Invisible but Exposed: Experiences of Disability in Higher Education

gbrewer@liverpool.ac.uk

The ‘Ideal’ Academic

Neoliberal Higher Education prioritises productivity and performance (Ball, 2012)

Academics expected to work long hours and be available outside standard working hours (Sang, et al. 2015)

The ‘ideal employee’ - free from caring responsibilities and able to dedicate themselves to their career (Williams, 2001)

Those with disabilities are often perceived as inadequate or less capable (Hughes, 2009)

Disability and Higher Education

Disabled faculty are often marginalized, not accommodated by the University, and experience discrimination (Ben-Moshe & Colligan, 2010; Chouinard, 2010; Smith & Andrews, 2015)

Disabled academics may feel pressure to prove themselves, overcompensate for their disabled status, and guard against discrimination (Schwartz & Elder, 2018)

The Current Study

Conditions that limit energy levels or impact on cognitive function (e.g., Chronic Fatigue Syndrome, Fibromyalgia)

a) Particularly inconsistent with the neoliberal ideology that privileges long working hours and performativity
b) Not easily addressed by institutional policy or accommodations
c) Often ‘invisible’ and academics must decide whether to disclose or conceal their condition

Method

Interviews, ten female academics (546 minutes)

Long-term conditions that were energy limiting or impacting on cognitive function

Range of disciplines, institutions, and contract types

Identity and the Concept of Disability

"I do have imposter syndrome, about saying I'm disabled. Because it's like this idea of I'm not disabled enough". [Academic 9]

"The only option is 'do you have a disability or do you have any mental health conditions'? Well, no, I don't. But are you going to give me another option? Like, do you feel like you need additional support or you know, there's nothing else is there really." [Academic 6]

Dependence and Vulnerability

"Occupational Health have been excellent, but it's down to the management team in our school to decide whether or not the reasonable adjustments that Occupational Health have recommended, are acceptable." [Academic 1]

"if I said to my institute that I needed to reduce some of the commitments that I have, because I'm just too tired to fill them, they would be er probably going down the route of unable to fill fulfil my contractual er duties. And I know that because I've, I've been involved in managing another person…and that's what they're doing, is trying to get her dismissed." [academic 5]

Legitimacy, Convention, and Conformity

“Their response was, ‘no, we don't do it that way. But if you wanted to put in for a promotion, you’d fill everything out and then there's a section on mitigating circumstances that you could then fill in to explain why you haven't met the criteria for promotion’. And I'm like, that's totally wrong. Actually, that's ablest view. So you've got to, you've got to basically set yourself up to fail. And for it to be turned down, and then explain why it shouldn't be turned around.” [academic 1]

“I've got to the point where I'm not taking any longer. And then the response has been positive. A younger me would not have done it, a younger me, would have kept her head down. And she did, and tried to comply with a system that really was not inclusive.” [academic 2]

Workload, Intensification, and Marketisation

"I was in an abusive relationship, and the gaslighting and the escalation of demands, like psychologically, it's the same dynamic." [academic 4]

"I think the reason things came to a head and I had to take sick leave was because there was no longer enough slack in my schedule that I could wake up one morning and go, okay, today's a write off. Um and I needed that. And I still do." [academic 3]

Insecurity, Competition, and Comparison

“on the one hand, is an acknowledgement that people should only be working, you know, a certain number of hours every week and shouldn't be working, should have a work life balance and should be able to work when they're well and got the energy. Er but on the other hand, there's you are actually judged against people who have more energy and can work till one o'clock in the morning” [academic 5]

“it's almost like a badge people wear. Being exhausted and being stressed is like a kind of source of.. people wave it like a flag. Erm so, and as well as sometimes when you say, ‘Oh, you know, my mental health is really bad’. And then people will say, ‘well, isn't, isn't everyone's’ it's just how it is in this culture.” [academic 4]

Perceptions, Othering, and Isolation

“I mean, I feel lucky, because the, the rabbit in the headlights look I get with a diagnosis, such as arthritis is one thing, saying to some of my colleagues that it's chronic fatigue, oh, my goodness, there's a whole extra layer of stigma associated with that.” [academic 7]

“I worried about changing job and moving from [names city] to [names city]. And because, again, like, it's like a whole new set of people that you've kind of almost feels like you've got to convince erm you know that this is a real thing.”[academic 8]

Implications: Institutions

Disability is integral to EDI

Accessibility is fundamental – inclusivity not adjustments

Provide a disability network

Consider approaches to reporting ‘disability’

Genuine focus on health and wellbeing

Support prior to diagnosis

Include disability in policy

Experiences and insight from COVID-19

Thank You

Coming soon (*ish*)

Disability in Higher Education: Investigating Identity, Stigma, and Disclosure Amongst Academics. Open University Press.