



**Te Tāhuhu o
te Mātauranga**
Ministry of Education

Let's Get Accessible

Disabled students' experiences navigating the tertiary education system.

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Contents

| | |
|---|-----------|
| Summary | 1 |
| Purpose | 1 |
| Key findings | 2 |
| Methodology | 3 |
| Key definitions | 5 |
| Introduction | 7 |
| Limitations | 8 |
| Participants | 10 |
| Findings | 14 |
| Accessibility | 14 |
| Self-disclosure | 16 |
| Accessing support | 17 |
| Accessing learning environments and platforms | 17 |
| Consistency and reliability | 19 |
| Social inclusion and the wider student experience | 21 |
| Student advocacy | 23 |
| Areas for further research | 26 |
| Appendix: Data collection methods | 27 |

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Summary

Let's Get Accessible is a collaborative research project between the National Disabled Students' Association (NDSA), the Ministry of Education (the Ministry), the Tertiary Education Commission (TEC), and the New Zealand Qualifications Authority (NZQA).

This report was written by the Ministry in consultation with NDSA, TEC, and NZQA. Therefore, the language used reflects that used by government agencies. The report was written by a Ministry employee with lived experience of disability. This report highlights the lived experiences of disabled students and includes stories about the difficulties faced by disabled tertiary students in accessing education and services, and their experiences of social exclusion.

Purpose

The purpose of this report is to explore the lived experiences of disabled students in the tertiary education system, to find commonalities, pain points, and patterns that can inform future research and policy development. The information in this report is intended to provide a foundation for providers to improve the experiences of disabled students in tertiary education. It is also intended to be used as a basis for advocacy by student disability organisations such as NDSA.

NDSA noted that previous research looking at disabled students in tertiary education had mostly focused on identifying outcomes for disabled students and had not explored their lived experiences while studying. This conclusion was supported by a literature review, undertaken by NDSA and the Ministry, that found some previous research on disability and education was often undertaken from a medical perspective, focused on the impact of policies on disabled students, or focused on

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

analysing available quantitative data.¹ NDSA wanted to use a qualitative research approach to collect data that would represent disabled students' experiences. This research will help NDSA advocate more effectively for their constituents, as it will more accurately reflect their needs.

Key findings

- Accessing support can be difficult due to physical barriers, financial pressures, under-resourcing, and lack of diagnoses.
- Levels of support are inconsistent, especially between disability services and teaching staff.
- Barriers such as ableism, inaccessible events, and lack of training on disability contribute to disabled students being socially excluded.
- Power dynamics between disabled students, teaching staff, and providers can make advocacy unsafe, unsupportive, or ineffective.

Many respondents said that if more disabled students could access consistent support that is on offer at their provider, their experiences would improve, and it is likely more disabled students would continue in study and complete more of their courses. Respondents said the negative experiences disabled students encounter in the tertiary education system usually have a solution. The barriers respondents reported were a lack of willingness, capability, and capacity by providers to implement these solutions.

There was reported to be an inconsistency between the support offered by disability services and those offered by teaching staff, which creates barriers to the participation and success of disabled students in tertiary education. It was reported

¹ NDSA et al. (2023). Literature Review: Disabled Learners Experience in Tertiary Education. [Literature Review — National Disabled Students' Association \(ndsa.org.nz\)](#)

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

that some teaching staff and tertiary providers did not provide adequate resources or support for disabled students. Participants noted that teaching staff, and other people in positions of power at providers, were not often sufficiently trained in disability issues and therefore, struggled to provide appropriate support for disabled tertiary students. This lack of support can foster a negative environment for disabled students.

Many participants noted that there are few systems and processes in place to support disabled students to advocate for themselves so that they feel protected and safe in the tertiary education system. Limited consultation with disabled students by providers leads to negative experiences and little improvement in areas which would make a difference to disabled students. Respondents noted that poor knowledge and application of The Education (Pastoral Care of Tertiary and International Learners) Code of Practice 2021 (the Code) means that it is not able to be used by disabled students as a strong basis for advocacy.

Disabled students were often excluded from social engagements because of inaccessibility and the attitudes of their peers. Many social events were reported to be exclusionary and inaccessible. There were also experiences of negative stereotypes and ideologies being pushed on disabled students which left them in situations where they had to prove their disability.

Methodology

The findings in this report are based on data gathered through an online survey that was open for one month from July - August 2023, and seven focus groups held both online and in person in September 2023. The data was coded into four different categories: accessibility, consistency and reliability, social inclusivity in the wider student experience, and student advocacy. These categories are explained further below.

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Accessibility explores the barriers disabled students face in participating, succeeding, and having positive experiences at their tertiary providers. The key themes identified from analysing the data in this category were:

- disabled students faced difficulties when accessing supports due to many providers requiring a formal diagnosis and a high level of disclosure of impairment
- disabled students found lectures and content to be physically inaccessible
- the number of hours disabled students spent studying could vary due to the impacts of their disability.

Consistency and reliability takes a deeper look at the accessibility of supports received by disabled students at their tertiary providers. The data analysed in this category explored the discrepancies reported by respondents between supports offered and received by both disability services and teaching staff.

Social inclusivity and the wider student experience looks further than disability services and lectures to highlight the experience of disabled students within the context of student life. The data in this section focuses on the experiences of disabled students at social events, in halls of residence, and during interactions with peers and staff.

Student advocacy explores the efforts put in by disabled students to access support and feel included by their providers. It highlights the experiences of disabled students who have to advocate for themselves, and those who have consulted with their providers on disability issues.

The Ministry's Ethics Group was consulted and approved the approach during all relevant parts of the project.

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Key definitions

Disabled student: We acknowledge that preference between person-first (person with a disability) and identity-first (disabled person) language is an individual choice. This report uses identity-first language in accordance with government guidelines. We acknowledge NDSA's preference in using person-first language. It should also be recognised that language can change, and the language used in this report may not be the language used in future research.

Disability: To be disabled, or to have a disability, refers to a diverse and complex phenomenon. Disability reflects the interaction between an individual's impairment and the barriers of their environment. This includes, but is not limited to, physical impairment, mental health and psychological conditions, learning and/or sensory forms of impairment, neurodiversity, chronic illness, individuals within the Deaf community etc.²

Disability services: This term has been used throughout this project as an umbrella term referring to services at tertiary providers such as Disability Inclusion Services, Inclusion Services, Student Accessibility Services, Neurodiverse and Disabled Learner Support, and Accessibility Services.

Ableism: Ableism refers to discrimination against people with disabilities, or people who are perceived to have disabilities. Ableism characterises people as defined entirely by their disability and as inferior to non-disabled people.

Support plans: This term has been used throughout this project as an umbrella term covering plans put in place by disability services with the intention of supporting

² NDSA. (2019). NDSA Definition of 'disability'. [About Us — National Disabled Students' Association \(ndsa.org.nz\)](https://www.ndsa.org.nz/about-us)

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

disabled students with their access needs. They are sometimes called learning support plans or education access plans.

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Introduction

At the end of 2022 the National Disabled Students' Association (NDSA) approached the Ministry of Education (the Ministry) with a proposal for a collaborative research process, with support from the Tertiary Education Commission (TEC) and the New Zealand Qualifications Authority (NZQA). The project aimed to focus on the lived experiences of disabled students in the tertiary education system.

In early 2023, NDSA undertook a literature review, with support from the Ministry, to identify previous research on disabled students in the tertiary education system. This literature review identified gaps in the research, which was then used to inform the questions used in the survey. The literature review was published on NDSA's website in October 2023.³ It was agreed that the main output would be this report, with a qualitative focus, to contribute to filling an evidence gap in the literature and inform future policy work.

Prior research has been focused on quantitative data related to outcomes of disabled students and had not looked at their lived experiences. The most recent reliable information on disabled students in the tertiary education system used information from a 2013 Disability Survey linked to enrolment and completion information from 2011 to 2015.⁴

Previous research has shown that people with disabilities were 1.3 times more likely to have no post-school qualifications as non-disabled people and half as likely to

³ NDSA et al. (2023). Literature Review: Disabled Learners Experience in Tertiary Education. [Literature Review — National Disabled Students' Association \(ndsa.org.nz\)](#)

⁴ Earle, D. (2019). Disabled people and tertiary education: An analysis of the 2013 Disability Survey. [Disabled people and tertiary education: An analysis of the 2013 Disability Survey | Education Counts](#)

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

have a bachelors degree or higher.⁵ Disabled students also often have a lower average course completion rate.⁶ By further researching the lived experiences of disabled students in tertiary education we hope to be able to understand the barriers that prevent more positive outcomes.

This project engaged with disabled students in two stages: an online survey and focus groups (both online and in-person). Participation was open to students of all disabled identities, ages, ethnicities, genders, qualifications, and from all types of tertiary providers, both formal and informal. Information on the data collection method used can be found in Appendix 1.

Limitations

While this project has important findings and sets a precedent for disabled students in tertiary education research, it has some limitations. The survey and focus groups were not based on a random sample of disabled students, nor were they designed to be representative of all disabled students.

Most responses were from disabled students at universities (66 percent of survey respondents and all focus group participants). Just under a third of survey respondents were from Te Pūkenga. The rest of the survey participants were disabled students from Private Training Establishments (PTEs). There were very few responses from disabled students doing apprenticeships or attending Wānanga.

Focus groups were only attended by disabled students who were available, physically able, interested and had the time and energy to engage, which led to a low turnout. There was also only one focus group held where New Zealand Sign

⁵ Earle, D. (2019). Disabled people and tertiary education: An analysis of the 2013 Disability Survey. [Disabled people and tertiary education: An analysis of the 2013 Disability Survey | Education Counts](#)

⁶ Earle, D. (2019). Disabled people and tertiary education: An analysis of the 2013 Disability Survey. [Disabled people and tertiary education: An analysis of the 2013 Disability Survey | Education Counts](#)

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Language interpreters were provided, which could account for low participation rates for the Deaf community.

The research only explored the experiences of disabled students who made it into tertiary education and were still enrolled towards the end of the year, so it doesn't include those who did not enrol or dropped out early in the year (potentially due to accessibility barriers). This means that the data is not representative of the experiences of all disabled students attending tertiary education, nor does it capture all aspects of the experiences of disabled students wanting to or successfully enrolling in tertiary education.

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Participants

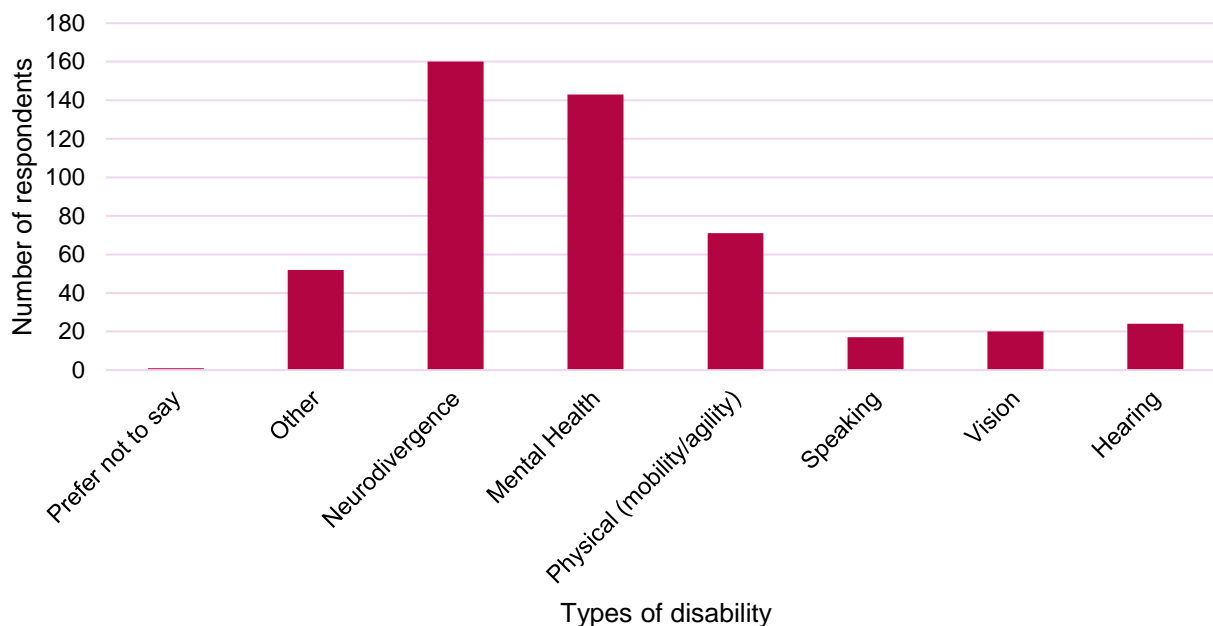
There was a total of 235 respondents to the survey and 10 participants in the focus groups.⁷ Participants in both the survey and focus groups were of varying ethnic and cultural backgrounds, ages, gender identities, disabilities, tertiary providers, qualifications, and locations (see Figures 1, 2 and 3). Survey responses were largely from those studying in Canterbury (43 percent) and Auckland (21 percent). The other 36 percent was made up largely of respondents from Wellington (11 percent) and Otago (8 percent) with the rest being spread around other regions of New Zealand.

The survey had participants from multiple categories of disability, with a high rate of students who identified as neurodivergent and / or with mental health conditions as shown in Figure 1. There was also high engagement by students with chronic illness and/or pain, which was not a disability category used in the survey but was disclosed in open-ended responses of the survey and in focus groups. We had participants from all types of tertiary providers, but participants were primarily from universities and polytechnics. Learners from PTEs, apprenticeships, and Wānanga were underrepresented, with only five respondents.

⁷ We acknowledge that this is a low number of participants in the focus groups however, the participants shared numerous stories of their lived experiences which gave us a strong resource to use throughout this report.

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Figure 1: Impact of disability on survey respondents

The number of survey responses was significant in comparison to previous studies as seen in the literature review.⁸ The survey also had 31 percent of participants from disabled students at Te Pūkenga, which is significant as most disability research on higher education has exclusively focused on universities. There was lower engagement with learners at PTEs. The likely reason for lower participation of disabled learners from PTEs is that these providers are smaller, and the project was primarily advertised through student unions, which have a much larger presence in universities than other tertiary providers.

There were very few responses from disabled students in apprenticeships, which could be attributed to apprentices being connected through their employer, and therefore it was harder to reach them as the survey was primarily advertised through student unions. The low response from disabled students at Wānanga could be

⁸ NDSA et al. (2023). Literature Review: Disabled Learners' Experiences in Tertiary Education [Literature Review](#) — [National Disabled Students' Association \(ndsa.org.nz\)](#)

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

attributed to the research not being done through a Kaupapa Māori approach. Using a Kaupapa Māori approach is a way to improve this project in the future.

Respondents to the survey were overwhelmingly European/Pākehā, which is consistent with the proportion of European/Pākehā students enrolled in tertiary education.⁹ However, the survey was not representative of the data from the 2013 census which stated Māori had a higher-than-average disability rate in New Zealand.¹⁰ Female disabled students were over-represented in the survey responses which could be indicative of the fact that females are more likely to be enrolled in tertiary education.¹¹ Forty percent of survey respondents identified as part of the rainbow community. Similar research found a correlation between neurodiversity and the rainbow community.¹² Respondents who identified as part of the rainbow community were made up of 76 percent university students with the rest (24 percent) being from Te Pūkenga.

Survey participants were also asked what they were studying. A high number (34 percent) of respondents were studying in the field of society and culture. The second most popular field was health, studied by 18 percent of respondents. Fewer respondents were studying in fields such as architecture and building (0.9 percent), food and hospitality (1.7 percent), and agriculture and environmental studies (4.7 percent). These proportions are generally consistent with the proportions of all students enrolled at bachelors level. The only field of study that was underrepresented in the survey was management and commerce.¹³ More than half of the survey respondents (57 percent) were studying at bachelors degree level. This

⁹ Education Counts. (2022). Tertiary population data. [Tertiary population data | Education Counts](#)

¹⁰ Statistics NZ. (2013). Disability Survey 2013. [Disability-Survey-2013 \(1\).pdf](#)

¹¹ Ministry of Education. (2022). Tertiary Participation 2022. [Tertiary participation | Education Counts](#)

¹² Gender Minorities. (2021). Autistic Transgender People. [Autistic Transgender People - Gender Minorities Aotearoa](#)

¹³ Education Counts. (2022). Tertiary participation. [Tertiary participation | Education Counts](#)

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

was partly due to the higher number of respondents attending university, as well as higher numbers of bachelor's students at Te Pūkenga responding to the survey.

Figure 2: Survey respondents' genders

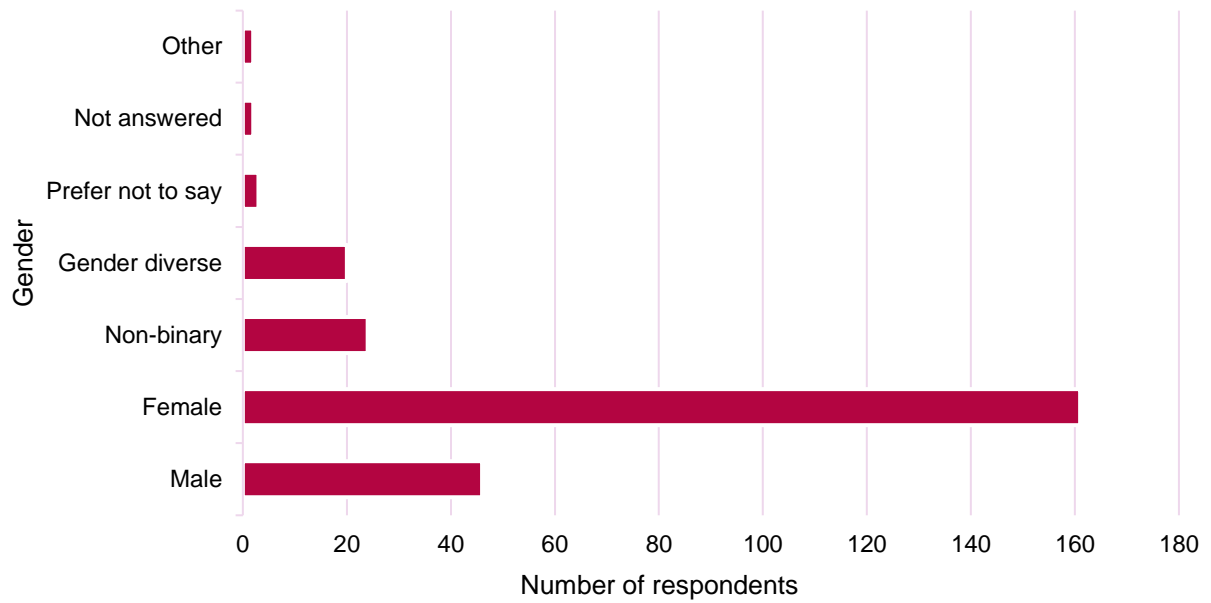
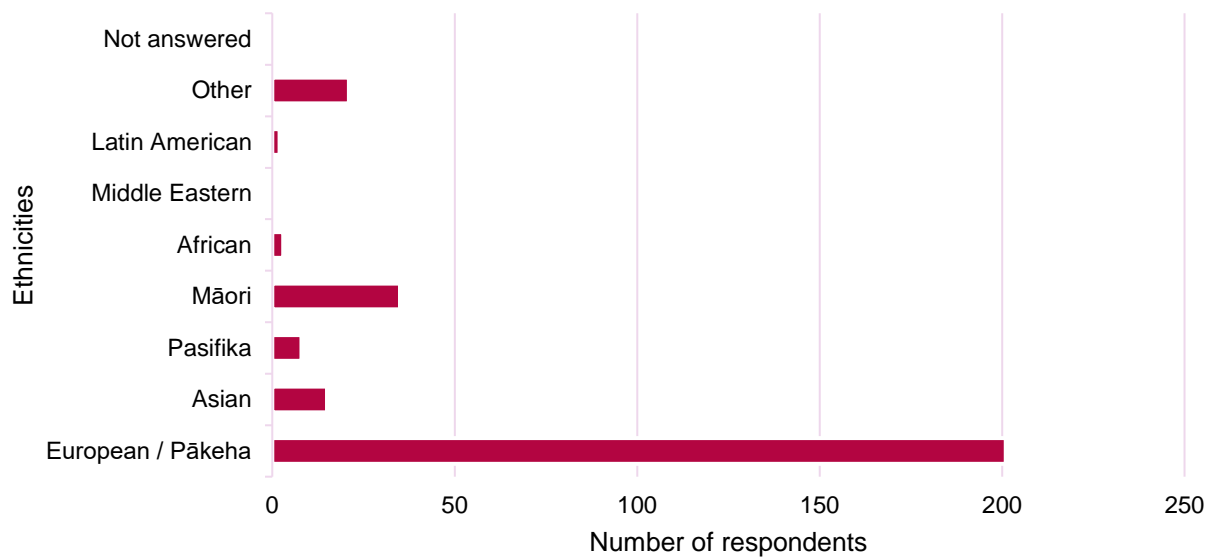


Figure 3: Survey respondents' ethnicities



Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Findings

Accessibility

A lack of accessible learning environments (both physical and online) and difficulty in accessing disability services within tertiary providers were core issues in the responses from both the surveys and the focus groups.

Participants raised that self-disclosure, lack of formal diagnosis, financial pressures, and physical barriers can make the learning environment and disability services difficult to access for disabled students. Although many tertiary providers did offer support, this support was reported as difficult for disabled students to access.

The figures below show what supports are commonly offered to and received by disabled students. Figure 4 outlines supports offered by providers that students are aware of, whilst Figure 5 shows the supports received by survey respondents. Nearly a quarter of respondents (23 percent) said the support they received was not enough, and a further 48 percent of them said that this support is only partly enough or were unsure if it was enough.

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Figure 4: Supports offered by providers

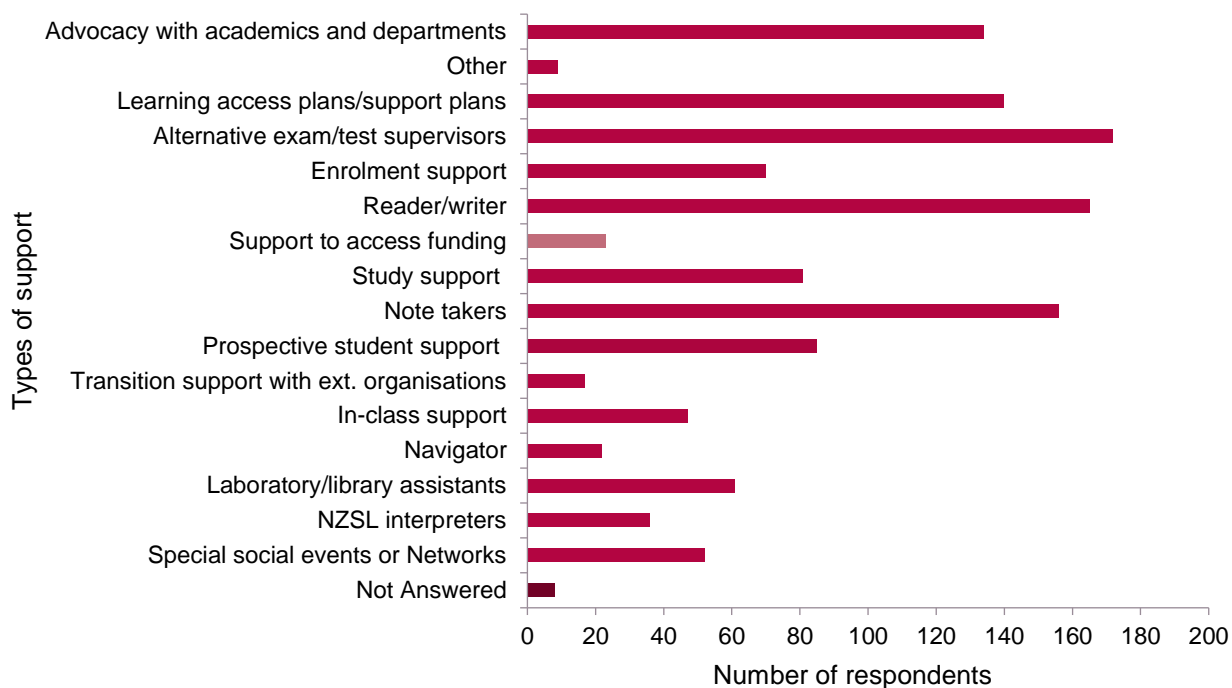
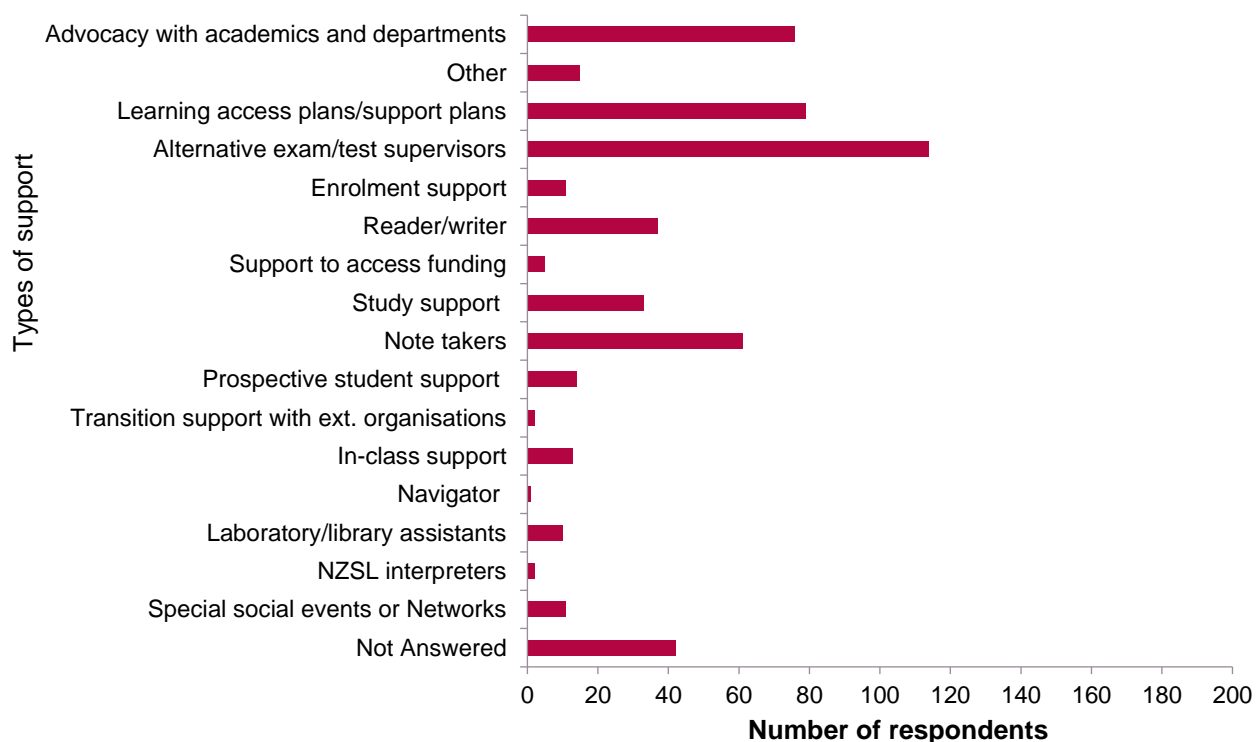


Figure 5: Supports received by respondents



Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Self-disclosure

Self-disclosure in this context is a process of communication where students have been made to reveal information about themselves and their disability to receive support. This creates a barrier to accessing supports when it is repetitive and difficult to provide evidence of disabilities. Multiple participants stated that they needed to repeatedly share personal information to get support. Participants in the survey and focus groups identified self-disclosure to be a major barrier to accessing support from disability services and teaching staff.

“I had to disclose a high volume of personal information repeatedly and frequently to access services which led to me feeling re-traumatised every time I had to prove my disability to a new person. I also had to get evidence from GPs, counsellors, and psychiatrists which came at a financial cost to me along with extra time and energy.”

As well as the vulnerability that comes with self-disclosing disabilities, there is also the issue of evidencing this, and the emotional effect of not having lived experiences recognised as legitimate. Evidence could include medical certificates, proof of a formal diagnosis, or mobility cards. A lot of disability services and teaching staff require formal diagnoses which can be difficult and expensive for disabled students to acquire. Key issues highlighted by participants in the survey and focus groups included the cost of diagnosis and long waitlists to get diagnosed. For neurodivergent students, these included difficulties getting diagnosed through the public system and often needing to go private which incurs its own costs. Autism New Zealand has done research that shows adults are more likely than children to get a diagnosis through private healthcare.¹⁴ This barrier is also applicable to disabled students with rare disorders or chronic illnesses.

¹⁴ Autism New Zealand. (2020). Autism/Takiwātanga: The pathway to diagnosis and supports in New Zealand. [Autism-NZ-Diagnosis-Report-Final.pdf \(autismnz.org.nz\)](https://autismnz.org.nz/Autism-NZ-Diagnosis-Report-Final.pdf)

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Self-disclosure policies were reported to vary across providers, with some not requiring evidence, and some strictly requiring evidence. There was no mention from respondents of support provided for self-disclosure, such as support people. One participant discussed how they found disclosing and evidencing their disability easier as it was a well-known disability. However, their friend who had a lesser-known disability, was questioned more and found it more difficult.

Accessing support

Accessing support was reported as taking a lot of time for some disabled students, with 26 percent saying they spent more than four hours during the last semester accessing support.

For the purposes of this report accessing support was considered time spent enrolling in disability services, establishing exam supports, and the administrative work required to secure supports. It did not include assessments required for diagnoses. The time spent accessing support is especially difficult for disabled students whose disabilities affect their energy levels, such as chronic fatigue. It was noted by participants that at post-graduate levels disability supports are more difficult to access and not explicitly offered. This could be because sometimes post-graduate students have less contact with the provider, and its support services, than undergraduates.

Accessing learning environments and platforms

Physical barriers to accessing the learning environment were raised by participants as hindering their participation in tertiary education. Twenty percent of survey respondents said that their learning environment is difficult to access. Some participants noted that the disability services are not well advertised, and sometimes inappropriately named, which leads to confusion and lack of support for some disabled students. Participants of the survey and focus groups raised that parking at their providers is limited and expensive, and that even for those with disability parking permits there are not many disability parks available.

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Older buildings at providers were identified as being physically inaccessible with more stairs, older chairs that were uncomfortable and caused increased pain, fixed desks, and lack of power points to plug in assistive devices. For neurodivergent students, and disabled students with mental health challenges and/or chronic illnesses, they noted it was difficult to study on campus due to noise when there is a lack of low-sensory environments available.

“When I requested a special chair, the lecturer brought it in, made a big deal about it, and said things which made me feel bad. They then made me sit at the front of the class away from my peers.”

Issues with physical environments, like buildings, meant that some disabled students need to request specific accommodations such as a different chair to use, which can lead to isolation from the rest of their class. Another barrier raised by participants was unstable Wi-Fi, meaning those who need assistive technologies cannot always access it.

Assistive technology can include computer programs which are used to increase, maintain, or improve the capabilities of disabled students through support with speaking, typing, writing, hearing and other functionalities. One participant mentioned that the use of computer-based assistive technology is becoming more restricted due to the rise in Artificial Intelligence (AI). This is because AI is deemed a risk to providers as students can use it to cheat. Some providers, who are not familiar with assistive technology, are determining it poses the same risk and placing a blanket ban on both.

Some participants noted that a lot of lecture recordings don't contain captions, indicating providers may not be using the most up-to-date software or are unaware on how to enable captions.

Another access barrier for disabled students was the challenge of being supported to manage their workload in a way that recognises the impact of their disability. Nearly two-thirds (63 percent) of survey respondents said the number of hours they study is

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

directly related to their disability. Examples of this are disabled students with chronic illnesses that affect energy who struggle to fully participate in their studies. Focus group participants raised that teaching staff are less accommodating to disabled students who need to take breaks during long classes or need extensions on assignments due to the impact of their disabilities on their energy levels.

This is especially evident in Science, Technology, Engineering, and Mathematics (STEM) courses. Disabled students who miss classes due to their disability often end up losing credits unless they can provide medical evidence for their absence. Repeatedly providing this evidence is unsustainable due to the ongoing cost and efforts required to get medical certificates or similar documentation from medical practitioners. This leads to some disabled students dropping out of STEM courses.

“My lecturer would only provide lecture slides for lectures I missed if I provided medical certificates each time, I was absent. I ended up dropping out of the paper within the first two weeks of the semester because it would have been too difficult to sustain”.

Consistency and reliability

Among disabled students who do access some support from their providers; many then face issues around the inconsistency and unreliability of those supports. Twenty percent of survey respondents noted their supports change depending on the teaching staff. Disabled students said the support they receive could vary day-to-day. Some teaching staff do not receive the support plans of disabled students. For example, lecturers might not share these with tutors. This means that supports that have been allocated and are expected for the disabled student are not implemented consistently. A few respondents raised that this issue is worse when there are staffing cuts and therefore, a frequent change in teaching staff.

An overwhelming number of responses discussed the disparity between support from disability services and support from teaching staff. Participants highlighted that disability services tend to be more reliable and accessible than teaching staff.

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

Teaching staff were reported to often neglect using the support plans provided by disability services and to have less understanding of the barriers facing disabled students. One third (31 percent) of survey respondents said it was either difficult or impossible to ask for support from their teaching staff.

Many participants raised that teaching staff were often not trained in how to support disabled students, and those who were, had done so voluntarily as it was not a requirement. This created discrepancies in how disabled students were supported by different teaching staff.

Disability services were described as more willing than teaching staff to put supports in place but were still inconsistent on what supports were provided and to which students. Many participants perceived that their providers disability services were understaffed and under-resourced, which led to a lack of reliable support. Due to unreliable support, some disabled students had fallen through the cracks. One participant described a situation where the support they received at the start of the year was taken away by the end of the year due to lack of resourcing.

“When I first began university, disability services made me a support plan that laid out my access needs, but then my provider stopped support plans from being sent to lecturers due to confidentiality. I then had to send my outdated support plan manually to lecturers for the rest of my degree.”

Teaching staff were reported to have dismissed support plans set out by disability services and required disabled students to disclose personal information about themselves again to access support from them. Some of the research participants discussed often having to miss lectures due to their disability, and when they asked teaching staff for the course materials were told they needed a medical certificate, even if this accommodation was already deemed necessary by disability services.

Policies around attendance and grading varied by institution, leading to different outcomes for disabled students, some of whom lost grades due to absence. Support was also inconsistent due to disability services not having the authority to enforce

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

teaching staff's use of support plans for disabled students. Respondents highlighted that the inconsistency and unreliability of their tertiary provider's supports created extra barriers for disabled students, which negatively impacted their studies.

Social inclusion and the wider student experience

Experiences of social exclusion and ableism were raised in responses across the survey and focus groups. Nearly a third (27 percent) of survey respondents said their institution was not inclusive at all or did the bare minimum. Only 40 percent of participants said they had never experienced exclusion or discrimination from their provider because of their disability. This was especially evident from disabled students who require the use of mobility aids.

There was a lot of discussion from participants around the social exclusion disabled students face from peers and lecturers. Disabled students who received exam accommodations or similar support reported feeling isolated from their peers and being told that they were "lucky to get perks". Some disabled students shared experiences of being pressured to drop out of courses by teaching staff and who were told that their access needs placed an extra burden on staff and non-disabled students.

"I wear coloured glasses due to my disability and I was told to 'take the ridiculous glasses off by a lecturer who was aware of my disability.'"

Student accommodation was brought up as being inaccessible, with Residential Assistants (RA) not being equipped to support disabled students. One of the participants was an RA and said that they were not taught about different disabilities and what support was on offer to their residents with disabilities. There was an example of a Deaf student who needed support to evacuate in the event of an emergency, but the halls were not equipped for this. Their solution was for the student to always leave their door unlocked so another resident could come and get them in the case of an emergency. This meant that their belongings were not secure and placed the burden on another resident. This student left the hall after six months.

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

The inclusiveness of student events varies by provider. Some participants noted there are specific events for disabled students and most often student events are wheelchair accessible. However, most participants highlighted that student events are often inaccessible to disabled students and not enough access information is provided about events for disabled students to feel safe attending. This leads to disabled students feeling isolated. One respondent noted that funding for student events was often included in fees through the student levy which meant they were paying for events they couldn't safely access. Participants gave examples of some student organisations for disabled students which were praised. However, participants felt that wider student organisations were not inclusive.

Many responses from neurodivergent students noted that neurodiversity is often treated negatively by teaching staff. There were examples of neurodivergent students being labelled as problematic, disruptive, and hyper-sensitive by teaching staff. There were also examples given of providers, teaching staff, and non-disabled students pushing the harmful narrative that neurodivergent diagnoses are a 'trend', which led to neurodivergent students having to repeatedly advocate for their needs to be met.

In both the survey and the focus groups, participants were asked about their knowledge of The Education (Pastoral Care of Tertiary and International Learners) Code of Practice (the Code). The Code sets out providers' responsibilities to diverse learners including disabled students requiring that where possible, access barriers to provider facilities and services, are removed. The Code also includes requirements to consult with learners on wellbeing and safety practices, provide staff with ongoing training and resources in relation to diverse learners, and foster safe learning environments. NZQA is the administrator of the Code and tertiary education providers are required by legislation to give effect to the Code.

Most survey respondents (78 percent) and many of the focus group participants had never heard of the Code. One participant who had heard of the Code felt that it was not explicit enough about disability to protect them from instances of ableism and the

Let's Get Accessible:

Disabled students' experiences navigating the tertiary education system.

lack of supports they receive. Another participant felt the Code was too vague and they couldn't use it to challenge providers when something went wrong. Some felt the Code is not advertised to students widely enough for them to understand it. While the Code specifies the role of providers in ensuring the provision of policies and processes to support the wellbeing and safety of learners, the information provided by respondents does not reflect this is happening.

Student advocacy

Respondents to both the survey and focus groups gave examples of times they had had to advocate for themselves to receive the supports they needed. They were also asked about the opportunities they have had to be part of consultation on disability matters by their provider, in line with the requirements in the Code.

Nearly a quarter (23 percent) of survey respondents had been asked to give their opinion on disability issues by their provider, mostly through a survey. Of this 23 percent, 26 percent were offered support to do this, and 11 percent were compensated for their time and effort.

Opportunities for disabled students to provide feedback or consult on challenges they faced varied across providers. Many respondents who had participated in these types of efforts had experienced them as unsafe, unsupportive, or ineffective.

One participant shared that they had been put in a situation to advocate for their class and when they brought up some accessibility challenges, the staff member in charge shut them down and told them that is not what everyone wants, only them. This led the disabled student to feel uncomfortable to continue advocating, and worried for their emotional safety and that of their peers. Others found that the discussions were good, but the implementation of ideas agreed on in these groups either didn't happen or weren't done well enough to make a difference.

“It is often difficult for me to discuss challenges I was facing with teaching staff as they interpret it as criticism, and it isn't well received.”

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Many participants raised that disabled students aren't being offered opportunities to provide input on changes that are made within providers that have an impact on them, such as new building designs, disability services, and removal of mask mandates. Others highlighted that even if disabled students were consulted it was often in an unsafe environment with no other disabled students or teaching staff with disabilities. They did not feel comfortable to raise any disability challenges in this environment as they felt they are only there to fill a gap. Participants raised that it was difficult for disabled students to advocate due to power dynamics present in providers, and they felt that it wasn't fair that those who weren't confident in advocating for themselves should miss out.

In the focus groups there was a lot of discussion around the fact that getting supports was considered the problem of disabled students. Many participants felt that if getting support was worked on collaboratively by disabled students, teaching staff and disability services, their experiences would improve. There was also discussion that when disabled students were comfortable advocating for themselves, that was then taken as a sign by teaching staff that they were independent and did not need the support.

One participant, involved in running a neurodivergent support group, stated that even with the existence and endorsement of the group, it was still difficult to advocate to the education provider's senior leadership. Some participants highlighted it was difficult to advocate for themselves for fear of how it would impact their grades and/or academic future if it was not received well.

Some respondents did report positive experiences of advocating and consulting, which led to better support and more connectedness between peers. One participant noted they continued to advocate for disabled students even though it was difficult for them as they knew it was making a difference for their peers. There were examples of advisory groups and student advocacy supports that were helpful for disabled students. There were also examples of disability action plans put in place

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by providers. However, some participants noted this was often done without adequate input from disabled students.

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Areas for further research

This project has strengthened the information available on disabled students' experiences of tertiary education. However, there are areas where further research is required, including the experiences of:

- disabled students in Wānanga and other tertiary settings, such as Tertiary Education Organisations, and vocational education
- students who have chronic illnesses or rare diseases
- those with visible disabilities compared to invisible disabilities
- disabled students who have left tertiary education without completing their qualifications, and those who were not able to enrol in tertiary education.

It would be valuable for further research to examine the intersections between ethnicity and disability and include case studies of how tertiary education providers are supporting disabled students to succeed.

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Appendix: Data collection methods

The anonymous survey was created by the Ministry in consultation with NDSA, TEC, and NZQA, and hosted on Citizen Space. The survey consisted of 27 questions divided into three categories: **population, experience, and demographics**. Most questions were multi-choice that followed a Likert scale of options with a few open-ended response questions. All questions on the survey were optional. The survey was live for one month. The survey was translated into New Zealand Sign Language (NZSL) through embedded videos on each page of the survey. The survey was solely digital and primarily distributed via posters with a QR code, and as a link with background information in emails to:

- student organisations,
- disability and student support services across different providers
- disability organisations for it to then be shared to networks of learners.

The survey was also shared via social media by all organisations involved with the project.

The focus groups were held in person across the country and online. There was one online focus group with NZSL interpreters available. In-person focus groups were held in Ōtepoti Dunedin, Ōtautahi Christchurch, Te-Whanganui-a-Tara Wellington, and Tāmaki Makaurau Auckland. All focus groups were facilitated by Ministry and NDSA-approved researchers who were disability informed and/or had lived experience with disability.

Not all focus group participants had engaged with the survey. The focus groups were open discussions with a focus on learners' experiences with accessibility, inclusion, disability services and staff, lecture and assignment policies, and knowledge of the Code. Participants were also supported to discuss anything else they felt may be relevant. Each session ran for approximately two hours and support people were

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welcome to attend alongside participants. None of the focus group sessions were recorded and each session had a note taker who recorded notes onto a document that the facilitators and report authors had access to.

Several measures were taken to ensure the anonymity and privacy of participants in both the survey and focus groups. In the survey, no personal details such as names or contact details were collected. Demographic information such as ethnicity, age, gender, and disability type had been collected but these questions were optional and only the researchers from the Ministry of Education had access to the raw data.

All other potential identifying information in survey responses was removed and not included in this report. In the data, notes from focus groups, and this report, participants were referred to by a number and digit, e.g., Participant A1. The participants were further anonymised by using they/them/their pronouns to ensure their privacy and to eliminate gender being an identifying factor. The Ministry's Ethics Group was consulted and approved the work being done during all relevant parts of the project.

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