Inclusive Education and Disabled Students’ Genuine Right to British Higher Education

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Abstract: Access to general education is perceived to be a positional good and the passport to better paid employment opportunities (EHRC, 2010). Yet, more than ten years on from the adoption of the UN Convention on the Rights of Persons with Disabilities (UNCRPD), having an equal opportunity to participate in an inclusive education environment remains an unreachable dream for many disabled people. Mainstream education can therefore prove to be a disabling context as well as being enabling for different groups of learners with certain minority characteristics (Riddell, Tinklin, & Wilson, 2005). Drawing on the voices and experiences of a group of disabled international students within a British-specific context, in this article I assess the inclusiveness of university practices, examining the level to which students feel included in university life. The intersectionality of disabled international students’ identities can have a negative impact on their opportunities to access and participate on an equal footing in the university system. The discussion of discriminatory barriers to their involvement in university facilities as a right to full membership to the student body, and its effects on the quality of the education received, will be significant to this article. In conclusion, I will explain that as creative solutions inclusive education practices only require flexible thinking and can transform societal attitudes as well as equalising all students’ experiences.

Keywords: Inclusive education, disabled/international students, HE experiences, access, participation

Introduction

Globally participation in higher education (HE) is coupled with improved life chances; possession of a university qualification can lead to higher paid professions and job satisfaction (Riddell, Tinklin & Wilson, 2005). An unequal
start in life, brought about by lower average levels of education, conversely, forces many disadvantaged young people to a life of poverty, reinforcing their everyday marginalisation. The exclusionary selection procedures underpinning most conventional educational systems, including “innate” ability and class membership, have largely created and reinforced these inequalities (Ball, Davies, David, & Reay, 2002). Traditionally, not all students with specific biological and cultural characteristics have been encouraged to participate in mainstream higher education institutions (HEIs), the assumption being that universities are generally inaccessible to disabled students, but are suitable for a marginal group of financially elite students (Riddell, et al., 2005). The failure to educate disabled individuals often results in many people not attaining the rewards and experiences of an academic life and, more significantly, lacking the personal, social and financial empowerment gained from the relevant qualifications (Fuller, Bradley, & Healey, 2004).

To be able to exercise the same level of choice and control, and feel included in mainstream society, it is therefore fundamental to recognise and respect disabled people’s right to access and participation in education. To facilitate this, in 1994 in Salamanca, Spain, the representatives of 92 governments and 25 international organisations met to further the objective of “Education for All” by considering the necessary shift in policy and practice to promote the principle of inclusive education (Kiuppis, 2013), namely enabling schools to accommodate all children, specifically those with special educational needs (Right to Education Project, 2015). The Salamanca framework placed the development of local mainstream schools at the heart of the paradigm shift to support the participation and learning of students with an increasingly diverse range of backgrounds instead of making cursory attempts to integrate “non-traditional” students into the existing arrangements (Ainscow, 2005).

Following the Salamanca statement, in 2006, Article 24 of the UNCRPD was ratified to protect disabled people’s right to education. This article not only states that disabled individuals should not be discriminated against but it also proclaims their right to inclusive education as an equal opportunity (de Beco, 2014).

That being said, the impact of this legislation has not yet fulfilled its potential. Over a decade on from the ratification of Article 24, equal access and participation in an inclusive education environment remains an unreachable dream for many disabled learners (Lourens & Swartz, 2016; Babic & Dowling, 2016). While campuses are increasingly becoming diverse (Flanagan, Benson, & Fovet, 2014), a wealth of evidence has shown that disabled domestic students experience disabling barriers in areas such as access, pedagogy and social life in HE (Beauchamp-Pryor, 2013; Collinson, Dunne, & Woolhouse, 2011; Farrar, 2007).
Here I discuss information and physical access barriers experienced by disabled international students in the British HE sector, focusing on the intersectionality of their multiple identities and how sometimes their difficulties are perpetuated, resulting in further marginalisation throughout the university journey. In the absence of genuine inclusive practices, it is this specific area that forms the basis for explaining and justifying the need for inclusive and flexible educational practices. This paper is informed by the questions and findings of a project conducted for my PhD research specifically relevant to the British HE context (Soorenian, 2011).

Research Methods

Based on my first-hand experience of being a “disabled international student”, I undertook a qualitative study with thirty fellow students in eleven British universities. Throughout the fieldwork, I recognised participants’ experiences resonating with that of my own, allowing me a unique insight into their circumstances. Moreover, employing an exploratory framework and using qualitative methods of semi-structured interviews and a focus group, I explored participants’ voiced experiences of university life. As with Messiou (2012), I believe that, through listening to students’ accounts, education research can highlight their viewpoints and allow them to be part of the solutions.

Through networking and chain referral techniques in universities and national educational organisations; a snowballing method was adopted to recruit the participants. Thirty “mature” participants with a range of impairments (two with invisible, five with dyslexia, ten with sensory [two with hearing and eight with visual], and thirteen with physical) were hence recruited. In the British HE context, “mature students” are defined as being twenty-one or over (HESA, 2016). Three of these participants were from Africa, four from Asia, six from the Far-East, six from North America, and eleven from Europe.

To stimulate, validate and refine the semi-structured interview topics, a focus group with five participants was initially held. Following this, I conducted three telephone, 12 face-to-face, and 15 email interviews with the participants, depending on their impairments, time and location availability. The barriers participants discussed were grounded in their multiple identities of “disabled”, “international” and mostly “mature” and “postgraduate” students in the British HE.

Participants were then invited to read their anonymised interview transcripts through and make any additions, modifications, or exclusions as they saw fit.
Subsequently I used a coding schema based on lists of themes and categories, generated from studying and reflecting on theory and previous literature.

The findings indicated that in most cases students’ access needs were exaggerated due to their linguistic, cultural or geographic location-related concerns. In the following sections, I will use participants’ voices to highlight the complex interaction of their identities - how being “disabled” and “international”, sometimes in isolation and other times simultaneously compounded difficulties experienced, resulting in an unequal university experience to that of their non-disabled international and disabled domestic peers.

The Social Model and its Impact

Here the term “disability” is interpreted through the social model lens. Accordingly, in the HE context, various educational barriers are identified and recognised as hindering disabled students’ progress, and universities are expected to work towards the removal of these obstacles, instead of holding individual disabled students accountable for their inability to access and participate in HE (Riddell et al., 2005). The social definition of disability differentiates between the term “impairment” as a biological experience, and “disability”, as societal discrimination and prejudice related to a larger injustice issue (Barnes, 2007). The rhetoric of the social model of disability is gradually beginning to percolate into HE policy in the UK, albeit tentatively. The impact of the social model is perhaps most evident in the implementation of The Special Educational Needs and Disability Act (SENDA) in 2002. The Act not only made it illegal to discriminate against disabled students in the provision of educational services, but it also expected institutions to provide anticipatory adjustments, rather than responding in an ad hoc or reactive way to individual disabled students’ needs (SENDA, 2003). In a stark contrast to the medical model rhetoric, perceptions on inclusion that are embedded in the social model retract attention from impairments or limitations, and focus instead on institutional policies and practices that discriminate against and oppress disabled students (Lalvania, 2013).

Despite this marked progress towards officially placing disability alongside other equality and diversity dimensions through SENDA (Riddell et al., 2005), as documented below the medical model continues to exert a predominant influence in university practice. British HEIs generally display characteristics of a more “integrated” education system embedded in the medical and personal tragedy discourses. Conventionally within the integrated model of education, disabled pupils/students were placed in separate units attached to mainstream education settings, which were dominated by “special education” ideology. With minimum support provided disabled students were merely tolerated (Oliver, 2000). Similarly, in
a HE setting by offering support, albeit unpredictably and inconsistently, attempts are made to alter students’ needs so that the university targets are achieved. The individualised support provided seems to only help students to “overcome” barriers to access an otherwise inaccessible mainstream educational environment, which continues to be largely unchanged. The solutions proposed are therefore often perfunctory and inadequate, focusing on individual deficit and the negative consequences of impairment (Riddell, 1998). Next I will identify some of the university practices, which are based on the integrated model of education and reflect the individualised view of disability, contradicting with the social understanding of this concept leading to inclusive educational practices.

Receiving accessible information

To lead an independent life, and feel included in the mainstream community, disabled people should be able to exercise choice and make their own decisions; the ‘lack of entitlement to independent living means disabled people are denied their human and civil rights’ (Morris, 2004, p. 427). To achieve this, as highlighted in disabled people’s “Seven Needs” (Hasler, 2003) in the first instant, disabled people need appropriate information. The relative information provided by the prospective universities to twelve of my research participants, for example, provided opportunities to decide where and what to study.

Disabled students need accessible, accurate and unambiguous detailed information about what university life can offer – how to seek advice, guidance and support for disability-related needs. Without this sort of information, they may experience high levels of anxiety as well as difficulty in preparing themselves for university study (Madriaga, 2007).

Likewise, international students need transparent pre-arrival information to alleviate stress when facing the unknown, helping them with the ‘acculturation’ process (Ryan, 2000, p. 81). Such communication is prerequisite to a proper understanding of, firstly the British culture, secondly the HE sector generally, and thirdly the expectations of academic facilities and programmes of the specific university at which they will be studying. Whilst all international students are liable to receive poor pre-arrival communication, disabled international students are doubly disadvantaged due to uncertainties regarding crucial disability-related and other support needs. The general prospectus may not necessarily be in disabled students’ preferred format (McCarthy & Hurst, 2001), include disability specific information, or indeed be culturally sensitive. Reading the prospectus, Olivia, a research participant knew that there was a support centre for disabled students; however, no information about the specifics of the services on offer was provided. She talked about the significance of receiving information on
such details, and how it would have given her a much-needed sense of security prior to starting her university experience.

It was clear that access to robust, timely and reliable information was crucial for all the participants who, like other prospective students, were making decisions about where to apply amid greater choice of universities. However, ten participants, all from different countries, received very little or no information on essential student services. Linda (from North America) had no idea how to access non-academic services. She only found out about such facilities through word of mouth - from talking to classmates. Due to lack of information received, Mlinda and Nicky took the responsibility on themselves of searching for information on their university. As a postgraduate student, Kate complained about the quality and relevance of the limited information received. She criticised the materials for not meeting postgraduate students’ needs, primarily being geared for the typical undergraduate students’ expectations instead.

Twenty of the thirty interviewees received information, albeit erratic and sometimes inaccessible, offered by various student services. At pre-admission, Tina received both written and verbal information from Accommodation Office, Disability Services and her academic department. She found these tailored materials extremely valuable. Whilst twelve were content with the information, the eight participants, who were dissatisfied with the accessibility and appropriateness of various pieces of information received, were with different impairments: hearing impairments (one), dyslexia (two), and visual impairments (five). They pointed to their universities’ general assumption that students can read the standard hard copy small print literature readily. In fact, this format was inaccessible for students with dyslexia. Angela needed yellow, blue or pink print background, especially when reading extensively. Her institution failed to provide information in this format, even after her preference was stressed. This was also the case for Nora (also with dyslexia), both before and after the admission stage.

Another participant, Sova (with visual impairments), discussed how, due to the inaccessibility of the small print information received from Disability Services, she was unable to read it independently. She felt disadvantaged, and was restricted to listening to the introductory section only, read and recorded by her course director in her previous place of study. This meant that Sova was ill-informed about the full range of disability services available and was unable to make use of the facilities.

Only six participants were given brief disabled international student specific information on areas such as funding for their disability-support. Lack of information sensitive to this group’s additional needs (e.g. particular
disability-related academic support) was disquieting for the participants. They thought receiving the information would have been invaluable, giving them some reassurance beside clarifying their requirements and expectations.

In reference to information on accommodation services, whereas Domenic (a wheelchair-user) was informed that his room could be adapted to meet his specific needs; Ned (also wheelchair-user, from the same university as Domenic) was uninformed about similar adaptations. Ned attributed the breakdown in communication to poor coordination between the Disability Services and the Accommodation Office in meeting students’ needs.

Furthermore, a lack of relevant information on social life was affirmed by three participants (one with visual impairments, and two with mobility impairments). Toney (with visual impairments) highlighted the difficulties related to spontaneity when arranging social activities, a privilege that most non-disabled students take for granted, as a major aspect of student life. Toney explained: ‘I don’t have the same choices. By the time, I get accessible information, it’s too late and too sudden. There needs to be sudden plans to organise the transport and support’.

Additionally, participants were frequently invited to visit university websites to obtain crucial information on various student issues. There seemed to be an immediate expectation on students to be able to access the internet. Nonetheless, accessing the internet proved to be problematic for some participants from their non-Western home countries as was the case with meeting staff face-to-face. Some university websites also lacked accessibility features for students with visual impairments and dyslexia. Although 21 participants did not speak English as a first language, none were offered versions of prospectuses in any language other than English. Specifically, at the beginning of their university experience, international students may have difficulty with their English language reading and writing skills; thus, receiving information in their first language may have been particularly valuable. What appears to be the underlying problem here is the universities’ unwillingness to provide information in students’ preferred formats, be it in audio version, Braille, or large print, and make the provision of information inclusive in general.

Lack of such useful information can add to a feeling of distress for most disabled students (Madriaga, 2007), particularly so for international students who are adjusting to a new culture, an experience, which can reduce students’ self-confidence (Soorenian, 2013). Eighteen participants felt that the disability specific information received was inadequate; they wanted to receive more information to help them make the disability-related practical arrangements. It can therefore be argued that participants were disadvantaged on two levels around receiving tailored and accessible format information. Unlike their
domestic peers, they were unable to visit or contact their universities by phone/email as conveniently. Angela (with dyslexia), for example, did not receive any accessible information on university services; yet she preferred to keep the number of phone/email contacts with the British HEI from her home country minimal, implying that the process was stressful. It was clear that participants generally had to conduct long and exhausting dialogues with their universities to merely access such entitlements as accessible information, instead of devoting time and energy to prepare for their new adventure.

Despite national recommendations that HEIs should make prospectuses and other information available to students accessible and in different formats prior to the start of the course (ECU, 2010; QAA, 2009), universities’ responses appear to be reactive, responding on an ad hoc basis to students’ requests, rather than fostering inclusive approaches where information provision was concerned. Receiving inaccessible, or indeed no information, was detrimental to disabled international students, who would have found the literature particularly informative on the grounds of being both “disabled” and “international”. Having discussed information accessibility, in the next section access to the university environment and specific student services will be explored.

Accessing the built environment

Access to the physical environment, ‘to go where everyone else does’ has been identified as another of disabled people’s “Seven Needs” by the Derbyshire Centre for Integrated Living (Hasler, 2003, unpaged). In addition to accessibility of information, accessing the built environment facilitates disabled students’ independence and inclusion in university life. Nonetheless, there remain several serious access obstacles, which compromise disabled students’ full participation in academic and social pursuits. These include old listed buildings without lifts or ramps, inaccessible furniture (inappropriate height and layout), inadequate spaces for wheelchair-users, inadequate lighting, and lack of visual signage - not Braille (Causton-Theoharis, Ashby, & DeClouette, 2009; Madriaga, Hanson, Heaton, Kay, Newitt, & Walker, 2010).

Reflecting previous research, the quality of participants’ experiences was shaped by the accessibility of physical infrastructure both inside and outside the general facilities as well as specific spaces. Twenty participants highlighted some impairment-specific barriers in entering several buildings. Domenic (a wheelchair-user), Nicky (with a back impairment), and Olivia (with one short arm) criticised the heavy doors to various buildings as, due to their respective impairments, they were unable to pull the doors and keep them held open whilst passing through.
Irin and Kate (with physical impairments) and Toney (with visual impairments) felt uncomfortable walking long distances between different buildings. Kate explained: ‘When using the accessible route, I often have to walk twice as far to get half the distance. I have to do a lot of planning in advance and do several things together to make the best use of my time and energy’. Participants with physical impairments appeared to expend huge amounts of time and effort in negotiating many seemingly accessible buildings. Elaine talked about the impeding and exhausting effects of finding accessible entrances on her time and energy levels.

This is specifically important because most disabled students experience fatigue as a dimension of their impairments, resulting in limited concentration and energy available for studying and social activities (Viney, 2006). For Linda (with physical impairments), fatigue was a major determining factor in deciding which options/routes were quicker and more accessible; she had to prioritise her limited energy, and use the time available effectively.

The outside environment was also inaccessible to some participants. Tina (a wheelchair-user) complained about the hilly landscape of the city concerned. Because of the severe risk of her three-wheeler scooter getting stuck in the pavement cracks, Elaine decided to use her manual wheelchair instead, which put strain on her hands. Carol, who had sight in one eye only, experienced problems with depth perception. She complained about the uneven pavements: ‘I always catch my feet, catch my toes on the cobblestones, almost falling on my face’.

Toney (also with visual impairments) found it challenging to move around the old listed university buildings where the lift services were inadequate, especially one that housed several student support services: ‘It is six floors, which is not well labelled. It also has a revolving door, which hasn’t made it very accessible’.

Accessibility for people with visual impairments often encompasses use of colour contrast or a range of signs. Universities are expected to provide clear symbols and tactile information so that students can identify the rooms easier (ECU, 2009b). Mary pointed to the overall inaccessibility of the HEI she attended: ‘So many stairs, so many signs, not Braille, so many heavy doors. It’s just completely inaccessible for a visually impaired student’.

Furthermore, HEIs are expected to adapt the specific learning environments for disabled students to the greatest extent (ECU, 2009b; QAA, 2009). Elaine discussed an important yet often overlooked issue about the way paper notices were placed within glass notice-boards, and not pinned with drawing
pins on the boards in and around her academic department. This meant, helpfully, her wheelchair was not punctured for over a year.

However, seven participants with physical/mobility impairments voiced dissatisfaction with some physical characteristics of their academic departments, including broken lifts and steps. Kate discussed the way many of her lecture/seminar-rooms were inaccessible for students with mobility impairments, and how she was not able to attend occasional departmental workshops. As an ad hoc solution, Kate met her research supervisor weekly in the visitors’ centre instead.

It appears that the Quality Assurance Agency’s (QAA, 2009) recommendation regarding flexibility where the meetings/seminars were held including moving individual student’s activities from inaccessible rooms to more accessible places, addressed how Kate’s difficulty was handled. Although this solution may arguably have created an equivalent access opportunity for Kate to that of her course-mates, the resulting social and personal negative implications cannot be overlooked. The advantages of participating in an academic setting together with other students are said to include: ‘Intellectual stimulation, emotional growth, academic gains, an expanded social network, increased self-confidence, and independence’ (Causton-Theoharis et al., 2009: 90). Considering her university’s individualised response, Kate was clearly denied the opportunity to interact with her course-mates, possibly leading to increased levels of confidence amongst other academic and non-academic gains.

Elaine and Ned’s (both wheelchair-users) two contrasting views on the size of the lecture-rooms indicate a lack of standardisation in the provision of accessible rooms for disabled students even within the same university setting. Yet, Wald (2012) recommends to ensure adequate teaching spaces for wheelchair-users.

As a student with a back impairment, Nicky was unable to sit down and work for long periods at a time. Despite the QAA’s (1999) recommendation expecting the institutions to consider the height and layout of lecture-room tables, Nicky’s request for a higher desk to enable her to study whilst standing was not met in her learning environment. As an alternative arrangement, she had to ask every lecturer to allow her to stand during lectures, and to take regular breaks.

Nicky also needed additional time to complete the course assignments, and often had to use the computer lab on the weekends to work on specific projects. Yet, the accessible route to the lab was closed on Saturdays. Once again this was despite Equality Challenge Unit’s (ECU, 2009a) recommendation, encouraging institutions to develop an access guide to
suggest ways of entering university properties so that the access is not compromised, if a specific route is closed at a certain day/time. Sova (with visual impairments) criticised the complicated electronic entry device attached to the front door of her academic department. To enter this building during weekends and holidays, Sova could not operate the system independently and always needed to be accompanied by her personal assistant (PA).

Carol dealt with her sensitivity to direct light in the seminar-rooms by improvising - having the lighting more indirect or to open the curtains and not have the overhead lights on. This may indeed have created a new obstacle for other students (particularly students with hearing impairments who need to lip-read), conflicting with their needs. Nonetheless, Carol insisted that other students had no problem with the arrangement. It is thus important to recognise the need for variety and flexibility in pedagogy, affirming that what works for one student may not work for another.

With regards to utilising technology, Harris (2010) suggests that legislation on inclusive design for each product group is a huge undertaking, and must be supported by detailed research into practicalities, and health and safety issues. The QAA (2009) also stipulates that the equipment in laboratories and teaching-rooms should be accessible and user-friendly. However, looking at demonstrations or operating the small size machinery in the physics lab was difficult for Toney.

Participants’ access difficulties described above are not exclusive to international students and can be applicable to most disabled students. Yet, Mlinda (with hearing impairments) had a specific disabled international student’s concern. She found the size and nature of the university campus daunting and impersonal, reinforced and even exacerbated given her double identity and status as an “international” student, who needed to lip-read daily in English.

Here I identified a range of physical barriers faced by participants with different impairments. Students with mobility difficulties discussed their problems largely with uneven pavements, inaccessible routes and distances between buildings and steps inside the built environment; whereas students with visual impairments complained about incorrect lighting, visual signage and use of inaccessible machinery in the university environment. Apart from Mlinda’s experience, regardless of their nationality, access difficulties seemed to be general for all disabled students. That said, to receive the appropriate disability-related support, students like Kate and Nicky had to justify their needs to university staff often in a second or third language to that of their own, which was a challenging process for some students.
Whilst participants appeared to have addressed some physical access difficulties, often through improvising, inaccessible physical locations (be it due to hilly landscape or heavy doors) were unmoving barriers for students, unless they were supported by their institution. These settings remained significant barriers to learning and demonstrated a weakness in the system. However, nationally, policies (ECU, 2009a; QAA, 1999; 2009; Wald, 2012) exist to address similar barriers to the ones experienced by the participants, ranging from Kate’s concern with broken lifts and the physical inaccessibility of her learning settings to Nicky and Sova’s difficulty with the closing hours of certain buildings, and Toney’s problem in using the machinery in the physics lab. Ultimately to address physical barriers, institutions are required to ensure the accessibility of their physical properties under relevant legislation and general building regulations (QAA, 2009). Despite various national recommendations (ECU, 2009b; QAA, 2009) about such inclusive provisions as sliding doors and tactile information, for instance, the HEIs generally did not seem to have taken their legal duties on board, making the required “reasonable adjustments” to the physical environment specifically. In an academic setting, reasonable adjustment covers not merely the ‘additional aids and equipment’, but it also involves ‘changes to working practices’ (Felsinger & Byford, 2008: 26), and university culture at large. Participants’ experiences indicated that instead of providing anticipatory adjustments, universities mainly acted on an ad hoc basis, responding to students’ needs only individually. This was evident when Kate was met in an accessible yet different room to her course-mates, or when Nicky was granted regular breaks rather than being provided with an appropriate height desk and an ergonomic chair.

Discussion

The barriers I have examined in this article were in relation to information access and the accessibility of physical environment. Whilst living in their home countries, at pre-admission stage, participants had difficulty receiving accessible and relevant information, through post and phone contacts from their British universities. The provision of inaccessible information as the first barrier to the university experience thus restricted participants’ choices of suitable British HEI. This did little to reduce the anxiety related to being a “disabled” and “international” student, acting as the first obstacle to their equal participation in university life.

When settled in their British universities, access barriers prevented disabled international students from having an equal and fulfilling experience like their non-disabled peers. Although most access difficulties were applicable to all disabled students, regardless of their nationality, the justifications that participants needed to conduct to ensure adjustments were in place were emotionally draining and time-consuming. These negotiations meant that
they were not able to fully realise their academic potential, often forced to devote time and energy to self-advocacy. It therefore appeared that participants had to often compromise in all the areas discussed in this paper.

More specifically, despite ample national policy and guidelines on inclusive practices, universities’ approaches in responding to participants’ needs were more indicative of the “integrated” model of education, which is not only inconsistent and unpredictable, but also reactive and based on the individual medical interpretation of disability. Although policy and public view purport to have moved forward, lived experiences of the participants on what is delivered in the name of “inclusion” did not necessarily reflect this shift in perspective. The way HEIs address the agenda for inclusion often represents a superficial interpretation of the social model of disability instead of being a true application of the inclusion ethos (Hydera & Tissota, 2013).

As a transition to a fully inclusive education system that allows “all” students to participate in the university environment, regardless of disability, nationality or any other characteristics, such individualised efforts must be accompanied by wider structural changes. This system will help to break down barriers and traditional distinctions between all groups of people, with far-reaching implications for disabled and non-disabled students, and more generally for society at large. As Fovet (2014) believes creating an inclusive learning and teaching setting does not require expert knowledge, but rather a layperson’s practical reflection on methods of curriculum and delivery.

An “inclusive” education environment is where ‘the majority of students who have a disability are accommodated most of the time without anything “additional” being done ‘for’ them’ (Fraser & Sanders, 2005, p. 130). Reflexive, flexible and responsive “inclusive” pedagogical and social procedures at pre, during and post university experience will benefit all students, and prevent the need for “retrofitting” adjustments with extra costs for students with “additional” needs. Although the implementation of inclusive practices may initially result in an increase in expenditure, these short-term financial consequences will be outweighed by the long-term benefits that will accrue from targeting compounded forms of social and educational disadvantage. Next I will highlight some examples of inclusive practices related to the topics covered in this article.

Universities need to provide both verbal and written tailored, accessible and culturally sensitive information on their student services in a range of alternative formats, pre-arrival, in a timely manner to all prospective students to allow them choices in selecting universities and to know what to expect on arrival. The specifics of disability-support services on offer must be included in the information with an accurate explanation of the cost involved for international students particularly. Universities must be able and willing to
provide the information in different languages so that students’ families, who may not be fluent in English, can help them with the university selection process. Furthermore, the language and pictures used in the universities’ publicity materials must be carefully selected to reflect the institution’s approach to equality and diversity matters.

The HEIs must have extensive guidelines on the physical accessibility of the entire university campus, complying with “universal design” principles. They need to have a firm commitment to review the implementation of these recommendations on a regular basis to promote an environment that can automatically be adaptable to “all” students.

Enactment of the above recommendations would help contribute towards creating an “inclusive” access experience, and removing some of the barriers participants experienced. Ultimately, it is crucial, however to eradicate the source of oppression that creates a non-inclusive education system. A truly inclusive and democratic society should recognise education as a human right and challenge inequalities and segregation whilst promoting creative and responsive approaches to learning and participation for all students.

Conclusion

In contrast to the “integrated” system currently in operation in most British HE settings, an inclusive educational framework is framed in the context of social justice, where demand is on difference not being rejected or merely tolerated, but publicly understood, identified and celebrated (Ainscow, 2005; Barton, 2003; Norwich, 2010). To achieve this, the ‘irrelevance, discriminatory and exclusionary features’ (Barton, 2003, p. 14) of present policy and practice based on biological and cultural determinism should be understood and challenged. Universal policy and legislation alone is insufficient to engender significant change; a more complex strategy of reviewing procedures and active consultation of disabled students is paramount to work towards a more equal HE system (Vickerman & Blundell, 2010). Inclusive practices equipped with creative and flexible thinking grounded in general education reform (Ainscow, Booth, & Dyson, 2006) are capable of facilitating and strengthening the mandates of Article 24 of the UNCRPD, which stipulates that states parties shall ensure that: ‘Persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live’ in addition to ‘Effective individualized support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion’ (UNCRPD, Article 24).
References


