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## Chipping Away at the Mountain: disabled students' experience of higher education

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**ABSTRACT** Within the context of marketisation and managerialism, this article discusses the effects of recent attempts to dismantle the barriers encountered by disabled students in higher education. Exploring statistics compiled by the Scottish Higher Education Funding Council and drawing on recent Scottish small-scale studies (Baron et al, 1996; Brown et al, 1997; Hall & Tinklin, 1998), it is suggested that although disabled students now have a greater presence in higher education, nonetheless many barriers to full participation remain, and indeed may be reinforced by some initiatives intended to widen access. The article supports Clarke & Newman's contention (1997) that an effect of new managerialism is to sidestep important social, cultural and political problems, leaving these in an unresolved state to be tackled by less powerful people when they encounter them in practice. The barriers met by disabled students are structural in nature, but in the dominant liberal equal opportunities approach means that these are seen by policy makers in individualised and medical terms and therefore the solutions proposed are often inadequate. Initiatives to widen access, rooted in the liberal belief that change will come about through appealing to individual goodwill, have failed to take into account the intensification of labour within higher education and have therefore achieved only limited success.

### Introduction

British higher education has undergone "a more profound reorientation than any other system in the industrialised world" (Halsey, 1995) but nonetheless the sector remains under-researched particularly in relation to the experiences of disabled students. This article investigates the experience of disabled students in higher education through two related lenses. One of these concerns the nature of equal opportunities policies in the area, which derives from a liberal rather than a radical agenda, focusing on equality of access rather than outcome, favouring individual over structural explanations and identifying attitudinal change as the way forward. The second lens applied to the experiences of disabled students in higher education is that of

managerialism and marketisation which have accompanied the expansion of the sector. Commenting on the transplant of such private sector practices into the public sector, Clarke & Newman (1997) maintained that social and political problems have been reduced to issues of management and have been passed down to those with little power within the system to deal with as best they can. They argued:

*Where champions of the managerial state have celebrated its dynamism, our analysis leads us to a different view. What we see is the unstable oscillations of a form of state that cannot reconcile the social contradictions and conflicts of contemporary Britain within a managerial calculus. (Clarke & Newman, 1997, p. 159)*

Within the context of marketisation and managerialism, this article explores the effect of recent attempts to dismantle the barriers encountered by disabled students in higher education which have drawn on liberal equal opportunities approaches. Referring to recent Scottish small-scale studies (Baron et al, 1996; Brown et al, 1997; Hall & Tinklin, 1998), it is suggested that although disabled students now have a greater presence in higher education, nonetheless many barriers to full participation remain, and indeed may be reinforced by some initiatives intended to improve the position of this group.

### Equal Opportunities Policies in Education

Equal opportunities policies in relation to disability in higher education are relative newcomers on the scene; those relating to gender and 'race' are longer established. However, equality policies across a range of sectors in the United Kingdom (UK) generally reflect a liberal rather than a radical or rights based approach. In relation to gender equality policies, for example, Acker (1994) made the following observation:

*In Britain, the discourse of equal opportunity, however flawed, is virtually the only one acceptable to the general public. It is the language of central government and its quasi-governmental agencies and research teams; it is also to a large extent the choice of local government, trade unions and political parties. Terms like 'sexism', 'oppression' and 'patriarchy' are the staples of feminist writing, but official projects and documents will approach them gingerly if at all. (Acker, 1994, p. 45)*

The problems with liberal approaches are well documented; they place the onus on the individual to effect change for him/herself, leading potentially to victim-blaming. In addition, they assume that those who benefit from the oppression of another group are both rational and fair, so that once an inequality is highlighted then it will be swiftly eradicated. This ignores the resistance of powerful groups to giving up power voluntarily. On the other hand, as Acker reminds us, the potential strength of liberal approaches is that they do not automatically assume that individuals are inevitably subject to the

crushing power of patriarchy, capitalism, racism or disabilism. The power of individuals to negotiate their own life course is stressed, echoing the ideas of contemporary European sociologists such as Beck (1992) who refer to notions of reflexive self-constitution.

Liberal approaches in the sphere of disability are clearly deeply rooted, supported by medical and personal tragedy discourses (Oliver, 1990) which focus on individual deficit and the wholly negative consequences of impairment. Within the area of special educational needs, Kirp (1982) maintained that post-Warnock legislation missed an important opportunity to move UK policy for disabled children from a discourse of professionalisation to one of rights, enshrined in United States legislation within PL94 142. The notion of special education needs developed by Warnock focused attention squarely on the child rather than disabled children as a group and the weak notion of partnership was in contrast with ideas of rights which were gaining currency in other aspects of education. The dominance of liberal equality strategies in relation to disabled students and their links with approaches based on marketisation and managerialism are discussed below.

### Managing the Higher Education Market

A major part of the previous Conservative government's agenda was to introduce private sector principles and practices into the public sector. According to Fairley & Paterson (1995), Bottery (1992) and Pollitt (1993) the roots of new managerialism are to be found in Taylorism. In his classic work of 1911, Taylor maintained that "everything to do with human activities at work could and should be measured and that this was the basis of effective management" (Fairley & Paterson, 1995, p. 14). This emphasis on efficiency and effectiveness accorded very well with the claims of the gurus of the right such as Milton Friedman (Friedman & Friedman, 1980) and Friedrich von Hayek (1978) who, during the 1980s, argued the case for the extension of the market into the public sector. State intervention, it was maintained, should be for the following two purposes only:

*... to police the boundaries of the market and to provide where necessary the essential minimum of resources that the market cannot for a variety of reasons secure for those in extreme poverty. The form of relief that should be provided is financial, since cash enables those who receive it to function as consumers in the market, whereas care may disable them by removing any need to make choices. The condition of that assistance should be confined to those who can demonstrate they are poor: this in turn implies means testing (or, in the 1980s vocabulary, 'targeting') of provision. (Deakin, 1994, p. 7)*

Reform of higher education was tackled under the terms of the Further and Higher Education (Scotland) Act 1992. In addition to establishing the former polytechnics as universities, this involved the creation of Funding Councils as quasi-public bodies through which public money was to be channelled and

directed. Clarke & Newman (1997) described the beliefs informing the operation of these quasi-public bodies thus:

*At the heart of this process is the belief that the combination of the 'man of good sense' (the new 'magistracy') and managers empowered to manage will produce more efficient services, freed from the dogma of politics. The notion that this produces a democratic deficit is contested by those arguing that change has led to greater levels of transparency of decision-making, and by enhanced patterns of direct accountability to consumers of services. (Clarke & Newman, 1997, p. 145)*

The Funding Councils operated a purchaser/provider system, requiring institutions to bid for student places at a stipulated unit of cost. In order to make 'efficiency gains', the unit cost per student was reduced by 35% between 1990 and 1995. However, institutions were encouraged to increase the number of places for students and this led to a rapid expansion within the system as institutions sought to compensate for their falling income by accepting more students, albeit at a lower unit cost. Despite controlling the funding regime, Funding Councils maintained that their role was not to plan the future shape of higher education in the United Kingdom, but simply to respond to student demand. Brian Fender, Chief Executive of the Higher Education Funding Council since 1995, argued that:

*... the Council is only a planning body in the sense that it believes that the only safe policies are those which respond to the articulated and, where possible, tested needs of the major stakeholders in higher education. (Fender, 1996, p. 89)*

Within the managed market of higher education, it is assumed that goals of equity, conceived of as equality of access, can be achieved with some small manipulations of the funding regime. This view is clearly expressed by Martin Cave, Professor of Economics and Pro-Vice Chancellor of Brunel University, who maintained:

*... almost all desirable equity objectives can be attained as well within the framework of a market system, through subsidies targeted at individuals or groups, risk-sharing arrangements and measures to correct capital market failures. (Cave, 1996, p. 77)*

Increased competition for students and research money alongside the assessment of teaching and research in the early 1990s had a profound effect on the nature of academic work. Halsey (1995, 1996) documented the 'long secular deterioration of the class conditions of intellectual labour' (Halsey, 1996, p. 30) as salaries declined relative to those in the public sector, labour became intensified and casualised and academics felt themselves bereft of their traditional autonomy. The proletarianisation of academic labour forms a crucial backdrop to the wider access for disabled students' initiatives in Scotland which are discussed more fully below. First, however, let us look

briefly at the forces which have operated to widen access to higher education for disabled students.

### Pressures to Include Disabled Students in Higher Education

The move to widen access to higher education both in Scotland and the wider UK context has come from the following sources:

#### *The Voluntary Sector and the Disability Movement*

The expansion of higher education in the 1960s following the Robbins Report (Committee on Higher Education, 1963) and subsequent moves to widen access largely ignored disabled students. A few universities made efforts to include disabled students, for example Kulikundis Hall at Sussex University provided accommodation for students with significant impairments, but such innovations were rare. Statistics were not available on numbers of students in higher education and there appeared to be little interest in this area at institutional level. Hurst (1996) described how, in 1974, a group of educationists, professionals and some students formed the National Bureau for Handicapped Students with the aim of widening access to higher education for all students irrespective of impairment or learning difficulty. In 1988, the organisation changed its name to Skill: the National Bureau for Students with Disabilities.

Although Skill has been criticised on the grounds that it may be seen as an organisation for rather than of disabled people (Oliver, 1990; Drake, 1996), it nonetheless has played a key role in exerting pressure to achieve fairer representation of disabled people in higher education. In 1990, for instance, following the introduction of top-up loans, Skill campaigned successfully for an extension to the disabled students' allowance (DSA) so that those eligible for a maintenance award from their local authority could also claim additional allowances to cover the costs incurred as a result of their disability. Skill remains a major pressure group for disabled students both in England and Scotland.

#### *The Disability Discrimination Act*

The Disability Discrimination Act of 1995 made it unlawful for providers of services to discriminate against a disabled person by denying services which are available to other members of the public. Although education is exempt from many sections of the legislation, institutions have to comply as employers and providers of services to outside bodies. Part 4 of the Act required the Scottish Higher Education Funding Council to have regard to the requirements of disabled persons and all higher education institutions were required to publish statements of their provision for disabled students.

### *SHEFC Initiatives to Promote Wider Access for Disabled Students*

Like its English counterpart, SHEFC does not see itself as a planning body. Nonetheless, drawing on a human capital perspective which maintains that all talent within a population must be explored, SHEFC attempts to encourage participation by under-represented groups including students of lower socioeconomic status and disabled students. Within this frame, a number of initiatives have been launched to promote wider access for disabled students:

- (a) The Disabled Students' Initiative (1993)
- (b) Support for Disabled Students with Disabilities – Staff Initiative (SSD-S, introduced June 1994)
- (c) Support for Students with Disabilities – Equipment Initiative (SSD-E, introduced September 1994)

These have been supported by the groundwork undertaken by Skill as well as the spirit of the Disability Discrimination Act. However, as elaborated in a later section, they continue to be informed by a liberal rather than a radical approach to disability, seeing the solution to the problem in terms of individual adaptation rather than social transformation, a distinction discussed by Oliver (1990).

In the following sections, an attempt is made to assess the extent to which the expansion of higher education has included disabled students, the experiences of this group within the system and the way in which SHEFC has attempted to manage the market through strategic targeting of resources.

### Disabled Students and the Expansion of Higher Education

Producing a coherent picture of the representation of disabled students in higher education is difficult for a number of reasons. Statistics on this group have only been gathered by HESA (Higher Education Statistics Agency) since 1994/95 and these are dependent on census returns. Institutions vary in the encouragement they give to students to disclose an impairment, for although it may be advantageous to record a high number of disabled students if additional funding is available, institutions often fear an inability to meet expanding demand for support. Students are likely to make a series of judgements as to whether the advantages of disclosing an impairment will be outweighed by the disadvantages of doing so. Disclosing mental health difficulties, for example, may have a negative effect on future job applications and for this reason may be avoided.

Despite the slippery nature of the statistics, it is evident that there has been a small expansion in the number of disabled students entering university over recent years. Separate statistics for Scotland are not available at the present time, but in the United Kingdom as a whole, the percentage of students on the first year of degree courses has increased from 3.5% in

1994/94 to 3.9% in 1995/96. (To place this in context, analysis of the latest Labour Force Survey (Department of Social Security, 1997) suggests that some 15% (5.3 million people) of the working age population has a work limiting long term health problem or disability. This includes people with learning difficulties as well as those with acquired impairment such as industrial injury or respiratory disease).

105mm

Figure 1. First year UK domiciled students on full time first degree courses by gender and impairment, 1995-96. Source: HESA 'Students in Higher Education Institutions 1995-96', cited in SHEFC (1997).

Figure 1 demonstrates that the category of unseen disability, including epilepsy, diabetes and asthma, is the largest, accounting for 53% of all disabled students. Dyslexia (20% of all disabled students) is the next largest group. Those with physical and sensory impairments, the groups which accord most readily with popular notions of disability, account for a relatively small proportion of disabled students (about 3% in each of the categories of blind and hearing impaired, deaf and hearing impaired and wheelchair users and mobility problems). Only 1.4% of disabled students fall into the category of mental health problems and those with personal care needs (the most expensive group to include) account for 0.2%.

105mm

Figure 2. Number of students receiving Disabled Students Allowance in the years 1991/92 through 1995/96. Source: Students' Award Agency for Scotland, 1996.

Interesting gender patterns are also evident. For example, whereas there are fairly equal numbers of males and females in the areas of physical and sensory impairments, males outnumber females by 2:1 in the area of dyslexia and mental health problems, whereas more women are identified as having unseen disabilities. The extent to which these variations represent real differences in incidence or are artefacts of the way in which data are gathered is uncertain, and the statistics probably represent elements of both of these possibilities. Earlier work (Riddell et al, 1994) demonstrated that specific learning difficulties (dyslexia) is not only more likely to be identified among boys, but also among middle-class pupils. We suggested that whereas boys might be more prone genetically to problems with decoding language, the preponderance of middle-class pupils indicated that cultural elements contributed to diagnosis, linked with access to scarce resources including learning support and specialised teaching materials and resources. The preponderance of males in the mental health category is more difficult to explain, since in the wider population women are regarded as more likely to experience such problems. However, there is likely to be some underreporting in this area, with only the most severe cases disclosing, the majority of whom are male. The preponderance of women in the unseen disability category suggests that males were less likely to disclose this information on their

application forms, particularly if they felt that their impairment could be managed without assistance from the institution.

To summarise this section, figures from HESA, supplied by individual institutions and based on information disclosed by students on application forms or subsequent to their admission, indicates that there has been an increase in the number of disabled students in higher education in recent years. This finding is supported by data on numbers of Scottish students receiving the Disabled Students' Allowance (DSA). Numbers claiming this benefit, which is means-tested, increased from 130 in 1991/92 to 542 in 1995/96 (see Figure 2).

However, although these figures provide a broad brush picture of change, they also demonstrate the way in which fundamental assumptions about disability shape the gathering of data and the picture which emerges. High numbers of students in certain categories, for example dyslexia, indicate that this is an area where declaring a disability is likely to provide access to resources (word processing equipment, extra time in exams) without incurring a negative label. Whether males have been quicker to spot this as an opportunity, or whether they are physiologically more likely to experience difficulties in this area, remains a moot point. What is striking about the categories employed by HESA is the extent to which they represent a medical model of disability. Following the Warnock report (Department of Education and Science, 1978), which coined the term 'special educational needs', there was move away from the categorisation of handicap. In recent years, as market-driven reform shave bitten in schools and education authorities, there has been a return to categorisation as a means of allocating resources and placement (Riddell, 1996). In higher education, categories of impairment have not been subjected to the same degree of critical scrutiny and medical definitions continue to play a central role in systems of accounting and resource allocation. They also, however, serve the function of underlining the difference and separateness of disabled students from others and impose a view of impairment as an individual deficit rather than a structural problem, with the onus on the individual to accommodate to the institution rather than vice versa. Although the label of disability in higher education may confer certain benefits, such as access to the DSA, it may also undermine the possibility of inclusion. Indeed, as more students claim the DSA, questions may be asked about how far the apparently elastic category of disability may be permitted to stretch. As Stone (1985) has noted, in societies with work-based modes of distribution, disability represents a useful way of distributing resources on the basis of need. However, as more people gather within its boundaries, it may be seen as a threat to the established work-based principle for the distribution of resources and its borders are therefore policed more rigorously.

## Barriers to Higher Education: the experience of disabled students

Until recently, disabled students in higher education remained an almost invisible group but two small scale pieces of research have drawn attention to the nature of barriers they encounter. The first study was undertaken at Stirling University by Baron et al (1996) and explored the experiences of disabled students training to be social workers within East/Central Scotland, with a particular focus on a small number of students on a wider access scheme. This, the authors claimed, should be seen as an 'acid test' (Michels, 1962) in relation to 'the iron law of oligarchy', for "... if any profession or discipline might be expected to have an enabling ethos in relation to training its new recruits, then social work should" (p. 362). On the basis of an analysis of the admissions policy and practice of each course and interviews with students and course tutors, barriers to inclusion were identified. The second study was undertaken by Hall & Tinklin (1998) at the Scottish Council for Research in Education in Edinburgh. Twelve students were interviewed in depth about their daily experience of university life and shadowed during a typical day. Five barriers to full participation identified in both studies are outlined below.

### *Environmental Barriers*

The Stirling study (Baron et al, 1996) found that none of the higher education institutions was entirely accessible to disabled students and most were generally inaccessible. Information in prospectuses was often inaccurate. Separate accommodation was generally provided for disabled students; it appeared that money was not available to adapt existing accommodation and this social separation often contributed to a student's sense of isolation and dislocation. Library facilities, crucial to the successful completion of a course, often also proved difficult to access. The sheer physical exhaustion and nervous tension in negotiating entry to an unknown university in the absence of car parking space is described by one student:

*... it was hard getting used to just staying on my own, you know, but then having to deal with the extra walking and I didn't have a parking space reserved for me, so it was like I was having to park at the front of the university if there was space, but usually there wasn't or this wee side road and try and park on there and walk up to the university. But it meant a lot of hassle like first thing in the morning. And if I was due in at nine then it would be really, really busy ... the first week was really bad. (Mark, mobility problems quoted by Hall & Tinklin, 1998)*

The fact that universities are not obliged to comply with the requirements of Disability Discrimination Act with regard to physical access means that

building modifications for disabled students have to compete with other projects and may not reach the front of the queue.

### *Problems of Typification*

On university admission forms, students are given the opportunity to classify themselves as disabled and then opt for one of nine categories of handicap based on a medical model of disability. disclosure of disability is necessary to apply for the Disabled Students' Allowance, but may lead to under-expectation of achievement; one lecturer in the Hall & Tinklin study (1998) commented to a student: 'If you're dyslexic, then what are you doing here anyway?'. Alternatively, it might lead to simplistic understandings of what action needed to be taken to remedy the problem. In Hall & Tinklin's study, a student who was hard of hearing reported that in one tutorial other students were exhorted repeatedly to speak loudly to each other and many references were made to the student's hearing impairment. Proceedings were halted when a lawnmower went past, with the effect of making the student feel isolated in the group. Her real need was to be able to see someone's lips when they were speaking so that she could lip read, but the tutor was unaware of this. She described her sense of frustration thus:

*OK, the majority of my associates knew about my problem. There is a difference knowing, telling someone, than having it advertised, especially every few minutes, bringing it up, you know, speak up so I can hear, which is ... not how it works anyway. You know, let me see and I will hear. (Student quoted in Hall & Tinklin, 1998)*

Other examples are given by Hall & Tinklin of how students were forced to pressurise staff into making even modest concessions such as using radio microphones in order to assist hearing through induction loop systems. In line with the medical model of disability, which focuses on individual deficits rather than structural barriers, the onus was placed on individual students to fit in to the university regime with little reciprocal adjustment. Separate accommodation and seating during examinations reflected the special status ascribed to disabled students and this had the effect of distancing them from their peer group and reinforcing notions of normality.

### *Barriers Associated with Liberal Equal Opportunities Policies*

All institutions in Scotland have equal opportunities policies which extend to disabled students, but these may either fail or may reinforce inequality. Baron et al (1996) suggest that if equality is taken simply to mean treating everybody the same then this is likely, following Bourdieu & Passeron (1977), to guarantee inequality because not everybody starts from the same position. Some institutions in Baron et al's and Hall & Tinklin's study assumed that having a disability policy was sufficient to counter inequality, but did not

consider it necessary to adapt their physical or learning environment. Furthermore, there is uncertainty about the extent to which being disabled entitles the student to different treatment, and the point at which this calls into question the value of the award a student will receive. If certain students are perceived by others as receiving undue or unfair amounts of additional support, then there is a danger of a backlash with other students claiming unfair treatment. At one case study institution which featured in the Brown et al's study, it was reported that there was already disquiet with regard to the growing number of dyslexic students who might receive additional help through the DSA to purchase a word processor and would also be given additional time in examinations. Students who were struggling with the course but had not been diagnosed with dyslexia wondered why similar concessions were not available to them.

### *Impairment as a Private Trouble*

We have already discussed the way in which current conceptualisations of disability in higher education encourage both institutions and disabled people themselves to see impairment as an individual difficulty subject to individual solutions. In Baron et al's and Hall & Tinklin's studies, there was evidence of students internalising responsibility for impairment and if there was a risk that disclosure might affect adversely future attempts to find employment, then many concluded it was wiser not to seek help. Two students from Hall & Tinklin's study illustrate these self-limiting strategies. Katy described the difficulties posed for her by the development of ME:

*I have to say there is a world of difference if you have had a disability for a long time or life-long, you know how to find out about these things. If you have never been in that situation before, as effectively I hadn't, ... you do not know what sources of help you should be looking for, where you should be looking for them, but the most important thing is you do not know what's available or what you're entitled to ask for or not entitled to ask for.  
(Student quoted by Hall & Tinklin, 1998)*

Mark, a young man with a physical impairment, described how fears about the possible future implications of disclosure made him wary of asking for assistance:

*You see it was really my physiotherapist when I was younger, she had told me of someone who put down on their form when they went to university that she needed such and such because of her disability. But when she applied for a job, her employers said 'Well because you needed all these things at university, you won't be able to handle the stairs or whatever at the business'. So it meant like she was limited in the amount of jobs she could get. So I've been told anyway. So then that's why, when I applied I just said I've got the disability but I'll*

*have to cope really ... which is what I said, but it was a bit harder than I thought it would be. (Student quoted by Hall & Tinklin, 1998)*

Many barriers encountered by disabled students stem from the entrenchment of medicalised and individualised understandings of disability within higher education. These accord both with a liberal equal opportunities strategy and a managerialist model, the former characterising structural problems in individual terms and the latter reducing complex experiences such as disabled identity to readily quantifiable variables, in this case, categorisation of impairment. In the following section, we review the attempts by SHEFC to alter the conditions of the market to achieve greater equality for disabled students, and question whether this is a feasible strategy to effect change.

### SHEFC Initiatives: successfully managed markets?

In 1996, SHEFC commissioned a team based at Stirling University (Brown et al, 1997) to evaluate three initiatives aimed at widening access to higher education for disabled students. The Disabled Students Initiative (DSI), which began in 1993, had a number of ambitious goals, the principle of which was to produce a data base to disseminate good practice and a guide for disabled students to inform them of their rights in higher education. The Support for Students with Disabilities (Staff) Initiative (SSD-S), which ran from 1994 to 1996, provided funding for a full-time national co-ordinator and a part-time adviser/co-ordinator for disabled students in all Scottish higher education. Finally, the Support for Students with Disabilities (Equipment) Initiative (SSD-E) provided a lump sum for consortia of institutions to purchase equipment.. The funding of the initiatives varied markedly; the SSD-E was funded to the tune of £2 million whereas the SSD-S attracted only £250,000. The evaluation employed a range of methods including interviews with key informants, a questionnaire to members to the senior management team with responsibility for disabled students in all institutions and case studies of six institutions (two ancient universities, one Robbins university, one new university and two monotronics).

### *Positive Findings from the Evaluation*

The evaluation was by no means negative in its tenor and suggested that the initiatives had contributed to advancing provision for disabled students in Scottish higher education in a number of important ways including the following:

- P senior managements were displaying more interest and active participation in this aspect of higher education;
- P application and admissions procedures taking account of disabled students were generally in place;
- P special examination arrangements were in place and uptake had increased;

- P support for disabled students had been included, in some institutions in mainstream financial planning;
- P there was increased availability of teaching materials in a range of formats;
- P far more disabled students were known to institutions;
- P awareness of the needs of students with disabilities had increased among library and estates staff;
- P support for disabled students was on the staff development agenda;
- P disability advisory groups, with representation from disabled students, were operating in some institutions.

However, the report did highlight some problems with the initiatives which sprang from their management-driven agenda. Some of these more negative points are briefly summarised below.

#### *Problems Inherent in the Audit Culture*

The data base of good practice developed as part of the DSI foundered as soon as the project finished because no funding was available to maintain it or disseminate information. The main project publication *Access to Success* (SHEFC, 1994), aimed at disabled young people wishing to enter higher education, was unknown to almost all of the key informants and senior managers in case study institutions since it had not been widely publicised.

#### *Preferential Funding for Equipment Rather than Personnel*

The Brown et al (1997) evaluation was critical of the SSD-E Initiative because of its failure to take into account the need for human resources to ensure that the equipment was used effectively. Because most disabled students' advisers were not in place at this time, some purchases were never used. Furthermore, some equipment money was used for purposes which could only loosely be describing as benefiting disabled students. In one consortium, audio-visual equipment was purchased to enable distance learning to take place through video-conferencing, with the underlying assumption that disabled students could study from home. This was in direct contradiction with a view expressed by one manager that:

*The effectiveness of provision is likely to depend in a fundamental way on the extent to which students with disabilities are regarded as part of the general population of students. (Senior manager quoted by Brown et al, 1997)*

Other purchases included mini buses, supposedly to transport disabled students from one site to another, but which ended up as part of a general transport service, and modifications to a swimming pool in need of refurbishment, ostensibly to benefit disabled students in the consortium, but in reality to improve one university's amenities.

The equipment initiative was clearly underpinned by a medical model of disability, with the assumption that an individual student's problems could be

remedied by a particular piece of equipment, the classic 'technological fix'. The absence of trained people to provide support and maintain meant that many items were unused or broken. Attempts to use technology without understanding the social context were seen as unhelpful by one senior manager:

*... technical solutions only go so far; we also need more staff development about the need for lip readers and sign interpreters. (Senior manager quoted by Brown et al, 1997)*

*... we must overcome the impression that (support for students with disabilities) is a technical problem to be solved by computers. (Senior manager quoted by Brown et al, 1997)*

Despite the fact that a considerable sum of money was being spent on the initiative, no accounting arrangements were in place.

A requirement imposed by SHEFC on institutions bidding for money from the equipment initiative was that tenders should be collaborative. This fitted in with the Funding Council's desire to concentrate expensive teaching and research facilities in particular institutions to avoid duplication, but the likelihood of disabled students benefiting from collaborative arrangements had not been explored.

#### *The Institutional Position of the Disabled Students' Adviser*

The Staff Initiative was seen positively by institutions and all agreed to continue funding the post when the pump-priming money ceased. One senior manager commented that it would be politically unacceptable to remove a position which was rated so highly by staff and students. This might be seen as a successful example of SHEFC "achieving desirable equity objectives" through "subsidies targeted at individuals, risk-sharing arrangements and measures to correct capital market failures" (Cave, 1996).

However, the conceptualisation of the post and its institutional position, with accountability to management and responsibility to students with no direct links to academic staff, provide some indications of the likely tensions. As a non-academic, the advisers were responsible for chivvying staff into making provision for disabled students at a time of intensification of academic labour and low morale. Academic staff described their desire for the lot of disabled students to improve, but insisted that this had to be seen in the context of their increasingly pressurised working life:

*... things are very, very bad, you know. The staff-student ratio is very high you're working all the time. And into all of that comes the integration of disabled people into higher education. You can't reject it, but at the same time it squeezes you incredibly. (Head of Department cited by Hall & Tinklin, 1998)*

*As student numbers grow, it becomes more and more difficult for hard pressed members of staff to deal with it as they would like to. One might like to spend a lot of time with a particular student and feel that they deserve it by the effort they are putting in but it is just simply totally impossible. (Lecturer cited by Hall & Tinklin, 1998)*

The difficulty of changing such attitudes by a part-time adviser was described thus:

*I can only chip away at the mountain at the moment. (Disabled Students' Adviser)*

To make this mountain-chipping more effective, advisers were forced to rely on the support of a senior manager within the institution, leading to managerial solutions to problems such as calls for policy audits rather than an attempt to understand academics' thinking. Some advisers, never having worked themselves as academics, interpreted lecturers' reluctance to attend in-service training as intransigence or apathy, rather than as a reaction to intolerable pressure from a range of sources. In line with liberal equality approaches, change was primarily seen in terms of altering out-moded attitudes through appealing to individual good will, rather in terms of challenging the structures which produced these attitudes in the first place.

#### *Inadequate Resourcing at Institutional Level*

A powerful message of the evaluation was that if SHEFC wished to increase the participation of disabled students and to improve the quality of their educational experience, then a sea change was necessary in relation to the funding of higher education. The general financial climate of higher education was seen as:

*... inimical to further development due to resource shortages and the need to justify all activities in commercial terms. The pressure for greater productivity in teaching and research will mitigate against investing a large amount of staff time in supporting individual students. (Senior manager quoted by Brown et al, 1997)*

*... the huge pressure on institutions such as RAE, TQA, student numbers, funding and tuition fees mean that institutions will prioritise with immediate needs in mind ... (and risk) a situation where students with disabilities will become a remote problem which we will deal with when it arrives. (Senior manager quoted by Brown et al, 1997)*

*Our primary aim is to be an academic institution. If SHEFC wants us to prioritise for disabled students, then I would expect them, charities, the Scottish Office to fork out the money. We would not alter our objectives. (Senior manager quoted by Brown et al, 1997)*

If the amount of money targeted at a problem is indicative of its perceived importance, then the participation of disabled students in Scottish higher education would have to be judged a low priority. Whereas the University of Glasgow received about £80 million from SHEFC in relation to teaching in 1996/97, the council spent less than £3 million on all of its disability initiatives in the period 1993-96.

Whilst pointing out the gains which had been made, the Brown et al evaluation highlighted the shortcomings of the initiatives, rooted as they were in a medical model of disability and a liberal approach to equal opportunities, seeing the problem as residing within the disabled student rather than the structure of higher education. They also reflected a managerialist paradigm, with its focus on readily measured categories and outcomes, its assumption that once a policy was stated than implementation would follow automatically and its unwillingness to understand academics' reactions to initiatives in the context of wider structural changes in higher education.

### Conclusions

Disabled people's under-representation within higher education has only recently been seen as problematic and this has come about partly as a result of pressure from voluntary organisations and the disability movement. However, moves to widen access have drawn on liberal rather than structural understandings and have coincided with a sharp reduction in levels of funding per student in higher education. The central question addressed in this article is whether the managed market within higher education is capable of tackling equality issues such as the exclusion of disabled students. Although official statistics are unreliable in terms of providing an accurate picture of the number of disabled students, there does appear to have been an expansion of certain groups and a growing awareness of their needs. The fundamental conceptualisation of disability remains couched within a medical rather than a social model and thus the problem is seen in individualised rather than structural terms. Indeed, some schools appear to have made more progress than higher education institutions in thinking through the meaning of inclusive education.

An evaluation of SHEFC's initiatives in relation to disabled students points to some success in raising the profile of the issue of disability in higher education. However, this success has been tempered by the fact that the initiatives have been couched in essentially managerialist terms, valuing technical solutions over long-term and ultimately more expensive investment in people, placing faith in audit rather than understanding and failing to address major structural issues.

If the position of disabled students in higher education may be seen as a test case of the ability of managed markets to deliver equality, then one would have to conclude that a much more thoroughgoing approach to the creation of socially inclusive institutions would be required. The 1997 Dearing Report

(DFEE, 1997) appeared to advocate more of the same managerialist and medicalised approach to disability. Had Dearing recommended that higher education institutions be required to comply with the Disability Discrimination Act, then the onus of accommodations would have begun to shift away from individuals and towards institutional structures.

Higher education has clearly been incorporated into the managerial state, defining political, economic and structural conflicts as problems to be managed by individual people in particular locations. As a consequence, to quote Clarke & Newman (1997):

*... we can see a trend towards major social contradictions being experienced at the frontline of service delivery organisations. This is uncomfortable for those working there, but more importantly it points to the limitations of new organisational regimes to cope with these problems. (Clarke & Newman, 1997, p. 159)*

The case of disabled students within higher education indicates a number of unresolved questions which apply to a much wider constituency. These hinge on who should participate in higher education, who should pay when additional support is required and to what extent forms of teaching and assessment can and should be modified. In turn, these problems touch on wider issues still to do with the reconciliation of social justice with the recognition of difference (Phillips, 1997).

This article raises a number of questions which can only be addressed by further research and analysis. It has argued that, in the Scottish context, medical discourses of disability, liberal equal opportunities strategies and managerialism and marketisation have combined to create a particular approach to disability in higher education, focusing attention on the position of disabled students but shying away from approaches based on structural transformation. Comparative analyses of systems which have not adopted managerialist approaches to higher education, such as Ireland, or have favoured rights-based approaches to disability equality policies, such as the USA, would shed light on the significance of each of these approaches and would also indicate possibilities for future change.

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