Summary of responses from campus-wide survey on access and disability

1. Do you identify as having a disability?

#	Answer		Response	%
1	Yes		182	18%
2	No		687	69%
3	I have had a disability in the past		38	4%
4	Unsure		70	7%
5	Prefer not to answer		16	2%
	Total		993	100%

99 respondents offered written comments about identifying as having a disability. Themes of responses: naming medical conditions and illnesses, mobility and sensory impairments, learning disabilities, including ADHD; aging; chronic pain; chemical sensitivity; Autism; mental illness; PTSD; diabetes; temporary disabilities; some respondents questioned the definition of disability; some speculated that they had disabilities but had not yet been tested; some described how they manage pain or accommodate disability

2. Do you identify as having a mental illness?

#	Answer		Response	%
1	Yes		223	23%
2	No		615	62%
3	I have had a mental illness in the past		61	6%
4	Unsure		73	7%
5	Prefer not to answer		18	2%
	Total		990	100%

90 respondents offered written comments about identifying as having mental illness.
Themes of responses: predominately disclosure of depression; anxiety; psychotic episodes; eating disorders; social anxiety; bipolar disorder; some described past

or current treatment plans; some described family members or close friends with mental illness; some suspected mental illness but had no formal diagnosis

3. Have you ever disclosed a disability with formal documentation to anyone at Oberlin College - e.g. the Office of Disability Services, Human Resources, your supervisor, your advisor, your faculty, a Dean or your peers?

#	Answer		Response	%
1	Yes		166	17%
3	No		804	82%
4	Prefer not to answer		16	2%
	Total		986	100%

37 respondents offered written comments about disclosing disability with formal documentation.
Themes of responses: description of types of accommodations received; description of frustration or anger at process of disclosing; complicated rules made the process difficult and uncomfortable; some objected to the requirement to disclose; some did not wish to define their conditions as disabilities

4. Have you ever disclosed a disability without formal documentation to anyone at Oberlin College - e.g. the Office of Disability Services, Human Resources, your supervisor, your advisor, your faculty, a Dean or your peers?

#	Answer		Response	%
1	Yes		258	26%
2	No		677	69%
3	Unsure		42	4%
4	Prefer not to answer		9	1%
	Total		986	100%

53 respondents offered written comments about disclosing disability without formal documentation.
Themes of responses: varying levels of comfort in disclosing; some wish to be a resource for others; many saw disclosure as sharing too much information that others had no need to know; some disclosed informally and were able to make adjustments in work procedures or in equipment; faculty members sometimes disclosed to classes; students have sometimes disclosed to classmates and

instructors; questions about whether Disability Services serves staff and faculty members or only students; visibility or invisibility of disability is a factor in disclosure

5. Have you perceived barriers to disclosing a disability?

#	Answer		Response	%
1	Yes		235	24%
2	No		572	58%
3	Unsure		169	17%
4	Prefer not to answer		10	1%
	Total		986	100%

108 respondents provided written comments about barriers to disclosure. Themes of responses: a difficult, complicated process; not sure how or to whom to disclose; reluctance to disclose out of a fear of being seen to complain; high level of dissatisfaction with the response to disclosure (whether formal or informal); social stigma; high cost of providing documentation; fear of being viewed as incompetent; professional bias; intermittent disability is difficult to document; small number reported no barriers to disclosure and a supportive environment; distrust that disclosure would be handled responsibly and respectfully; lack of clarity in the process

6. Whether or not you have a documented disability or mental illness, have you ever experienced a barrier to full participation? Barriers to participation might involve architecture, communication, policies, or social practices.

#	Answer		Response	%
1	Yes		348	35%
2	No		506	52%
3	Unsure		112	11%
4	Prefer not to answer		16	2%
	Total		982	100%

138 respondents provided written comments about barriers to participation. Themes of responses: inadequate assistive and adaptive technology; building access is non-compliant; inadequate and inaccessible restroom facilities; classroom policies were inflexible; extra test-taking time is an inadequate accommodation and often the only adjustment offered; no elevators to gallery of

the Art Museum; elevators are not quickly repaired; some respondents praised helpful HR and Disability Services staff members; some found it difficult to engage in social activities because of stigma and general impatience with disability; lack of good medical care; difficult to reach a pharmacy; non-conforming gender identity can be experienced as disabling; co-ops are often inaccessible and co-op practices are at times ableist; communication is often poor and people seem unwilling to listen; lecture-style classes are often difficult to follow; medical leave is costly, difficult to arrange, and hard to recover from upon return; people in authority can be difficult to deal with when a person is not feeling well; many complaints about health services on campus; poor wheelchair access in dorms and especially at laundry facilities

7. Do you know where to go if you have a question or grievance about access to a campus building, program, course, meeting, public event, or information?

#	Answer		Response	%
1	Yes		356	36%
2	No		391	40%
3	Unsure		235	24%
4	Prefer not to answer		2	0%
	Total		984	100%

74 respondents provided written comments about knowing where to ask a question or report a grievance.

Themes of responses: names of individuals who have shown themselves to be knowledgeable and trustworthy; names of offices; many responses with question marks, indicating uncertainty of whether this person or that office was the best place to seek information; many responses with "I guess I would…but I'm not sure." Many responses indicated that respondents would "ask around."

8. Has anyone ever asked you to accommodate a disability in your course, program, department, organization, team, club, or group?

#	Answer		Response	%
1	Yes		495	50%
2	No		409	42%
3	Unsure		80	8%
4	Prefer not to answer		1	0%
	Total		985	100%

84 respondents provided written comments about being asked to <u>provide</u> accommodations.

Themes of responses: willingness to help; receive few requests; willingness to think creatively about how to modify a task or setting; experience in serving as note-taker; provided accommodations in club sports, in Excos, in OSCA, in the library; several respondents noted that they consider wheelchair accessibility before planning major events; self-disclosure encouraged others to disclose, and this was essential in creating access

9. How often do you initiate the conversation about providing access for others?

#	Answer		Response	%
1	Regularly		165	17%
2	Occasionally		354	36%
3	Rarely		318	32%
4	Never		126	13%
5	Prefer not to answer		22	2%
	Total		985	100%

76 respondents provided written comments about initiating a conversation about providing access for others.

Themes of responses: many did not understand this question; some acknowledged reluctance to bring up access, viewing disability as a private matter; faculty provide statements on syllabi; some said they did so with increasing frequency in conjunction with efforts to establish community standards; some said that they held meetings precisely for this purpose; many included types of access that they spoke about in an effort to open the conversation: allergies, lighting, stairways, doors, communication;

10. Have you availed yourself of any of the formal peer mentoring programs that exist in Oberlin?

#	Answer		Response	%
1	Yes		148	15%
2	No		657	67%
3	Not aware of any		168	17%
4	Prefer not to answer		14	1%
	Total		987	100%

56 respondents provided written comments about availing themselves of peer-mentoring programs.

Themes of responses: employees did not know of any peer-mentoring programs for them; most are for students; most were open to the idea and would like to know more and participate, either as a mentor or a mentee; some expressed astonishment that these programs exist; they would gladly take part if they knew about them; those with experience found peer-mentoring programs to be very effective, even "great"; many mentioned SAAs with gratitude: Student Accessibility Advocates

11. Is someone representing disability issues or people with disabilities on a committee, program, team, or organization of which you are a member?

#	Answer		Response	%
1	Yes		254	26%
2	No		468	48%
3	Unsure		260	26%
	Total		982	100%

55 respondents provided written comments about whether someone represents disability issues or people with disabilities on their committee, program, team, or organization.

Themes of responses: some confusion about the question; no formal representation; not sure, but sometimes disability and access are mentioned in various meetings; many responses about OSCA, where there is formal representation; some responses saw this question as a matter of disclosure, and disability and access were discussed if and when someone disclosed; request that fat-phobia be recognized and included in this conversation

12. Do you know what the law provides for you regarding access?

#	Answer		Response	%
1	Very aware		77	8%
2	Somewhat aware		482	49%
3	Not aware		424	43%
	Total		983	100%

28 respondents provided written comments on knowing what the law provides regarding access.
Themes of responses: wide variety of responses; much acknowledged confusion; little clarity or satisfaction with level of knowledge; some naming of particular laws or titles; deep desire to know more

13. Do you know what the law requires of you regarding access?

#	Answer		Response	%
1	Very aware		88	9%
2	Somewhat aware		421	43%
3	Not aware		477	48%
	Total		986	100%

14 respondents provided written comments on knowing what the law requires regarding access.
Themes of responses: few responses, little clarity

14. Are you familiar with Universal Design?

#	Answer		Response	%
1	Very aware		86	9%
2	Somewhat aware		206	21%
3	Not aware		697	70%
	Total		989	100%

13 respondents provided written comments on their familiarity with Universal Design.
Themes of responses: desire to learn more; those who knew UD advocated for it; desire to think proactively

15. How much, in your view, does disability contribute to diversity on Oberlin's campus?

#	Answer		Response	%
1	A great deal		191	19%
2	Moderately		503	51%
3	Not at all		66	7%
4	Not sure		225	23%
	Total		985	100%

100 respondents provided written comments on disability as a diversity issue. Themes of responses: huge range of responses; strong feelings along the spectrum of "a great deal" to "not at all"; awareness of intersection of identity experiences; awareness of the paradox that disability is so often invisible or kept hidden that it is hard to view it as contributing to diversity; many have never considered this before but are willing to think more about it; need for greater respect was frequently cited; awareness of exclusion of people with disabilities; some respondents were uncomfortable with viewing disability as a diversity issue; call to define disability more clearly; we need to talk about this more on campus

16. Next Steps. We will host listening groups in the spring. What kind of session would you be willing to take part in? Please check all that apply:

#	Answer		Response	%
1	Large-group forum (25 people or more)		486	62%
2	Small-group forum (3-12 people per group)		442	56%
3	Individual listening session (one person speaking with two Working Group members)		165	21%
4	Skype		61	8%
5	Chat		124	16%
6	Other format (please suggest best format)		49	6%

57 respondents provided written comments about formats for future conversations.

Themes of responses: range of comfort levels regarding participation in public conversation; strong desire to talk and listen more; strong need for safety and sensitivity in future conversations; greatest desire is for more conversation about and understanding of mental illness