THE REVOLUTION WILL BE INCLUSIVE

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OBJECTIVE:

Oftentimes, disabled people are talked about as if they aren't a part of campus. That's not inclusive. This presentation aims to change that because people with disabilities ARE students, faculty members, and staff.

WE'LL LEAVE A FEW MINUTES AT THE END FOR Q AND A

For those of you who have questions that you aren't comfortable with sharing during our time together, feel free to email me at info@reyma.org



MORE ABOUT ME:

Reyma McCoy Hyten, MA, CESP (Certified Employment Support Professional)

She/her

First Black woman to serve as Commissioner for the US Administration on Disabilities

Former Executive Director, Central Iowa Center for Independent Living (CICIL)

I facilitate our trainings on implicit bias, privilege, and disability/diversity/intersectionality internationally

2019 AT&T Humanity of Connection Award honoree



AND NOW...

Let's begin!

"DISABILITY", AS DEFINED BY THE ADA:

• THE ADA DEFINES A PERSON WITH A DISABILITY AS A PERSON WHO HAS A PHYSICAL OR MENTAL IMPAIRMENT (DISABLED PEOPLE DON'T LIKE THAT WORD) THAT SUBSTANTIALLY LIMITS ONE OR MORE MAJOR LIFE ACTIVITY. THIS INCLUDES PEOPLE WHO HAVE A RECORD OF SUCH AN IMPAIRMENT, EVEN IF THEY DO NOT CURRENTLY HAVE A DISABILITY. IT ALSO INCLUDES INDIVIDUALS WHO DO NOT HAVE A DISABILITY BUT ARE REGARDED AS HAVING A DISABILITY. THE ADA ALSO MAKES IT UNLAWFUL TO DISCRIMINATE AGAINST A PERSON BASED ON THAT PERSON'S ASSOCIATION WITH A PERSON WITH A DISABILITY.

"DISABILITY", AS DEFINED BY THE ADA:

• IT IS IMPORTANT TO REMEMBER THAT IN THE CONTEXT OF THE ADA,
"DISABILITY" IS A LEGAL TERM RATHER THAN A MEDICAL ONE. BECAUSE IT HAS
A LEGAL DEFINITION, THE ADA'S DEFINITION OF DISABILITY IS DIFFERENT FROM
HOW DISABILITY IS DEFINED UNDER SOME OTHER LAWS, SUCH AS FOR SOCIAL
SECURITY DISABILITY RELATED BENEFITS.

GENERALIZATIONS AND STEREOTYPES

WHEN WE DON'T INTERACT OFTEN WITH PEOPLE WHO ARE DIFFERENT FROM US- OR REALIZE THAT SOME PEOPLE WE INTERACT WITH ARE DIFFERENT FROM US- WE CAN FALL INTO THE FOLLOWING TRAPS:

GENERALIZATIONS

• GENERALIZATIONS ARE STATEMENTS OR BELIEFS ABOUT A CULTURAL GROUP BASED UPON FACTUAL EVIDENCE. WHILE GENERALIZATIONS CAN APPLY TO THE MAJORITY OF PEOPLE WITHIN A GROUP THEY MAY NOT BE TRUE OF EVERY SINGLE PERSON WITHIN THAT GROUP. GENERALLY SPEAKING, MANY PEOPLE WITH DISABILITIES PREFER "PERSON FIRST" LANGUAGE, BUT MANY OTHER DISABLED PEOPLE PREFER "IDENTITY FIRST" LANGUAGE.

STEREOTYPES

• STEREOTYPES ARE OVERSIMPLIFICATIONS OF A GROUP'S CHARACTERISTICS. STEREOTYPES CAN BE BASED ON SOME FACTUAL ELEMENTS BUT ARE NOT GENERALLY APPLICABLE TO AN ENTIRE GROUP. IT WOULD BE ACCURATE TO SAY THAT MANY DISABILITIES ARE APPARENT, OR VISIBLE. SAYING THAT ALL DISABLED PEOPLE HAVE AN APPARENT, OR VISIBLE, DISABILITY WOULD BE STEREOTYPING

FOR TODAY'S PURPOSES, CONSIDER THIS:

- THE DEFAULT SETTING FOR "IOWAN" IS
 - -WHITE
 - -HETEROSEXUAL
 - -MALE/FEMALE GENDER PRESENTING
 - -CHRISTIAN
 - -WITHOUT A DISABILITY

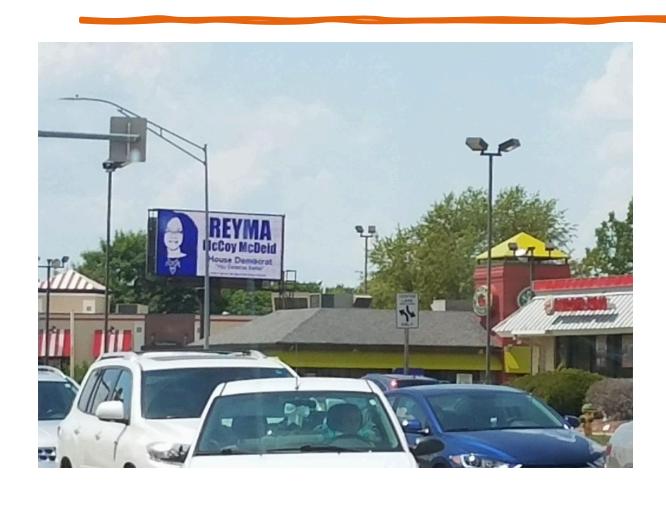
AND:

- THE DEFAULT SETTING FOR "PERSON WITH A DISABILITY IN IOWA" IS
 - -WHITE
 - -HETEROSEXUAL
 - -MALE/FEMALE GENDER PRESENTING
 - -CHRISTIAN

SOME DISABLED PEOPLE:



AND, THEN, THERE'S ME:



• FIRST OPENLY **AUTISTIC PERSON** TO RUN FOR STATE LEGISLATURE IN THE US (ANKENY, 2018)

DISABILITY, IN NUMBERS:

- ▶ 56.7 million people in the US
- ▶ 1 in 5 people
- ▶ 20% of the population (this will change, thanks to Long COVID...)
- ▶ 450,000 in Iowa with disabilities

BUT, BECAUSE THE DEFAULT SETTING FOR DISABILITY IS WHITE AND MIDDLE CLASS...

Disability statistics might not accurately capture the experiences of people with disabilities who do not fit the default setting.

This is important for community colleges to consider, because..

MANY COMMUNITY COLLEGE STUDENTS ARE OUTSIDE OF THE "DEFAULT SETTING":

- 45% WHITE, 25% HISPANIC, 13% BLACK, AND 7% ASIAN
- ABOUT HALF OF COMMUNITY COLLEGE STUDENTS (51 PERCENT) ARE 21 YEARS OLD OR YOUNGER. ABOUT 40 PERCENT ARE AGE 22-39, AND 10 PERCENT ARE OVER THE AGE OF 40.
- OF THE TOTAL STUDENTS, ONLY ABOUT 54% RETURNED TO THE SAME COMMUNITY COLLEGE A YEAR LATER.
- 50% NEARLY HALF OF FIRST-GEN STUDENTS ATTEND COMMUNITY COLLEGE, COMPARED TO 25% OF STUDENTS WITH COLLEGE-EDUCATED PARENTS.

"COMMUNITY COLLEGES SERVE THE MAJORITY OF MINORITIES IN HIGHER EDUCATION AND DEEPLY VALUE DIVERSITY AS A TENET OF THEIR MISSION."

Martha Parham, a spokesperson for the American Association of Community Colleges

"RURAL STUDENTS ARE THE NEW UNDERREPRESENTED MINORITY"

- https://www.bestcolleges.com/blog/rural-students-college-enrollment-decline/

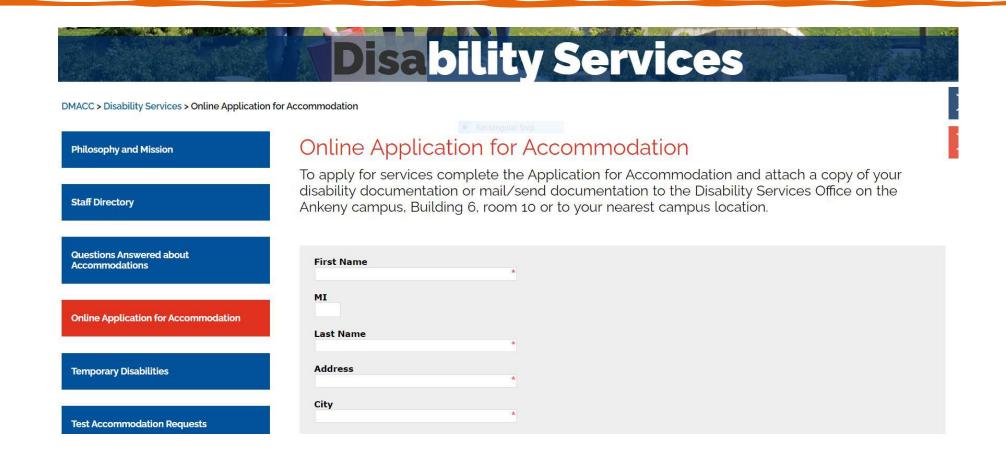
DISABILITY IN UNDERREPRESENTED PEOPLE:

- Disparities in access to quality special education in both "rural" and "urban" can negatively impact accurate diagnoses, supports, and interventions, leading to
- Misdiagnoses
- Overdiagnoses
- Underdiagnoses
- Late diagnoses
- An overall misunderstanding of underrepresented students with disabilities

UNDERREPRESENTED DISABLED PEOPLE MAY:

- "Self-medicate", leading to substance abuse disorders
- Struggle to engage with academics, leading to dropping out of school
- Find it difficult to attain and/or maintain employment, leading to criminal activity, homelessness, and/or other negative outcomes
- Hide their disability status, feeling that the stigma of being of color, etc, is "enough"
- Not even know that they have a disability, due to lack of access to quality special education

DMACC HAS A WONDERFUL DISABILITY SERVICES OFFICE:



BUT WHAT IF YOU'RE A STUDENT WHO DOESN'T HAVE DOCUMENTATION OF A DISABILITY?

What if you are a faculty member who is working with students that you know need support, but who don't realize that they may be a person with a disability?

WHY SOMEONE MIGHT NOT DISCLOSE- OR REALIZE THEY HAVE A DISABILITY:

- "Not disabled enough" many people with non-apparent disabilities don't feel that their disability is as "real" as a person who, for instance, uses a wheelchair or has Down Syndrome
- Shame- some disabilities, like mental illness, are viewed negatively by society
- VA rating is too low
- Lack of understanding even amongst professionals. For instance...

LONG COVID- CAN IT BE A DISABILITY? SYMPTOMS:

- Fatigue
- Brain fog
- Muscle pain
- Night sweats
- Depression
- Hair loss
- Difficulty concentrating

LONG COVID CAN BE A DISABILITY, YET:

Covid long-haulers face grueling fights for disability benefits

Patients and doctors say safety net is unprepared for novel claims stemming from the pandemic







WHFIHFR YOU REALIZE IT OR NOT, YOU ARE SURROUNDED BY DISABLED

- Prioritizing inclusion helps you to ensure that you are meeting the needs of others- whether or not you know their disability status
- Inclusion does NOT require you to have any expertise on disability
- But, with practice, you can become proficient in inclusion

ACCOMMODATION VS INCLUSION

- Accommodation is all about making changes to a space/assignment/etc after it has been created to allow for a person with an articulated need to participate.
- Inclusion, on the other hand, is all about ANTICIPATING and planning for the widest swath of people to be able to participate, as possible
- Accommodation is important because it would be impossible— and possibly costly— to anticipate every single support need that would need to be met BUT prioritizing inclusion presents us all with the opportunity to constantly ask "Who am I unintentionally leaving out in the planning of this event/class/opportunity and how can I proactively address that so that no one is left behind?"

ACCOMMODATION/INCLUSION CONTRAST EXAMPLES:

- Having participants submit a request for captioning for Zoom meetings vs setting all Zoom meetings up with autocaptioning
- Moving a meeting to a location with an accessible bathroom after a disabled participant submits an accommodation request vs prioritizing the use of meeting sites that have accessible bathrooms in the first place
- Designing a website that is full of flashing lights and text within graphics and then adding a companion site that does not use flashing lights or graphics vs designing a website that describes images and keeps flashing to a minimum

ACCOMMODATIONS ARE REQUIRED BY LAW

Inclusion is inspired by empathy.

STAGES OF INCLUSIVITY

- Denial: refusal recognize the importance of inclusion and only makes accommodations when forced to by state/federal law and/or policy
- Defense: recognizes disability, but sees it as an experience to be stigmatized and/or avoided
- Minimization: focuses on "ability" and avoids other parts of being a person with a disability
- Acceptance: shifts perspectives to understand that "normal" is rooted in the preconceived notion that there is only
 one way of doing something correctly
- Adaptation: Can evaluate other's way of being from their frame of reference and, therefore prioritizes adapting the environment to fit as wide a spectrum of people as possible, as opposed to forcing people to fit the environment

DISABLED PEOPLE/PEOPLE WITH DISABILITIES:

People with disabilities constitute our largest and most diverse marginalized group on the planet, encompassing all ages, genders, religions, races, ethnicities, and socioeconomic levels. It is also the only group that any person can join at any time, and likely will if they live long enough. Disability is a natural part of the human experience. People have the right to live independently, control their life, and fully participate in their community. Disability is often a result of social, architectural and environmental barriers. Barriers exist within society, not within the person. Children and adults with disabilities are unique individuals—just like everyone else.

UNPACKING CLASSROOM "BEHAVIORS":

- Anger, Frustration, Not Being Heard (Correctly) = Aggression
- Shame, Fear, Guilt, Embarrassment, Overstimulation, Cultural Taboos with Regard to Gaze = Avoidance of eye contact
- Sensory Processing Disorders, Cultural Taboos with Regard to Human Contact, Physical Trauma = touch "phobia"
- Fear, Isolation, Loneliness = "Paranoia", Aggression
- Sometimes being misunderstood can be debilatating...

INSTEAD OF ASSUMING THE WORST, GIVE GRACE, WHEN POSSIBLE:

•Could a disruptive student be off their meds due to financial constraints? Overstimulation? Overwork? Stress? Pandemic fatigue? Etc?

9/3/20XX

WHEN IN DOUBT, ASK (RESPECTFULLY):

- If you make a linguistic or behavioral mistake, simply apologize and maintain your willingness to communicate. DON'T GET DEFENSIVE.
- Do not talk down to a person.
- Do not ask personal questions pertaining to a person's race/gender identity/religion/disability/etc.
- If you are unsure of how to act or what to say, asking, "How can I support you?" can be a great intervention.

IN CLOSING:

- ASK.
- Google.
- Seek out educational and/or professional development opportunities pertaining to disability, when available.
- And, remember that, just like you, no one likes being put on the spot. Always follow the Golden Rule.

THANK YOU!



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