture of understanding in the face of differences in general and on a regular basis' (Participant 2).

Trends, challenges, gaps, and conclusions

This work examines the role of the inclusion services at universities from a double perspective: i) an institutional perspective, by analysing how inclusion efforts are articulated and implemented in the university context, and ii) a personal perspective, by providing the opinion of the support services managers on the operation of the service in response to LD. Although interviewees did not expressly refer to ‘universal design’, their perspectives lead us to think that their objectives are aligned with those of Universal Design for Learning (UDL). The UDL framework values diversity and considers a curriculum that eliminates or reduces barriers as the main tool to achieve it. Thus, each area of the curriculum should furnish multiple, varied, and flexible options for representation, expression, and engagement. In fact, most universities currently tend to offer adjustments for students with an LD. While the proposed changes mean that all students should benefit from more inclusive teaching approaches (including those who do not have, or have not disclosed an LD), they also pose new challenges (from different levels; legislative, university management and services, and academic) to fully identify and support the learning needs of students with LD. The main conclusions obtained in each analysis category are described below.

Governance and legislation

The results of this study reveal that although strategic plans have been developed for the provision of inclusion services at universities, they have not been fully implemented at the operational level. There is a lack of support resources and their implementation often depends on the commitment to inclusion of the university governing bodies. As identified in the literature, the change in social models, gender roles, and the integration of society as a collective entity in which we all have a place, has meant that there is also a greater awareness of disability and its effect on the lives of all those who live with it (Brussino, 2020). This new collective consciousness has also been transferred to the agendas of our government bodies regarding matters of social exclusion (Desa, 2016). The plans are limited at the strategic level, however, with very few initiatives and resources reaching the operational level, which is where they would have the greatest effect. All government bodies, from international and national committees, are therefore challenged to make an effort to implement projects, design protocols and dedicate specific resources to solving this problem.

University management

A common perspective shared by the participants is that standardisations for adaptations and a better coordination and communication with other support areas is key for equality and inclusion. Our results found a variety of approaches to the implementation of protocols for support services, ranging from standardised protocols for each type of LD, designed alongside university management and other stakeholders, to the absence of protocols that need to be designed ad hoc. Most of the universities participating in this study have social care/inclusion and psychology services. As mentioned, the Spanish legislative framework establishes that each university must create a support service for the university community with disabilities (academic figures, administrative and service personnel, and the student body are considered here). Once students have entered university, however, it is they who must report their LD to the support services promoted by the universities and classify themselves as ‘a person with disabilities’ in an unfamiliar environment (Lackaye & Margalit, 2006). This means that these students, who have had to struggle throughout their academic lives with socio-emotional implications, must continue to do so in their adulthood if they want to access a system that improves their conditions. All this leads us to think that although the legislative intention is correct, its design and implementation are not so from an inclusive point of view. In order to improve these systems and ensure that they foster change, it is therefore necessary to include the main users to whom they are addressed in their design (i.e., people with disabilities). Claeys-Kulik, Jørgensen, and Stöber (2019) points out that it is the support of

an institutional government that allows experiences and practices from bottom-up initiatives to become policies, and leads to cultural and structural changes.

Category 1: Registration process. As suggested by the participants of this study, there are two main challenges faced by students with LD: a lack of knowledge about the existing support services and protocols available, and barriers with registration platforms when designers fail to convey the information in an accessible way. Authorities, alongside the university government, must therefore remove barriers to student transitions in order to achieve inclusion. Common requirements include the adaptation of the processes and protocols for admission to university.

Teaching resources

One of the main needs expressed by the participants is more training for teaching staff. Although the inclusion support services of this study provide awareness-raising and training for academic staff, the support services managers of these offices explicitly stated that they are not sufficiently trained, and need better knowledge and education in order to better adapt to the education needs of students with LD. This is in line with previous studies, which have concluded that the involvement and awareness of teachers is essential in order to achieve equity and a good inclusive climate in classes, so much so that it is necessary to design and implement training programmes to: i) detect academic deficiencies (Marquez and Melero-Aguilar, 2021), and ii) design more inclusive academic methodologies for all student profiles (Moriña, 2017). In general, the participant universities stated that students with LD are wary of disclosing and adopting the identity of a disability, and wish to be treated equally alongside their non-disabled peers (Grimes, Southgate, Scevak, & Buchanan, 2019). Teachers who are sensitised and capable of designing inclusive methodologies can help ensure that stressful situations are avoided among students, some of whom might see current tools for students with disabilities as privileges (e.g., extra time for assessment).

Mentoring programs

One main perspective arising from the participants' experience is that mentoring programmes enrich the university experience of their diverse student body. This conclusion has also been reached in works focusing on student perspectives (e.g., Kriši & Nagar, 2021), which concluded that students who are mentored by teachers or guidance counsellors report more positive outcomes than their non-mentored peers. We therefore believe that promoting reception programmes, the mentoring and accompaniment of senior students, informative workshops for all students (whether they have diagnosed disabilities or not), and full tutoring programs, would make the transition much smoother and help the change of mentality.

Empowerment

As evidenced in the results of this study, one reason students with LD do not request support services is due to negative perceptions of self-identity and low self-esteem. This outcome has also been previously highlighted by many authors (Baik, Larcombe, & Brooker, 2019) who point out that students with LD often have an incorrect perception of their abilities and capacity despite their academic achievements, as well as low self-esteem. It is therefore necessary to promote empowerment actions that reverse stigmas and improve self-esteem throughout academic life, including their university stage: workshops, more dynamic teaching methodologies, and coaching and psychology services.

Peer awareness

Finally, it is necessary to emphasise the importance of relationships with fellow students. In agreement with Baik, Larcombe, and Brooker (2019), we believe that acceptance by fellow

students is critical for young adults. McManmon (2011) found that regular tutorial sessions and study groups usually benefit students with LD. It is thus necessary to make all students aware of the conditions and implications of LD, and the opportunities, and institutional resources available, so that they understand that there are no privileges, that good work dynamics can be generated, and inclusion and companionship can be increased. This awareness can also help to strengthen ties and encourage working study teams.

In conclusion, inclusion support services play an important role connecting stakeholders with students with LD, combining top-down and bottom-up approaches. By doing so, inclusion support services provide stakeholders with access to information on a timely and regular basis, and become catalysts for developing further services that benefit students with LD. In the particular Spanish case, inclusion support services present a heterogeneous situation (different organisational dependence, dissimilar resources, non-uniform names, etc.) where the availability of resources is not equitable, and mainly depends on political motivations (i.e., the degree of involvement of the pertinent authorities). Most of our results are aligned with those presented in the previous literature, that is: i) empowerment and monitoring services have been described as best practices; ii) it is necessary to increase internal and external coordination and communication, and to enhance the registration process; and iii) learning resources and coordination are the basics to ensure the principles of equality and inclusion in higher education.

From a practical perspective, although the legislative intention is correct, its design and implementation are not thought from an inclusive point of view but from far behind. To improve these systems and make them fosters of change, it is necessary to include in their design the main users to whom they are going to be addressed (i.e., people with disabilities). To quote an example, standardising processes with students with LDs and normalising these situations (working along with high-school institutions) would mean a cultural transformation to favour equality and improve future opportunities for these students. In addition, promoting reception programmes, mentoring and accompaniment of senior students, informative workshops for all students (whether they have diagnosed difficulties or not), and full tutoring programs, would make the transition much smoother and help the change of mentality. Along with this line, it is necessary to promote throughout their academic life, including their university stage, empowerment actions that reverse stigmas and improve their self-esteem: workshops, more dynamic teaching methodologies, and coaching and psychology services. Lastly, the involvement and awareness of teachers are essential to achieve equity and a good climate in the classes. With the former, it will be possible to detect those students who have LD and who have not been diagnosed or who have not followed the institutional paths and for fear of stigma, have not admitted their difficulties. In addition, with teachers who are sensitised and capable of designing inclusive methodologies (for example, designing classes based on games or on the flip-classroom methodology), stressful situations can be avoided among students, who would see some current help tools for students with difficulties as privileges (i.e., the extra time in the assessment).

Finally, this research is limited due to difficulties related to its generalisation, as it is based on a sample of eight cases. However, this is an overlooked research area, and further investigations (i.e., involving other agents, such as psychologist service) are needed to better understand it. Further research should also be carried out to propose standardised protocols to ensure inclusion services at higher education.

Disclosure statement

No potential conflict of interest was reported by the authors.

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