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An investigation into how disability officers in higher education in Ireland act as advocates, and managing in the era of cutbacks, how reduced funding levels have affected their role

Submitted in partial fulfillment for the Degree of Master of Arts in Disability Studies

The School of Sociology and Social Policy
University of Leeds

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Abstract

Ireland has had a troubling relationship with disability and disabled

people. One example of this has been in the higher education sector

where disabled students have largely been under-represented. Disability

services in higher education have also lacked adequate resources and

personnel, though this situation has improved over the past twenty

years. The creation of the role of disability officer is one such

development, however research investigating the views of these

professionals is extremely limited. The research study that was

undertaken explored the views of disability officers, particularly how they

understand advocacy and the factors that affect this process. In addition,

a second element of this study was how disability officers have been

affected by Ireland's ongoing economic crisis, particularly funding

cutbacks. 8 disability officers working in higher education institutions in

Ireland completed a research questionnaire and their responses were

reviewed using qualitative data analysis. Although not all disability

officers saw as advocacy as part of their role, their understanding of this

issue was largely congruent with previous research findings. Advocacy

was, at times, blocked by problems such as attitudinal barriers amongst

staff in higher education institutions. The extent to which such attitudes

were widespread was an issue of contention between the literature and

the current findings. Nonetheless, disability officers were keen to put the

issue into practice as a means of supporting disabled students. The

effects of funding cutbacks varied between disability officers. The main

outcomes were a reduced capacity to provide one to one assistance,

making difficult choices when prioritising the needs of disabled students

and finally, concerns about future cutbacks which may impact both

staffing levels and the quality of support. Recommendations include

further research in order to investigate the implications of future financial

cutbacks which are likely to continue as Ireland faces a poor economic

outlook.

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Finally, thank you to the disability officers who took part in this research project for your patience, feedback, comments and the information you sent me.

Declaration

I hereby declare that this work, save for the sources specified, is of my own doing and that it has not been previously submitted to this or any other university, body or publication outlet. This research project is submitted in partial fulfillment of the Masters of Arts Degree in Disability Studies (by distance learning) programme at the University of Leeds, United Kingdom.

I confirm that I have read the British Sociological Association's ethical guidelines on research and have discussed ethical issues with my research supervisor, Dr. Alison Sheldon.

I agree that the university library may lend or copy this thesis upon request.

Date: September 1st, 2012

Signed:

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List of Abbreviations

AHEAD - Association for Higher Education Access and Disability

AT – Assistive Technology

BSA - British Sociological Association

CAO - Central Applications Office

CIB - Citizens Information Board

CSPD - Commission on the Status of People with Disabilities

DARE - Disability Access Route to Education

DAWN - Disability Advisors Working Network

DCU - Dublin City University

DOES - Department of Education and Science

DOF - Department of Finance

DOJELR - Department of Justice, Equality and Law Reform

ESF - European Social Fund

FSD - Fund for Students with Disabilities

GEC - Goodbody Economic Consultants

GLAD - Greater London Action on Disability

HE - Higher Education

HEA - Higher Education Authority

HEI - Higher Education Institution

IOTI – Institutes of Technology Ireland

NCI - National College of Ireland

NDA - National Disability Authority

NUIG - National University of Ireland, Galway

NUIMAccess – National University of Ireland, Maynooth, Access. This is the name of the Youtube webpage of the university's Access Service.

OECD - Organisation for Economic Co-operation and Development

PA - Personal Assistant

UCC - University College Cork

UPIAS - Union of the Physically Impaired Against Segregation

USI - Union of Students in Ireland

TCD - Trinity College, Dublin

TCD SDS - Trinity College, Dublin: Student Disability Service

Chapter One: Introduction and Background

Traditionally, disabled people have been excluded from participating in mainstream society. The problem of exclusion has been attributed to attitudinal problems including discrimination. Disabled people's negative interactions with transport staff, health professionals, educators and the police (Scope, 2011) have also been a factor. One other important area where exclusion has occurred is within the education system. This includes the higher education (HE) in Ireland which was the focus of the current study. The present chapter explores how disabled people have been excluded from society, how Ireland has dealt with disabled people, and disability and HE, and finally, the aims of the current study are discussed.

The exclusion of disabled people has, in part, been perpetuated due to: one, the dominance of medicalised interpretations of disability (Shakespeare, 1993) and two, a failure to recognise the role of the social context as a contributory factor in disabled people's experiences. Consequently, professionals dealing with disabled people largely opted to locate the problem of disability within the individual (Shakespeare and Watson, 1997). Unsurprisingly, then, non-disabled experts were often the primary gatekeepers in the field of disability (Oliver, 1992; Barnes, 2008;

Barnes and Mercer, 2010) and ultimately, this meant that little

consideration was given to the voice and influence of disabled

people (Bury, 1996; Oliver and Barnes, 1997). The combination of

these factors has tended to shape the perception that disabled

people are innately dependent and passive (Finkelstein, 1980) and

victims of what is described as the 'personal tragedy' interpretation

of disability (Oliver, 1990, p.3). That is, the belief that the

experience of disability has primarily been connected to disabled

people's personal circumstances and functional limitations

(Abberley, 1992). The next section provides examples of how

some of these perceptions and issues have affected Ireland's

relationship with disability.

Ireland's Relationship with Disability: a Chequered History

Put simply, Ireland has had an uneasy relationship with disability

and disabled people. The Irish approach to disability has

traditionally been underpinned by the tendency to exclude disabled

people and a reluctance to facilitate their participation in society.

Factors underlying this hesitation include the fact that disabled

people in Ireland have often been viewed from a charitable

perspective and as a group to be pitied upon (Commission on the

Status of People with Disabilities, (CSPD), 1996; Kenny, *et al.,*

2000). Historically, they were left without state support (O' Toole,

2003) and the issue of disability has been largely defined within

the medical sphere (McDonnell, 2003a; Association for Higher

Education Access and Disability, (AHEAD), 2008a). One example

being how disabled people have been placed in psychiatric

facilities despite not being mentally ill (O' Toole, 2003).

Additional forms of inequality and exclusion in Ireland have

emerged through inconsistent approaches to service provision and

negative public attitudes (CSPD, 1996; Massie, 2006; Hannon,

2007). This has included perceiving disabled people as being

innately incapable (Conroy, 2010). Considering some of these

findings, it appears that Ireland's approach to disabled people

reflects Oliver's criticisms concerning the 'personal tragedy' view of

disability (Oliver, 1990, p.3). One area that puts Ireland's

relationship with disability into sharp focus is how disabled

students have been dealt within the Irish HE system. This is

explored in the next section.

How Disability fits into Ireland's HE Landscape

Historically, disabled students have been under-represented in Irish HE institutions. A number of factors can help to explain why this has occurred. Firstly, the roots of this problem lie, in part, in low participation rates of disabled students in secondary level schooling (National Disability Authority, (NDA), 2005a), including low expectations amongst parents and teachers (Higher Education Authority, (HEA), 2004a) and finally, in the historical practice of segregating individuals with impairments (McGuire, 2011). Meaning that, ultimately, disabled students have traditionally been unlikely to continue on to HE following their attendance at second level schooling. Secondly, compared to its international counterparts, Ireland falls below average regarding primary and secondary level education expenditure (OECD, 2006). Thirdly, disability related issues traditionally did not feature in both institutional (HEA, 1995) and state policies on education (CSPD, 1996). Finally, the data accounting for the participation of disabled students have not always been reliable (HEA, 2004b; AHEAD, 2009; McCoy, *et al.,* 2009). Indeed, figures originating from Ireland's HE sector may have contributed to this problem (Mulvihill, 2005; Department of Education and Science, DOES, 2006; AHEAD, 2010). One example being, how HE institutions

categorised disabled students and the lack of in depth verification

of data (HEA, 2004c). In spite of these troubling issues, change

has become evident in recent years. This is typified in some of the

shifts in Ireland's approach to disability which are examined in the

next section.

A Period of Change: Outcomes and Implications

Over the past 30 years, there have been significant changes and

forward momentum concerning Ireland's relationship with

disability. These changes include: the introduction of new

legislation (Department of Justice, Equality and Law Reform,

DOJELR, 2005), a focus on providing accessible services, rights

based frameworks, social integration (Doyle, 2003; Good, 2003;

Toolan, 2003), the creation of new statutory agencies and

strategies (Comhairle, 2003; Hannon, 2007) and finally,

developments in the area of education (HEA, undated1; DOES,

2006; AHEAD, 2008b). In spite of these changes, including a drive

towards equality, and attempts to move away from the medicalised

perspective of disability, some disability organisations have

criticised the effectiveness of new public policies (Pillinger, 2002;

McLoughlin, 2003; Conroy, 2010). One example being that

disabled representatives and disability organisations have often

been left out of the consultation processes that examine disability issues in Ireland (McDonnell, 2003a).

Concerning its education system, in contrast to other countries, Ireland has had to introduce widespread changes throughout this area within a relatively short period of time (Coolahan, 2004). One area where this has occurred is within HE. Disability support services and staff are now a mandatory feature of Irish HE institutions (AHEAD, 2006). Their primary role is to provide support to disabled students (Trinity College Dublin Student Disability Service, (TCD SDS), 2012). The duties of disability support services in HE are broad and numerous. They include conducting assessments, administration, co-ordinating and providing the accommodations that are available to disabled students (DCU, 2006; Adams and Brown, 2001; TCD SDS, 2011a). Making referrals to other services, offering disabled students advice regarding disclosure issues (National University of Ireland, Galway, (NUIG), undated) and organising supports (Mulvihill, 2005; NDA, 2007; HEA, 2008) also form part of the remit of disability services in HE.

The responsibility for the provision and organisation of support to disabled students lies with professionals who work in the role of

disability officer. At present, relatively little is known about the experiences and views of disability officers working in HE in Ireland (Rohan, 2008). One additional responsibility undertaken by disability officers is advocating for disabled students (Stodden, *et al.,* 2001; Tagayuna, *et al.,* 2005). However, research examining advocacy from the Irish perspective is extremely limited (NUIG, undated). The next section examines the aims and objectives of the current study.

Research Aims and Objectives

The objectives of this study were to establish the views and experiences of disability officers concerning advocacy and the effect of funding cutbacks on their role. Two specific concerns arise with respect to advocacy. One, it is not clear how 'advocacy' is understood and implemented by disability officers working in Ireland's HE institutions. Two, the capacity and effectiveness of disability officers acting as advocates may be under threat as a consequence of current funding cutbacks that have been implemented. The central research question was: *"what are disability officers' views about their role as advocates for disabled students and the constraints upon effective fulfillment of this role?"* Four specific questions were put forward:

1. How do disability officers approach and understand the issue of advocacy?

2. What factors affect and influence how disability officers advocate for disabled students?

3. How have recent funding cutbacks affected disability officers who work in Irish HE institutions?

4. What strategies are disability officers using to manage reduced levels of funding?

This research project is presented using the following structure: following this introductory section, Chapter Two focuses on the role of disability officers in HE, the impact of reduced funding on disability services in HE and finally, the barriers faced by disabled students and disability officers. Chapter Three presents a detailed account of the research methodology emphasising issues such as sampling, qualitative research methods, data generation, the pilot study, questionnaire design, relevant ethical issues and the use of internet communication. Reliability and validity are also explored. Next, Chapter Four focuses on the type of responses that were received, data analysis and the study's findings concerning disability officers' views on advocacy. Chapter Five assesses the their views regarding the impact of reduced funding levels. Chapter Six provides a final summary of the issues discussed within this

project. The research literature used in the study was primarily

drawn from the areas of disability and HE, including, where

available, information from the Irish context. The following section

provides an overview of the key components of this chapter.

Conclusion

Historically, disabled people have been excluded from participating

in society. One example has been reflected in Ireland's

relationship with disability which has been largely characterised by

responses based on exclusion. Underlying this approach was an

emphasis on perceiving disability as first and foremost a medical

issue. This showed little regard for the role and influence of the

social context in disabled people's experiences of disability. HE is

one area where disabled people have traditionally been excluded

in Ireland. Change has been slow to unfold, though it has resulted

in some positive implications. The greater recognition of the need

for disability resources in HE and creation of the post of disability

officer account for some of these developments. Disability officers

are a relatively new phenomenon in Ireland's HE institutions. They

are part of the support services provided to disabled students. Part

of their role involves activities such as assessing the needs of

disabled students and advocating on their behalf. Presently, it is

not clear how disability officers understand and address the issue

of advocacy. Their effectiveness as advocates may now be

undermined by the impact of reduced funding levels. Having

examined these issues, the next chapter begins with a discussion

of the current study's theoretical perspective, the social model of

disability.

Chapter Two: Dissecting Disability and HE

This chapter begins with a discussion of the social model of disability. Other important issues, such as the role of disability officers in HE, barriers faced by disabled students and disability officers, how Ireland funds the HE sector and the concept of advocacy are also discussed. Essentially, the social model of disability arose as a platform for challenging the dominant, medicalised and impairment centred interpretation of disability. At the heart of the social model approach is the belief that it is society's disabling social barriers that are the primary cause of disability and social exclusion.

Examples of disabling barriers include: exclusion from participating in employment, the inadequate provision of information and resources concerning housing, health, education and leisure services (Pillinger, 2002; Riddell, Tinklin and Wilson, 2004; Ebersold, Schmitt and Priestley, 2011; James, 2002), the perpetuation of negative stereotypes and attitudinal barriers (Hurst, undated; Jacklin, *et al.,* 2007; Stodden and Conway, undated; Dutta, Kundu and Schiro-Geistal, 2009). From a social model perspective, ultimately, it is these factors rather than an individual's physical, sensory or mental impairment that contribute to experiences of disability (Union of the Physically Impaired Against

Segregation, (UPIAS), 1981, Sutherland, 1981; Archer, 1999;

Priestley, 2005; Oliver, 2009).

The social model has been the subject of much debate. Indeed,

one researcher has argued that the model has ultimately been

'bent out of shape' in contrast to how it appeared in its original

form (Finkelstein, 2001, p3). The social model has also received a

number of criticisms. One, that it has oversimplified disability

related issues (Shakespeare and Watson, 2002; Barnes and

Mercer, 2010) and two, that it has propagated the presumption that

the majority of disabled people experience similar types of

oppression and barriers (Barnes, 2008). Three, that it has, to some

extent, downplayed the consequences of impairment something

which has been noted as a source of tension (Shakespeare,

1993). Four, that it has not developed convincing arguments that

can ultimately assist disabled people (Bury, 2000).

Consequently, there have been calls for changes to the social

model approach, including providing more scope to the impact of

impairment (Crow, 1992; Greater London Action on Disability,

GLAD, 2000). However, those intent on pursuing this path have

not escaped criticism. Rae (1996) expressed concern that

refocusing on the issue of impairment may increase the

'voyeuristic' (p.2) tendencies of some non-disabled people who need to comprehend the personal experience of impairment and whose outlook is often skewed towards seeing disabled people as overcoming adversity. This, in a way, harks back to the personal tragedy perspective as outlined by Oliver (1990). Finkelstein (2007) has called the proposals to update the social model 'useless', 'meaningless', and little more than 'shopping basket' (p.3) philosophy. That is, being selective about particular elements in order to suit the personal preferences and objectives of those calling for change.

The social model understanding of disability was applied to this research project for two central reasons. One, to present an alternative, non-medicalised, non-pathological approach to disability. Two, to reflect Ireland's recent attempts to embrace change such as the creation of the position of disability officer, the recognition of the barriers faced by disabled people and that disability has a social context. The social model perspective is briefly emphasised in one publication concerning disability officers in Ireland (Disability Advisors Working Network, DAWN, 2008). However, this alone does not suggest that the model is widely

understood and implemented in Ireland's HE institutions. The next

section examines the role and position of disability officers in HE.

Disability Officers in HE: Who are They and What Do They Do?

Traditionally, the research literature concerning disability and HE

has focused primarily on the experiences of disabled students

(Tinklin and Hall, 1999; Holloway, 2001; Goode, 2007). Thus far,

studies exploring the views of professionals, support providers and

frontline staff who work in HE are notably lacking. One example, in

particular, is the shortage of research concerning those who are

employed in the position of disability officer. Reasons for the

absence of research are not entirely clear, however, the role of

disability officer has, unfortunately, to some extent, not always

been taken seriously (Parker, 2000). Another possible explanation

is that the creation of this role has been a relatively new

development (HEA, 1995; DOES, 2001; Donnelly, 2007) in

Ireland's HE institutions.

In this research project the term 'disability officer' is used to refer to

individuals working in this role in HE in Ireland. The term has been

used across the research literature (Riddell, Wilson and Tinklin, 2002; DOES, 2006; McCoy, *et al.,* 2009). However, other descriptions have also been used. Disability officers have been described as access officers (Dublin City University (DCU), undated; AHEAD, undated), disability liaison officers (Mulvihill, 2005; European Social Fund, (ESF), 2011), disability co-ordinators (Tinklin and Hall, 1999), diversity officers (University of Leeds Equality Service, undated), disability advisors (Farmakopoulou and Watson, 2003; Riddell, Tinklin and Wilson, 2005; Riddell, *et al.,* 2007), director of the disability service (TCD SDS, 2011a) and disability support officers (UCC, 2006; Twomey, Amberson and Brennan, 2010).

Mulvihill (2005) has argued that in some of Ireland's HE institutions, the necessity of making the position of disability officer permanent has yet to be fully realised. Two explanations can help to explain lack of recognition of disability officers. Firstly, the role was traditionally a secondary responsibility undertaken by individuals who often had other, primary duties within their respective HE institutions (NDA, 2007). A more recent study (Philips and Clarke, 2010) offered a differing perspective. That is, how one disability officer is part of senior management within a

university, meaning that disability support is not put aside as a

separate issue, but rather, it is seen as core to the institution's

policies and strategies. Whether this practice is widespread is not

clear, however, Philip and Clarke's (2010) findings do not to apply

all disability services (AHEAD, 2010). Importantly, under disability

legislation, all Irish HE institutions were obliged to appoint an

'access officer' by the end of 2005 (AHEAD, 2006, p.3). The

second reason for the lack of recognition of the role of disability

officers is that funding is primarily connected to disabled students.

Meaning that the funding doesn't necessarily result in the creation

of support personnel positions such that of disability officer (HEA,

2005). This is significant due to the fact that Irish disability officers

have articulated some of the difficulties in relation to hiring

additional support staff (McCoy, *et al.,* 2009). Clearly, then,

disability officers in Ireland have had mixed experiences in terms

of becoming recognised, and the role remains a relatively new

development in Irish HE contexts. The next section explores some

of the studies that have assessed the views of disability officers.

Disability Officers: Findings from the Research

Literature

A finite amount of research has examined the professional

perspectives and experiences of disability officers. Thus far,

studies have been confined to a small group of issues, which are

often, though not entirely, related to disability officers' views on

practical materials, resources and equipment (Stodden, *et al.,*

2001; Tagayuna, *et al.,* 2005; McCoy, *et al.,* 2009). However, other

research has explored their views on institutional policies (Tinklin

and Hall, 1999) such as widening access (Riddell, *et al.,* 2007),

and ethical practices within HE disability services (Parker, 2000).

Researchers have also explored the factors that affect the

efficiency and effectiveness of services (Dutta, Kundu and Schiro-

Geistal, 2009) provided by disability officers, their work with

disabled students (Smith, Carroll and Elkins, 2000; AHEAD,

2008b) and their families (Whelley and Graf, 2002).

In the Irish context, the available research is extremely limited.

One study conducted by AHEAD (2010) is worth exploring in

detail. In this study, researchers used a survey to assess the views

of disability officers in Irish HE institutions. Part of the study was

centred on understanding the impact of reduced funding levels and

how this affects disability officers. Although the study provided details such as the response rate, it was not clear how the survey was designed and planned, whether it was piloted, nor was the method of distribution clear. In addition, aside from detailing percentages of response figures, and including a series of verbatim comments from disability officers, there was no explanation as to how the data were analysed. The researchers offered little elaboration as to the possible meaning and implication of the information provided by the disability officers. The next section assesses the current state of HE in Ireland, including issues such as funding and disability services.

Assessing the Irish HE Landscape: Disability Services and Funding Issues

Ireland's HE institutions range from colleges of education to institutes of technology and universities (Coolahan, 2004). Colleges of education are generally associated with the training of teachers. However, they also provide training to police officers, medical, art and business students. Institutes of technology are post-secondary level HE institutions that engage in research activities and offer learning opportunities from undergraduate to

doctoral level degrees (Institutes of Technology Ireland (IOTI,

undated; Dublin Institute of Technology, DIT, 2011). They are

largely a recent development in the HE sector (Institutes of

Technology Act, 2006). Their role is to provide education and

training that contributes to Ireland's financial, cultural,

technological and scientific experiences (Dublin Institute of

Technology Act, 1992).

Due to variations in research, it was difficult to determine the

precise number of HE institutions that currently operate in Ireland

(AHEAD, 2010). However, there are currently 13 institutes of

technology and 7 universities in Ireland receiving public funding

(Coolahan, 2004). One study has argued that research has not

kept apace and investigated the impact of funding in HE in Ireland

(HEA, 2005). However, as subsequently noted, some studies have

explored this topic. Historically, Ireland has been slow to develop

and pursue the funding of HE as a national priority (Kerr, 2006).

This picture began to change with dramatic increases in funding in

the 1990s and 2000s (Charting Our Education Future, 1995; O'

Toole, 2003, DOES, 2006). Unfortunately, in more recent years

diminished funding levels have become a reality (DOES, 2011). In

reflecting the changes that have occurred, the HEA have pointed

to divergent trends that have emerged. They recorded a 16% decrease in public funding per full time student between 2004 and 2010. During the same period, there was a 20% increase in the number of full time students attending HE (HEA, 2012). Meaning that, HE institutions have to allocate places and spaces for a larger number of students despite having less financial resources with which to do so.

The period of the overall funding increases allocated to HE during the 1990s and 2000s also saw the development of resources for disabled students and disability services (DOES, 2001; HEA, 2004c; AHEAD, 2009; McCoy, *et al.,* 2009). There are, however, limits to both the existing funding structures and the impact they can have. One example being the financial mechanism designated to the support of disabled students. The 'Fund for Students with Disabilities' (HEA, 2005; HEA, undated2), is currently only available to individuals engaged in full time study (Union of Students in Ireland, (USI), 2010). Meaning that, some disabled students may be unable to participate in HE due to the lack of financial support. One other significant issue that overshadows the funding of HE is the recent challenging economic circumstances that have affected Ireland dramatically.

The Potential Impact of Uncertain Economic Times

In 2007, the Irish government's Department of Finance (DOF) put forward economic plans for Ireland's finances for the years 2007-2013 (DOF, 2007). This report, including its discussion of HE and disabled students, spoke about future spending, which in turn, is contingent on a healthy economy. Unfortunately, today, Ireland faces a bleak and deeply turbulent economic environment. At present, it is in the midst of a deep and long term financial crisis (RTÉ News, 2008; Anonymous, 2010; DOF, 2010; Kelly, 2011; Bergin, *et al.,* 2012). This has impacted upon disabled people directly (Conroy, 2010; O' Brien, 2012; Finlay, 2012; RTÉ News, 2012).

In HE, the financial structures that support the needs of disabled students and the disability services in Ireland's HE institutions have been also affected by the fiscal crisis (AHEAD, 2010; Trinity College Dublin (TCD), 2009; TCD SDS, 2011b). One service supporting disabled students has had a 40% reduction in funding at a time when the numbers of disabled students are increasing (Nolan, *et al.,* 2010; Nolan, Gleeson and Lewis, 2011). Another organisation has identified a 65% drop in funds for students with

learning difficulties (AHEAD, 2009). Research prior to the

economic downturn showed that there were calls for more

resources in HE, including the deployment of additional disability

officers (HEA, 2005; NDA, 2007). Clearly, Ireland's financial

problems have put a significant strain on the possibility of such

calls being implemented and disability services in HE. The next

section examines the concept of advocacy, its role and application

in the Irish context.

Understanding Advocacy and its Relationship with Disability

There is no universal agreement as to what advocacy is and how it

is implemented. Advocacy is currently understood as a process of

representation for assisting people, including those who may be

regarded as vulnerable (Citizens Information Board, (CIB), 2009a).

Part of advocacy is the use of strategies that can ultimately

empower individuals (Pillinger, 2002; CIB, 2007; National

Advocacy Council, (NAC), undated). Other aspects include arguing

for someone's rights (Bateman, 2000; Birmingham, 2001) and

facilitating their ability to make choices (Goodbody Economic

Consultants, (GEC), 2004; CIB, 2008a). For advocates, the

process necessarily involves negotiation skills, (CIB, 2008b),

making decisions (CIB, 2009b), and an ability to understand an

individual's needs (CIB, 2007). The role of an advocate can be a

complex and demanding position that needs to be understood as

being distinct from other interventions such as social work and

simply providing advice (CIB, 2010). There are no set templates

that advocates and advocacy services use when working with

disabled people. Each situation must be dealt with individually

(*Ibid*).

Advocacy is a relatively new concept and development in the Irish

context (NDA, 2003; CIB, 2008a). Historically, there has been a

lack of policy and funding in the area and thus, advocacy has

typically not been in place to address the needs of disabled people

in Ireland (Birmingham, 2001). Unsurprisingly, then, some

disability organisations have been critical of progress on the issue

(Comhairle, 2003). Currently, advocacy services across Ireland

have been facing increasing demands in part due to the ongoing

economic crisis (CIB, 2009a). The view that 'advocacy provision in

Ireland is rich and diverse' has been put forward (CIB, 2010, p.

35). On paper, this is mirrored in the number of services outlined

by CIB (2008b). It is, however, worth remembering that the

aforementioned claims of plentiful resources originate in reports from the same organisation.

Advocacy has been recognised as part of a disability service's function in HE (NUIG, undated; Nolan, Gleeson and Lewis, 2011). Examples of advocacy processes in HE include liaising between a student and a tutor (Nolan, Quinn and MacCobb, 2011) and the provision of advocacy workshops (Dutta, Kundu and Schiro-Geistal, 2009). In terms of disability officers specifically, a limited number of studies have noted that they engage in advocacy (Stodden, *et al.,* 2001; Tagayuna, *et al.,* 2005). Presently, however, there are no Irish studies that speak to disability officers' views and experiences regarding this issue. Having explored the concept of advocacy, its relationship with disabled people and the Irish context, the next section provides and overview of this chapter.

Conclusion

It is clear that the responsibilities of disability officers are abundant, broad and detailed. Research, however, has generally not kept apace with the views and experiences of the professionals

employed in this role. Studies have largely concentrated on disability officers' views on policy issues, equipment, materials and the delivery of support. Over the past two decades the funding of HE in Ireland has undergone significant and necessary change. This has positively influenced the growth in disability services. However, one notable limitation to the funding is that it is restricted to full time disabled students. In addition, despite changes, overall funding levels have been declining in recent years. This is at a time when the number of all types of students has increased steadily. This reality coincides with an economic crisis, which has impacted Ireland severely. So, too, have disabled people and disability services in HE been affected. As a concept, advocacy is still relatively new to the Irish context. Although it is part of the role of disability officers, their views on the subject are notably under-researched. Having established the background factors that have informed the current study, the next chapter presents the research methodology.

Chapter Three: Choice of Methods

The research methodology used in this study consisted of several components including: qualitative research methods, the sampling frame, the use of data generation strategies, the pilot stage, the design and role of the research questionnaire, pertinent ethical considerations, the implications of using the internet, and reliability and validity. Beginning with qualitative research, these issues are discussed in detail.

Historically, qualitative methods have been somewhat misunderstood (Hayes, 2000), neglected and rejected (Pole and Lampard, 2002). This approach is contingent on the need to generate and interpret data rather than presuming that they exist awaiting extraction (Denzin and Lincoln, 2003; Punch, 2005). Indeed, it is important to avoid making assumptions about the research findings before they are discovered (Kelly, 2004; Meinefeld, 2004). The data collated through qualitative methods can be potentially rich and detailed (Denscombe, 2003). However, high quality data is not a guarantee or inevitable outcome when using this approach. The next section provides a clear guide concerning the research sample and participants.

Sampling Frame: Identifying and Selecting the

Participants

Determining the sample in this study required an ability to understand internet searching and a level of persistence. Using Google search engine, the researcher quickly determined that the contact information for disability officers was easily available on many of the websites of HE institutions in Ireland. Yet, the precise role and availability of these individuals was not always clear. In late 2011, the researcher learned that a representative organisation for disability officers in Ireland is known as the Disability Advisors Working Network (DAWN). Several, though not all, Irish disability officers in HE are represented by this organisation. Part of DAWN's role is to facilitate the exchange of ideas and expertise regarding HE and disability (Twomey, Amberson and Brennan, 2010). Information from 2008 indicated that 17 institutions were part of the DAWN network (DAWN, 2008). However, it soon became evident that this figure was out of date.

One disability officer, contacted by e-mail correspondence, provided the researcher with a list that included more recent information. Despite being more comprehensive than the list from

2008, subsequent feedback from disability officers and internet

searches revealed that aspects of this information had, once

again, changed. This included one HE institution that had changed

its name and the retirement of a disability officer. Establishing and

organising the sample for this research project demonstrated one

of the potential problems with internet based research.

Determining what information is the most up to date is, on the

surface, an easy task, but in practice, it requires flexibility and

relying on more than predetermined lists. It was important to

contact disability officers who were not part of the DAWN network.

This step followed by the researcher. The next section explores

the study's data generation strategies, including use of a

questionnaire, along with the advantages and disadvantages of

using the internet as a research instrument.

Data Generation Strategies

In this study, disability officers were asked to complete a research

questionnaire (Appendix A) that was distributed through electronic

mail (e-mail). Sending the questionnaire through e-mail

communication was a direct means of contacting and recruiting

potential participants who were located in HE institutions across

Ireland. For ease of use the researcher created the questionnaire

in a word processing document format using *Microsoft Word* software. Using a format that does not require specialist knowledge can be beneficial in computer-based research (Mann and Stewart, 2003; Gray, 2009).

Past research from Gillham (2000) has recommended a questionnaire length of between four and six pages for brevity and so as to avoid negatively impacting the return rate. For the current study, the first two and half pages of the research document sent to the participants contained the introductory letter and the informed consent section. Next, the questions the participants were required to answer were differentiated with clear headings and instructions. The questions were presented on two and a half A4 pages, this included space for writing answers. As recommended by Pole and Lampard (2002), the final page consisted of space for feedback and note of thanks from the researcher. Adhering to these steps was important since an excessively long document may have given the impression that completing the questionnaire was a laborious and tedious exercise. Overall, the questionnaire was designed to invite interest and to communicate ease of use, including ease of return via e-mail. Having reviewed the nature of the research questionnaire,

and due to the use of e-mail, it is also important to discuss the

implications of using the internet as a research platform.

Internet Communication: Risks and Rewards

Firstly, the primary advantages of communicating through the

internet relate to its immediacy, speed, low cost and the ability to

rapidly access results. One example being electronic data

collection (Dillman, 2000). Secondly, communicating through the

internet can provide anonymity to the participants and it has been

suggested that this can lead to the disclosure of issues that may

not arise through typical research approaches such as interviewing

(Sharf, 1999; Bloch, 2004). Whilst the advantages of internet

based research are clear and potentially useful, they must be

contrasted against the possible disadvantages that can also arise.

They include: the risk that participants may misinterpret the

information presented (Hopf, 2004), a perception that text based

research instruments are tedious (Mann and Stewart, 2003) and

lastly, the return of incomplete questionnaires (Gray, 2009). Other

factors, such such as how questions are ordered, framed and

asked (Gomm, 2008), the aesthetic and technical design of the

questionnaire (Gray, 2009) and the means of distribution (Couper

and Hansen, 2003), can also affect the level of responses and the quality of the data. Some of these concerns can be addressed through conducting a pilot stage which is an important part of the research process.

The Pilot Study

Conducting a pilot study is a useful method for testing the order and content of questions (Oppenheim, 1992; Pole and Lampard, 2002) and also for receiving feedback and suggestions (Stodden, *et al.,* 2001). During the pilot stage of the current study, the researcher contacted four disability officers from four different Irish HE institutions. This was conducted through e-mail communication (Appendix B) and the participants were selected at random. In total, two out of the four disability officers responded. In one instance, the researcher had to remind a participant to complete section two of the questionnaire. This incident was useful feedback regarding the clarity of the instructions and layout of the questionnaire. Whilst no changes were made to the questionnaire, it was essential to ensure the instructions provided in the recruitment e-mail were easy to follow. When using internet communication, a number of barriers can affect interaction with the

research participants. These, along with procedural aspects of the

study, are discussed in the next section.

Implementation and Procedures: Overcoming Barriers

Typically, in an online environment, there is little certainty as to

what is considered an allowable level of contact and what is

deemed unwelcome (Mann and Stewart, 2000). The sending of

research materials without prior notice, with the expectation that

they will be completed, can lead to difficulties (Mann and Stewart,

2003). This includes being perceived as sending 'spam' messages

(Gray, 2009, p.366). That is, e-mails which have not been

requested and thus can be viewed as irritating, intrusive and

designed to waste time. How the researcher explains the goals of

the research can affect whether participants engage with a study

(Pole and Lampard, 2002). Potential participants may dismiss and

ignore messages when the introductory lines are deemed

uninteresting (Dillman, 2000). To counter this problem, the use of

an introductory note is viewed as good practice (Witmer, Colman

and Katzman, 1999). The researcher followed this approach

(Appendix C) in order to entice the participants. Such steps can

also be useful for counteracting the perception that the researcher

is sending a type of spam e-mails discussed previously. Another

potential barrier to capturing the attention of the participants was the demand on the time of disability services and their ability to respond to electronic correspondence. This was reflected by one disability service in HE in Ireland. It received 8,765 e-mail queries during the academic year 2008-2009 (TCD SDS, 2011c). Proactive engagement is a useful and recommended means of recruiting participants (Mann and Stewart, 2003). In the current study the participants were approached through e-mail correspondence. The research information and documentation was sent directly to participants, not through a third party or a website. E-mails were sent to individual disability officers rather than through a group list. This procedure ensured that contact with the participants was direct and personalised to each person by name. This step was also important for preserving confidentiality such as excluding the possibility of accidentally sending an incorrect response to the wrong person. Dillman (2000) has argued that such procedures are useful as a means of prompting responses. Asking disability officers to participate by signing and completing the consent form required a certain amount of disclosure and trust on their behalf. The researcher disclosed his identity to provide contact information so as to demonstrate approachability and transparency. Participants were asked to

return the questionnaire within a period of two weeks. Previous

research has suggested that multiple attempts to initiate contact

with participants have often been a necessity (Pole & Lampard,

2002; Gomm, 2008). In the current study, reminder messages

were required to encourage responses (Appendix D). This

procedure was effective. 8 out of a total of 27 individuals who were

contacted returned the completed questionnaire by e-mail. 2

participants were from the pilot study and 6 from the main

fieldwork stage.

Pole and Lampard (2002) have argued that participants in

questionnaire based research may provide responses which they

feel are not objectionable or undesirable. Results taken from the

current study are not necessarily congruent with this perspective.

The 8 respondents demonstrated a clear willingness to engage

with the research questionnaire. Responses ranged from brief to

the specific, and at times, were frank. Where names were

provided, they have been changed to protect anonymity. All

participants, with the exception of 'Caroline', answered each of the

questions in both sections. Having explored the procedural

aspects of this study, another key issue to consider is research

ethics. Use the internet as a means of recruiting and accessing

participants has particular implications for this issue.

Ethical Considerations

Effective social research cannot proceed without due consideration

of relevant ethical issues (Blaikie, 2000; Miller and Bell, 2000;

Punch, 2005; Silverman, 2010). The responsibility for the

implementation of ethical standards and practices falls upon the

researcher (Kent, 2000a). As a platform the internet is now used

increasingly within research arenas (Gray, 2009). Use of the

internet does not, however, excuse a failure to adhere to ethical

practices (Thomas, 1996; Polancic Boehlefeld, 1996; Mann and

Stewart, 2003). Past studies involving the internet have

emphasised concerns regarding the disclosure of personal

accounts, privacy (Sharf, 1999, Eysenbach and Till, 2001;

Pittenger, 2003) and the issue of confidentiality (Crow, 2000, Kent,

2000a). It is worth remembering, however, that managing issues

such as confidentiality requires careful consideration otherwise

data can be rendered too obscure leading to analysis that can

become irrelevant (Hopf, 2004). The current study required written

responses retrieved through an electronic medium. Past studies

have emphasised the importance of confidentiality with respect to

both written (Boyatzis, 1998) and electronic information (Dillman, 2000).

In view of the previously discussed concerns, the current research project adhered to ethical guidelines outlined by the British Sociological Association (BSA, 2002). Assurances of confidentiality and anonymity were provided in the e-mail sent to the participants and within the research questionnaire document (Appendix A). No names of HE institutions and personally identifying information concerning disability officers have been disclosed in this research. All electronic information from the study was stored on a password-protected computer. De-identified copies of the transcripts were kept in an encrypted internet back up facility. Only the researcher had access to this information. Such steps were important for security reasons and also since research data can prove difficult to replace when lost or damaged (Denscombe, 2003). One participant contacted the researcher by phone to verify that the research was genuine. Interestingly, they stated that the reason for this had been due to past false requests. This underscored the necessity of implementing effective ethical procedures and transparency. The next section discusses informed consent. Ultimately, a failure to take this issue into

consideration can reduce the quality of data (Miles and Huberman, 1994). The issues of reliability and validity are also explored.

Grappling with Informed Consent, Reliability and Validity

The requirement of obtaining is a vital component in conducting research (Miller and Bell, 2000). According to Kent (2000b), informed consent is contingent on three important factors. One, providing individuals with clear information that is not off-putting. This is also important so as to ensure that participants give responses that are honest rather than what they may perceive as desirable for the researcher to hear. Two, that the participants understands the nature of the research, that their participation is voluntary and that no deception is involved. Three, that consent is provided in writing. For the present study, clear information was provided in the introductory letter built into the research questionnaire. No deceptive steps and procedures were used at any stage and completing the informed consent section was a standard requirement for all participants.

Validity, then, is whether a research instrument accounts for that which it claims to measure (Gomm, 2008; Gray, 2009). That is, whether it is applicable to the scope of the research design and what is under investigation. In essence, reliability refers to whether the research instrument produces consistent results across time (Denscombe, 2003). One aspect of reliability, known as 'consistency of judgement' (Boyatzis, 1998, p146), can be affected by the research procedures that are undertaken. Consistency in terms of how the data are collected is also important. For the current study, all participants were contacted via-e-mail and each individual received the same copy of the research questionnaire. Due to the use of an electronic medium it was not possible to observe how the participants completed the questionnaire, whether the questions were answered in order and in one sitting. It was also not possible to determine how the participants understood and interpreted the questions. These issues are important since what a participant comprehends, and subsequently responds with, can be different in each situation (Oppenheim, 1992). No participants reported a difficulty with comprehending the questionnaire, however. Table 1.0 provides an overview of the participants. Following this, the next section explores the

dissemination of research findings and also the limitations that

apply to the current study.

Table 1.0 Research participants involved in the current study

Participants*	Number of questions completed	Type of institution
Andrew	Questionnaire completed in full.	University
Michael	Questionnaire completed in full.	Institute of Technology
Sarah	Questionnaire completed in full.	University
Caroline	8 out of 11 questions answered.	University
Ella	Questionnaire completed in full.	University
Rachael	Questionnaire completed in full.	Institute of Technology
Aoife	Questionnaire completed in full.	Institute of Technology
Ruth	Questionnaire completed in full.	Institute of Technology

*The names of participants have been changed to protect anonymity.

Limitations, Generalisability and Disseminating the Research Findings

Firstly, this study was bound by a time frame of approximately seven months, limiting the opportunities for conducting and completing the research. Secondly, this research project did not access all disability officers in HE in Ireland. Not all HE institutions employ disability officers, and despite the research having contacted the e-mail addresses of potential participants, it was not always evident who was acting in this role. The sample size of 8 participants meant that the data set were somewhat limited. The experiences of most disability officers in HE in Ireland, therefore, remain unknown. This is a low figure when contrasted with one Irish study (AHEAD, 2010) that involved feedback from disability officers in 26 HE institutions. Questionnaires, by their nature, tend not to allow for additional probing and follow up questions. The lack of face to face contact with participants meant that there were no opportunities to ask, for example, 'can you elaborate on that?'

This may have been useful with respect to responses that were
rather brief and also for seeking clarifications.

Positively, participants were drawn from a mixture of institutions; 4
universities and 4 institutes of technology. However, the extent to
which the research findings can be generalised is limited. A
summary of the findings from this study will be distributed to all 27
disability officers who were contacted as part of the research
project. This includes those who did not respond or participate.
This will take place in October 2012. The summary will also be
sent to bodies responsible for HE and disability in Ireland, for
example, AHEAD, DAWN and the HEA. The full report will be
made available if requested. The next section provides an
overview of the methodological elements and components that
formed part of this study.

Conclusion

In conclusion, the current research project was grounded in a
qualitative research methodology. The sample was drawn from
disability officers working in HE in Ireland. They were asked to
complete a research questionnaire distributed through e-mail. A
pilot stage was carried out to test effectiveness of the

questionnaire prior to the main fieldwork. Ethical concerns such as

a confidentiality, anonymity and informed consent required careful

consideration due to the use of e-mail communication. The

researcher followed the BSA's ethical guidelines on research. 27

disability officers were contacted. A total of 8 took part and all

provided informed consent. Limitations of the study were

connected to time constraints and the lack of elaboration

associated with questionnaires. A synopsis of the findings from the

study will be provided to everyone who was contacted and

disability organisations. The next chapter explores the type of

responses that were received and it also addresses the one of the

core areas of interest in the current study, namely disability

officers' views on advocacy.

Chapter Four: Feedback, Responses and Advocacy

Under the Microscope

This section examines the reasons that individuals provided for non-participation in the current study. This is followed by a discussion of the data analysis. Next, disability officers' understanding and interpretation of advocacy is explored. Apologies were received from one disability service that was unable to participate due to the retirement of a staff member. Career breaks, maternity leave, annual leave and time constraints were cited as the other reasons for the non-participation of disability officers. In keeping with Pole and Lampard (2002), a record of non-responses was kept. Six automated 'out of the office' e-mail replies were received. No responses, of any description, were received in 10 instances. Reasons for this remain undetermined. Having reviewed some of the reasons for non-participation in this study, the next section discusses how the data were analysed.

Data Analysis

Put simply, research without analysis is of little value. At the heart of analysis is effective coding. This is a means of making the data

comprehensible and accessible (Pole and Lampard, 2002).

Essentially, coding involves searching for common connections

and associations and assigning these to particular categories

(Blaikie, 2000; Denscombe, 2003; Fereday and Muir-Cochrane,

2006). This study did not involve previously obtained research

data. It used a data-driven, inductive approach (Boyatzis, 1998). It

is worth remembering that effective analysis involves flexibility, not

rigidity, when assessing the data (Braun and Clarke, 2006).

Therefore, it was important to move between and across

transcripts in searching for patterns, similarities and differences.

The researcher reviewed and scrutinised the questionnaires

several times in accordance with good practice (Hayes, 2000; Pole

and Lampard, 2002). The analysis involved writing notes and

observations on the 8 transcripts. The verbatim quotations used

throughout this research project have not been changed. The

typographical and grammatical errors were those of the

participants and have not been altered by the researcher. The

following section examines the participants' understanding and

conceptualisation of advocacy.

How Participants Perceived and Interpreted the

Concept of Advocacy

Past research (Stodden, *et al.,* 2001; Tagayuna, *et al.,* 2005; NUIG, undated) has cited advocacy as being part of the role of disability services in HE. One of the objectives of the present study was to assess how disability officers approach and understand advocacy. Most participants were prepared to discuss the issue without difficulty or hesitation. Andrew argued that advocacy was a fundamental part of working as a disability officer.

Andrew: *'Advocacy is an essential role of a good disability officer'*

This contrasted with Caroline who felt that advocacy was not part of her formal role.

Caroline: *'I don't have to answer this question as advocacy is not a part of my job description'*

Despite these comments, however, Caroline answered most of the questions on advocacy in section 1 of the questionnaire. Importantly, she did not perceive her lack of a formal advocacy role as being a barrier to supporting disabled students.

Caroline: *'I don't see myself as an advocate it just happens sometimes when I know that I am in a position when I know my advice and experience may benefit a disabled person or if the*

> *disabled person specifically requests that they would like my*
>
> *assistance'*

Perhaps a weakness of the current research design was that it did not ask the participants to differentiate between advocacy as a required occupational duty as opposed to a skill that they may draw upon, regardless of whether it was officially part of their role. At first glance, some of the responses to question, 'what do you understand by the term advocacy?' were notably brief and did not go beyond certain core definitions. Whether this was consequence of how the question was phrased, or other factors, was unclear. Participants stated that their understanding of advocacy was as a form of communication and intervention for achieving particular objectives. This often involved working on behalf of an individual in order to articulate their particular perspective.

> **Ella:** *'Representing or making a case for the rights of a person or group of people'*
>
> **Caroline:** *'To assist someone in a supportive way to promote their view and requirements'*
>
> **Andrew:** *'Advocacy has a number of meanings, can be speaking on behalf of someone or a group or empowering people to speak for themselves'*

> **Rachael:** *'Giving someone who may need assistance a voice – acting as a medium for that person and supporting them with getting their messages and opinions heard in a method that they approve of'*

These interpretations have been reflected in the research literature. Bateman (2000), Birmingham (2001) and CIB (2007) have described advocacy as a process for arguing for someone's rights whilst Pillinger (2002) and NAC (undated) have identified empowerment as a goal of advocacy.

Looking beyond these initial descriptions, however, Aoife's explanation of advocacy was the most detailed and placed the issue in a specific context. She argued strongly for the necessity of advocacy and perceived it as having broader societal implications, regardless of whether it caused discomfort to others.

> **Aoife:** '*The main goal of advocacy is to help society, and individuals within society, better understand the traditionally misunderstood and/or disadvantaged. As such, advocacy is not overly focussed on public opinion – the main goal is to educate, whether the public likes it or not!*

Certainly, it can be argued that disabled students in HE in Ireland have historically fallen into the category of those who, as Aoife pointed out, have been 'disadvantaged'. There have been many barriers that have inhibited the inclusion of disabled students in HE. Problems such as poorly integrated support services (NUIMAccess, 2008), inaccessible facilities and buildings on campus (Winterowd, Street and Boswell, 1998; AHEAD, undated), a lack of disability officers, funding and training (AHEAD, 2008b) have been identified as obstacles to participation. In addition, some disabled students have been hesitant to disclose their circumstances out of concern that they may be refused a place in HE (Smith, Carroll and Elkins, 2000; Vickerman and Blundell, 2010) and that receiving support is contingent on being labelled (Prowse, 2009). A cautionary note, however, from the personal accounts of some disabled students indicates that this does not apply in all cases (Olney and Brockelman, 2003). Additionally, not all students equate receiving support as a negative experience (Twomey, Amberson and Brennan, 2010; Philips and Clarke, 2010). The next section discusses how the participants have put advocacy into practice and some of the outcomes that emerged.

Advocacy in Practice: Objectives and Outcomes

A number of factors have affected and influenced how disability officers have advocated for disabled students. One was the knowledge and experience of advocacy that they drew upon from past employment and professional practice, learning from peers and having an awareness of the legal boundaries concerning disability.

Sarah: *'I previously worked in the field of intellectual disabilities and was very involved in assisting the people I worked with advocate for themselves'*

Michael: *'It's largely been an on-the-job continuous training session! I learn a lot from the DAWN and DARE groups, where members meet to discuss best practice in various HEIs'*

Caroline: *'Through experience and understanding the needs of disabled students and having an understanding of the legislation that protects the rights of disabled students'*

It was clear that advocacy was an active rather than passive a process. The process was often driven by a particular focus such as problem solving. Examples included disability officers liaising with structures and organisations within and outside of their

respective HE institutions in order to facilitate the needs of disabled students.

> **Caroline:** '*Advocacy may be necessary when there is a confusion or a breakdown in communications between parties such as student and lecturer*'
>
> **Ruth:** '*Each needs assessment has the potential to identify a unique need and to ensure equity of access the DO (disability officer) must advocate to funders, institutes, local providers to have this unique need met – "to justify" it so to speak*'
>
> **Rachael:** '*I advocate for students with disabilities when I am asked to, this can be in a basic manner, for example, contacting academic staff with a disclosure and creating awareness of how to support these students learning experiences whilst at third level. I have also advocated in the past on a broader scale, where I would have been engaged in talks with the Irish Advocacy Network regarding a student*'

Part of advocacy was to avoid negative outcomes and eliminate inequality. As noted by Sarah and Aoife, this required consistent rather than sporadic efforts.

> **Caroline:** '*Advocacy may be necessary when there is a confusion or a breakdown in communications between parties such as student and lecturer*'

Sarah: *'We would advocate on behalf of students on a daily/weekly basis with academic and administrative staff to ensure they are treated fairly and not disadvantaged'*

Aoife: *'As a disability officer, it is my job to ensure that these difficulties are minimized to the greatest extent possible, and a large part of this involves advocacy, ie. ensuring that accurate information is provided to staff and students, and that prejudices and negative attitudes towards people with disabilities are challenged in an on-going and generally non-confrontational manner'*

What also emerged was the importance of managing expectations, achieving goals and objectives whilst acting as an advocate. Assertiveness was cited as part of this process.

Andrew: *'There is a need for a fighter type person to ensure the needs of disabled people are heard in HE'*

Rachael: *'Students are counting on me, as Disability Support Officer, to act as a voice for them within internal and external forums and to fight for the supports, funding and services that should be made available to them in order to assist and support them through college'*

Within this context, that is, 'fighting' for supports, the necessity of disability officers having an awareness of professional boundaries was deemed as essential.

> **Rachael:** *'Advocacy is only effective when the advocate is aware that they are a means of communicating for the person involved and liaising with them in an appropriate manner, and the manner for which you have been asked to act as an advocate in the first instance. it is important not to lose sight of the fact that you are merely ensuring that there is a balance'*
>
> **Sarah:** *'When we are approached by a student we would think through the outcomes of advocating on behalf of the student and whether it was right for the student that we, instead, of them, advocate'*

It was clear that the participants felt that advocacy required careful thought and consideration, particularly so as that their boundaries were not breached. Rachael also articulated the need both for professional insight and competences.

> **Rachael:** *'I think being an advocate for anyone is a huge responsibility and the proper training should be given around this. You are advocating for people who may be vulnerable and you have a duty to be as well informed and as professional as possible in this process'*

A positive outcome engaging in advocacy was the opportunity to address concerns in the wider HE setting. One example being, to reduce a barrier that all disabled students may encounter.

Ella: *'Where we have had to advocate on behalf of students we try to bring about a change in policy within the university. In this way it is hoped that the university improves accessibility for all students'*

Andrew, who saw advocacy as having both local and national dimensions, echoed some of Ella's comments.

Andrew: *'Much of the improvements in College have been as a result of my campaigning at a local and national level. Sometimes this was big changes (physical environmental changes, accessible information policy for example) or making a change for a person who needs help'*

These views are important since one past study (Parker, 2000) has described how some disability officers have felt obliged to speak positively about their institution's structures and policies, particularly concerning disabled students and disability. Andrew and Ella's comments suggest that their views as advocates were taken into consideration and thus, Parker's (2000) findings may not apply in all circumstances. Having reviewed how disability officers

have put advocacy into practice, the next section accounts for

some of the problems they faced during this process.

Responses Towards Advocacy

Participants described how they, in their role as disability officers,

were faced with situations and circumstances that inhibited

aspects of their work. Caroline described the duality of the

responses to the process of advocacy. One in how advocates may

be seen as irritating, but the other whereby advocating may also

prompt an awareness of inappropriate responses towards disabled

students.

> **Caroline:** *'They can also view an advocate as a nuisance…I am sometimes surprised by how quick people respond when they realise they have treated someone with a disability incorrectly or unfairly'*

Other problems were identified in terms of hindering advocacy.

Firstly, at systemic level within HE institutions, and secondly,

human factors that also played a role. An unwillingness to change,

a disinterest in taking responsibility and maintaining the status quo

were some of the barriers that the participants outlined.

Ruth: *'Individual autonomy – some people simply don't engage at all – no reply. Little power within education system to do anything about that.*

Caroline: *'If I am in the position of advocate I find dealing with some large organisations very frustrating particularly when they can use vast quantities of money on legal advice and seem to think ignoring the legislation is an OK thing to do.'*

Ella: *'The varied attitudes of university staff on reasonable adjustments and supporting disabled students – from those who are very committed to ensuring their courses are accessible to those who still do not feel this is part of their remit… An attitude still prevails in some parts of the University that disabled students are looked after by the disability service and therefore colleges and schools have little or no responsibilities in this area e.g. frequently colleagues refer to students as being "one of yours"'*

One negative consequence of such attitudes was that disabled students were effectively left without a voice advocating on their behalf.

Ruth: *'Really left to the student to look at a rights-based approach, and they're very slow to do this because of time, maybe cost and*

belief that if will them a bad name and undermine future

opportunities'

One reason that may help to explain some of the barriers that can

negatively affect the process of advocacy is that there may be

different levels of awareness of disability issues within academic

departments (Tinklin and Hall, 1999).

Considering the findings there were conflicting views as to the

extent of the existence of negative attitudinal barriers. For some

participants, such issues were not necessarily the norm and a

regular occurrence in HE.

Michael: *'They are in a shrinking minority, but there are those who*

believe that students with disabilities are "mollycoddled" and given

an unfair advantage over others. It can be a frustrating process to

convince them otherwise'

Ruth: *'How entrenched <u>all</u> parties can be in their thinking and how*

resistant they can be to compromise and change – interesting

because this happens less rather than more'

It is difficult to assess why there was a perception that disabled

students were being 'mollycoddled'. As noted earlier, Ella pointed

to 'frequently colleagues refer to students as being "one of yours"'.

Such attitudes suggest a level of perceived difference that some

staff in HE can hold regarding disabled students. Earlier in this chapter, Aoife and Sarah stated how they believed part of advocacy was to play a role in the decline of such attitudes. Without further data it was difficult to determine whether advocacy has affected the 'mollycoddling' perception.

Examining past research suggests that the pattern of negative attitudes is not a new occurrence. Studies have identified the belief that disabled students were of a lower ability (Kenny, *et al.,* 2000; Shevlin, Kenny and McNeela, 2004; Jacklin, *et al.,* 2007). In an Irish study disability officers stated that this type of negative attitude was 'very prevalent' (AHEAD, 2010, p.13). Conversely, based on Michael and Ruth's comments detailed above, overall, negative attitudes were not necessarily a widespread problem. Ultimately, researching these issues provides no straightforward answers and merely emphasises the differing views and experiences shared by disability officers.

On a positive note, participants suggested that the advocacy work they had undertaken led to some level of flexibility within HE institutions. Firstly, this was typically in the form of support accommodations for disabled students.

Sarah: *'Students have been able to have assignment dates extended or have been able to sit alternative/supplemental types of exams'*

Ruth: *'flexible subject choices, enhanced learning support'*

Caroline: *'Better services, awareness, clarification on specific issues, policy implementation, improved accommodation (housing)'*

Ella: *'I along with others in the University have advocated for the rights of students with a disability on clinical placement, in particular nursing students'*

This is perhaps unsurprising since the role of disability officer, including advocacy, has often been linked to the provision and delivery of practical resources and supports (Stodden, *et al.,* 2001; Tagayuna, *et al.,* 2005; McCoy, *et al.,* 2009). Secondly, other positive outcomes attributed to the success of advocacy were the decrease of certain disadvantages experienced by disabled students.

Michael: *'The most key outcome is that students registered the Disability Service, on average, achieve higher grades than the more "traditional" student. The mission of the Disability Service is*

> *to reduce educational disadvantages caused by disabilities, so this outcome is a significant one'*

Although Michael did not explicitly state the type of educational disadvantages he was referring to, some have been identified previously throughout this study. One example being, attitudinal barriers and the perception that disabled students were being given extra support throughout their time in HE. For Aoife, the role of advocacy was to challenge such perceptions.

> **Aoife:** *'I think of advocacy as being generally non-confrontational - it can at times be reactive, but its main goal is to educate, with the hope of rooting out passive ignorance and catalysing long-term change and shifts in attitude'*

Clearly, disability officers have experienced both positive and negative responses to advocacy. Their work has, at times, been hindered by negative perceptions, a lack of engagement and interest amongst other HE staff. It was suggested that such attitudes were frustrating, but not necessarily the dominant responses towards advocacy. The next section provides a summary of the current chapter.

Conclusion

Disability officers perceived advocacy as being a means of intervention, a tool for achieving particular objectives, problem solving and supporting an individual's rights. They typically derived their knowledge of advocacy from experience in the workplace and through contact with professional peers. Disability officers saw a direct link between their role and advocacy as a means of reducing long-standing disadvantages that have affected disabled students in HE. The use of advocacy required careful consideration so as to ensure professional boundaries were not breached and also so that the process did not become unbalanced. The effectiveness of advocacy was, at times, undermined by problems within HE institutions. This included negative attitudes towards disability and disabled students. However, the extent of such attitudes was a matter of contention. Having addressed how disability officers view and experiences as advocates, the next chapter explores the extent to which they were affected by funding cutbacks which have undoubtedly become a reality in HE in Ireland.

Chapter Five: Expectations Versus Reality

Another aim of the present study was to investigate the subsequent implications of reduced funding levels for disability officers working in HE. Originally, the researcher had expected that the participants were likely to state that reduced funding levels dramatically affected their disability services. This was based on: one, past research from an Irish study involving disability officers (AHEAD, 2010) and two, the broader context of decreased spending in HE. The combination of these findings had painted a rather stark picture concerning the impact of funding cutbacks. Considering the current findings, as subsequently discussed, the effects of constrained financial resources varied between disability officers, though some common patterns such as diminished one to one support were identified.

Managing the Effects of Funding Cutbacks

In the current study, responses ranged from little concern about the impact of funding cutbacks, to identifying the noticeable changes within services and finally, alarm at the prospect of future budget reductions.

Andrew: *'Services not significantly impacted yet'*

Michael: *'No major impact, as we had been underspending'*

Rachael: *'It has been challenging, without a doubt. Funding always effects the way we run our service'*

Sarah: '*The cut backs have limited our ability to carry out, outreach activities and attend conferences etc'*

Aoife: *'Were we to lose even one member of our support staff, the quality of, consistency and extent of support that we can offer students would immediately drop'*

Coping with the financial cutbacks required careful management of expenditure and engaging in regular dialogue with the HEA. Ultimately, it is the HEA that bears responsibility for the administration of funding in HE in Ireland (HEA, undated3). Therefore, from the perspective of the disability officers, it was important to maintain a channel of communication open with this organisation.

Rachael: *'The challenge is to become creative with the ways in which we use the funding that is available to us at any time… as a group of Disability Officers, we are always involved in discussions around how to manage the fund in an effective way going forward, as well as engaging with the HEA regularly'*

> **Andrew:** *'There is a major review of the HEA Fund for students with disabilities and <identifying information removed> sent a detailed response on how this fund should be structured'*

Aoife and Michael's experiences of funding cutbacks ranged from dealing with the effects through the skillful use of resources to bordering on brink of significant levels of difficulty.

> **Michael:** *'The FSD has been cut numerous times in the past 5 years. So far, these cuts have been "bearable" through the streamlining/mainstreaming of supports and careful financial management'*
>
> **Aoife:** *'So far, I have not noticed a significant change – numbers have increased steadily and funding has decreased, but we are managing at present. However, I feel that we are just managing'*

Interestingly, both Michael and Aoife were employed in institutes of technology. Whether their experiences of funding cutbacks were, in any way attributable to the type of institution they work in, is unclear. Compared to universities, institutes of technology tend to receive less funding from the Irish state (Mulvihill, 2005). This can inhibit their ability to develop services targeting disabled students (HEA, 2005; NDA, 2007). Comments from other participants suggest that the *type* of institutions disability officers work in were

not necessarily the primary factor in determining the outcome of

funding cutbacks.

Sarah, who was employed in a university setting, suggested that

her service may have, on one level, been protected from financial

cutbacks.

Sarah: *'The team in our Service are funded from the university's core budget so in terms of staff we have not been affected'*

Rachael, who was employed by an institute of technology,

expressed similar sentiments.

Rachael: *'I am lucky to be part of an institution that recognises the importance of the Access Service and the work that we do, and have bought into the concept'*

The recognition, as described by Rachael, was echoed in Philip

and Clarke's (2010) study that identified a disability service as

being integral to a university's functions and operations. Whether

this practice is widespread is unclear. However, it is plausible to

suggest that the extent to which particular disability services were

established may have been a key deciding factor regarding the

impact of funding cutbacks.

The creation of disability services represents how much HE has transformed significantly in Ireland in the past decade. Two explanations may underpin why this has occurred. One, the development of clear targets directly linked to HE and disabled students (DOES, 2001; HEA, 2004b) and two, encouraging the participation of disabled students is now viewed as a priority issue for HE institutions (National College of Ireland, NCI, undated; Faller, 2012; Murray, 2012). Yet, these changes alone are not necessarily a complete solution. Some disabled students attend institutions that have established effective support services for particular impairments (Philips and Clarke, 2010). This raises two questions: one, where disabled students who do not have this option go and two, what impact have the funding cutbacks had on the institutions that do not have integrated disability services? Without further data it was difficult to reach a conclusion on these specific issues. The next section explores the deeper implications of the funding cutbacks, namely, the effects on the support provided by disability officers.

Reviewing Outcomes: Effects on the Quality of Support

One of the most evident effects of the funding cutbacks was the resulting introduction of changes. Generally, participants did not perceive change itself as an innately negative prospect, but rather as an opportunity to allow disabled students to influence their own support system.

Andrew: *'Services continue to be redefined and needs continue to be met accordingly…services will be affected and less one-one supports will result but this will also lead to improved services'*

Sarah: *'In the past we would have been able to provide a large number of supports to students, whereas now we have to be selective on what supports they receive (e.g. limiting the granting of laptops). However, I do not necessarily see this as a negative side effect as it makes students more responsible and aware of what funding they are receiving and allows them to decide how best it should be used to support them'*

Rachael: *'I find that a lot of the students are anxious about how their allocations are used, more than what they would have been previous to the funding cuts. The students have an awareness of how much the college may receive for their supports and are*

conscious now more than ever of making this money work

effectively for them'

Although some changes were seen as positive, for example

disabled students' awareness of resources, the funding cutbacks

have also constrained the services provided by disability officers.

Specific concerns that they outlined were the reduced availability

of resources, supports and personnel in disability services. The

availability of disability officers to meet with disabled students,

particularly on an individual basis, was disrupted. This included

delayed appointments and the provision of group rather than

individualised support.

Ella: *'It is more difficult for students to get support at point of need*

as they often have to wait a number of days (longer at peak times)

for an appointment…We are also working on group support e.g.

learning support sessions rather than one-to-one… We have to

look at ways of supporting students in groups or remotely and

minimising individual student contact where possible'

The participants emphasised their concern about the implications

for staffing levels within disability services. This issue was clearly

connected to their ability to provide effective support to disabled

students. Disability officers' experiences were reflected in a range

of views on this issue.

Sarah: *'As we have not been affected in term of staff numbers this had no affect'*

Aoife: *'So far we have been very fortunate – many of our supports are sufficiently embedded into mainstream practices and we have not lost any staff members'*

Rachael: *'There is no doubt that we need increased staffing levels in order to be in a position to provide a service that continues to meet the needs of the disabled students who are registered'*

Past research has reported the problem of a lack of support and resources for disability professionals (Goode, 2007). It has also recommended the recruitment additional staff in disability services in HE (NDA, 2007). Unfortunately, bureaucratic difficulties within the current funding structures have hindered the recruitment disability service personnel and this has, in turn, affected the continuity of the provision of support for disabled students (McCoy, *et al.,* 2009).

In terms of institutions, the HEA has pointed to two problems for Ireland's institutes of technology specifically. One, compared to universities, they were often in the receipt of smaller amounts of funding designated for issues such as disability services. Two, that they typically did not have adequate numbers of staff to manage disability funding (HEA, 2005). However, in the absence of more

in-depth data, it was difficult to determine whether these issues

affected the disability officers in the current study. A third problem

that was identified was the allocation of funding and how

administrative barriers have delayed this process. Meaning that

disabled students may not receive support until the end of the first

term or later in the academic year (HEA, 2004a; AHEAD, 2010).

The following section details how disability officers felt that aspects

of current funding practices were excluding some disabled

students.

Exclusion as a Consequence of Funding Practices

Some participants felt that there was a connection between

funding structures and the exclusion of disabled students. This

was particularly acute for those who were not amongst the

grouping of traditional full time students such as those with

physical and sensory impairments.

Ella: *'There is no funding allocated to students with a disability*

who study part-time which is a major issue for our service. Many

potential students with physical and sensory disabilities may

consider university if it was available to them on a part-time basis

without being penalised financially (part-time students currently

pay fees)'

Currently, funding is only available to full time disabled students

(USI, 2010). Therefore, some disabled students may forego

accessing support and attending HE. Meaning that the true figures

for disabled students are potentially incomplete and under-

reported. These concerns have also been identified by past

studies (Shevlin, Kenny and McNeela, 2004; HEA, 2005).

Ella also emphasised a conflict between the Irish state's

requirement for HE institutions to include particular groups of

disabled students and how disability services were limited in the

support that they can provide to these individuals.

Ella: *'The Irish government have set targets for Universities to*

increase the number of students with physical, sensory and

multiple disabilities. These are the students who required the

greatest number of supports. Whilst we currently are provided

adequate funding to meet the needs of these students we have

very few staff available to support them'

Although the funding, in Ella's disability service, may have

matched the current needs of disabled students, there were issues

with the availability of personnel. This was not dissimilar to some

of the concerns about staffing levels as explored previously in this

chapter. The next section examines the concerns that disability

officers when documenting the 'evidence' of disability and the

subsequent implications for funding.

Problems with Documenting 'Evidence' of Disability

In Ireland, often the first protocol for disabled students is to

produce a report from a medical professional or a psychologist as

'evidence' of disability when enrolling in a HE institution (Central

Applications Office, CAO, undated, unpaged; Disability Access

Route to Education, DARE, undated, unpaged). This process is

also viewed as important in activating the funding mechanisms that

support disabled students (NUIM Access Programme, undated).

The procedure of requiring evidence was not immune from

criticism. In the current study, Ruth expressed concern that there

was now a heightened need for documentary evidence and that

this was beyond the financial means of some disabled students.

> **Ruth:** *'It further marginalises and disadvantages students who do not have the means to pay for educational psychologists' reports…Puts an even greater emphasis on the need for consultant's evidence to access F.S.D. which public patients often don't have or can't access within required timeframe'*

Disability officers in past research shared some of the points

expressed by Ruth. They felt that the need for evidence, such as

through psychological assessments, was costly and that disabled

students were unable to access specific support services without

producing such documentation (McCoy, *et al.,* 2009). The

requirement of collating documentary evidence, along with

completing a separate funding application, has also been criticised

for ultimately slowing down the decision making process that

triggers the allocation of funds (HEA, 2005).

Ruth also believed that the evidence protocol was accentuating the

influence of medical model of disability and by association,

increasing the risk of excluding of some disabled students from

HE.

> **Ruth:** *'increases medical model influence over social model'*

As discussed in Chapter Two, the medical perspective on

disability, focusing on an individual's impairment as being the

source of the problem, was part of Ireland's historic response to

disability. This approach has been identified as an issue in some

HE contexts (Barnes, 2007; Matthews, 2009), including in Ireland

(McDonnell, 2003a; 2003b). This concern is also mirrored in a

report from one of Ireland's universities, University College Cork

(UCC). In summary, the report (UCC, 2006) suggests that the ethos of the university's disability service was clearly orientated towards the social model of disability. Yet simultaneously, the report also finds (and was critical of the fact) that the disability service promoted and organised its teamwork based primarily on impairment.

It has been reported that two Irish HE institutions have operated without any specified definition of disability (Mulvihill, 2005). In 2005, key legislation on disability was introduced in Ireland (DOJELR, 2005). This included mandatory obligations for HE institutions and staff (AHEAD, 2006). Therefore, whether Mulvihill's (2005) claims remain accurate is unknown. Nonetheless, the integration and recognition of disability services and disability officers represents a significant change from past practices such as whereby the role disability officer was largely neglected and not prioritised (Parker, 2000; NDA, 2007). The role is now a mandatory requirement that HE institutions must provide in order to oversee and develop disability services (AHEAD, 2006). The next section examines how disability officers have had to increase the prioritisation of certain needs whilst reducing the supports

available to others. This is in the context of diminished funding

levels.

Prioritising Based on Needs, and Concerns about Future Cutbacks

Considering the current findings, one of the most challenging

areas for the disability officers was determining and balancing the

needs of disabled students within the boundaries of the current HE

system. AHEAD have criticised Irish legislation for what they

perceived as a narrow definition of disability, particularly since it

rested on an individual experiencing a 'significant ongoing

difficulty' (AHEAD, 2006, p.1). This is important since the disability

officers in the current study have spoken about how funding

cutbacks have limited their ability to provide support to individuals

based on their needs and circumstances. Examples included

foregoing complete needs assessments and the rationing of

support options.

Ella: *'We are introducing tailored orientation programmes for*

different disability groups to try and address needs before the

beginning of term. We are investigating online registration and list

of standard supports for some students with disabilities rather than

a full needs assessment'

Ruth: '*Students w/ disabilities not being assessed on the basis of*

their individual needs – disrespectful at the least and risks of falling

short of fully supporting access to education and employment'

Aoife: '*We are currently constrained to providing AT only for the*

most severe needs, whereas there are many others who would

benefit from AT but who must go without due to cutbacks'

The views expressed by Ella, Ruth and Aoife raises the question of

how disabled students who may not be deemed as 'significantly'

impaired have been dealt with during a time of strained funding

levels and resource shortages. Reducing levels of needs

assessments represent a significant concern since this task has

been seen as core to a disability officer's role (Adams and Brown,

2001; DCU, 2006; AHEAD, undated). In addition, there has been

growth in the complexity and variety of impairments that disabled

students disclose to Ireland's HE institutions (NUIMAccess, 2008;

Nolan, Quinn and Gleeson, 2009; Ferguson and Doyle, 2011).

One example being increases in the number of students with

Attention Deficit Hyperactivity Disorder and Asperger's Syndrome

(Nolan, *et al.,* 2010; O'Connor, Quinn and Gleeson, 2011).

Meaning that disability officers have to manage a more diverse

range of disabled students and their needs. The next section

explores the possible impact of future financial cutbacks and the

strains this may place disability officers.

A significant issue for the participants was the increases in the

number of disabled students attending HE. This was particularly

pertinent when juxtaposed to the challenges that have arisen as a

result of reduced funding levels.

Sarah: *'Student numbers are increasing year on year'*

Ella: *'The number of disabled students is increasing each year while our staffing numbers have diminished severely'*

Rachael: *'It is difficult to attempt to grow as a service, in response to growing number of students accessing third level with disabilities when the funding is being reduced'*

The prospects of future funding cutbacks were concerning due to

their potential impact on the quality of services provided by

disability officers.

Rachael: *'I am concerned about the implications of further cuts and I would worry that we cannot sustain the service at its current level, not improve it if there are further cuts'*

Michael: *'If the current trend of cuts continues, I would have great concerns over the level of support that we can provide to our students'*

Sarah: *'I would have concerns about the ESF fund being cut further without due consideration for high needs students'*

Aoife: *'We will be forced to prioritise those supports that, without which, a student would be literally unable to attend college, ie sign language interpretation, PAs, note takers and cost towards transport. Therefore, a troubling long-term implication of financial cutbacks would be the creation of a 'hierarchy of supports' in which certain needs would have to be prioritised over others'*

Essentially, these points reflect what disability officers have stated previously in this chapter and in one past study (AHEAD, 2010), namely, how funding cutbacks have impacted on the level and quality of the services they provide. In light of these concerns, and Ireland's current continuing economic instability, it is necessary for future research to investigate these issues in further detail. Having assessed the potential fallout from future funding cutbacks, the next section provides a summary of this chapter.

Conclusion

In summary, reduced funding levels have had affected most, though not all of the disability officers who participated in the current study. Their experiences were reflected in a range of views. The impact ranged from negligible effects to bordering on a noticeable decrease in the quality of their service. Overall, funding cutbacks have led to constrained resources and fundamentally diminished disability service personnel's availability to disabled students. Disability officers have had to curtail the type assessments they carry out and also prioritise particular disabled students, typically those with the most acute needs. Obstacles within the structures and administration of disability funding were identified as problematic. This has affected the recruitment of disability service personnel and by extension, hindered the availability of support for disabled students. Finally, disability officers spoke about the possibility of future funding cutbacks which were cited as the source of much concern. The next chapter provides a final summary of the present project.

Chapter Six: Conclusion

In summary, this research project sought to investigate two core issues. One, disability officers' understanding of advocacy and two, the effects reduced funding levels have had on their work in HE in Ireland. Disability officers were recruited as participants due to their role in providing services and supports to disabled students and also because their perspectives have not received significant attention in the research literature. The views expressed by disability officers provided much insight into the topics under investigation, particularly regarding how interconnected many of the issues were. One example being, the perception that disability services were a separate part of HE institutions and that disabled students were 'mollycoddled', which has, at times, hindered the effectiveness of advocacy.

A number of background and contextual issues informed the current study. Chapter One identified how Ireland's relationship with disability and disabled people has been difficult and problematic. This relationship was largely underscored by medical perspectives and responses based on exclusion. This, in conjunction with negative public attitudes, resulted in poorly conceived service provision for disabled people. Positively, there have been a number of developments within Irish society and the

exclusionary practices towards disabled people have also

changed, though not completely. Unsurprisingly, the practices of

exclusion have affected disabled students who have often been

absent from the education system, including HE. The 1990s and

2000s saw the growth of funding of HE. Consequently, there were

increases the number of disability services and disabled students

in HE institutions throughout Ireland.

One key component in the growth of disability services has been

the development position of disability officer whose role was

explored in Chapter Two. Ultimately, the objective of role is to

provide support to disabled students, to assess their needs,

organise practical and academic support, work with the structures

within HE institutions. Unfortunately, past research concerning

disability officers is relatively scant, particularly in the Irish context

(Rohan, 2008). Overall, research in this area has been largely

limited to issues such as practical support and equipment. The role

of disability officer has, at times, been undervalued, and

recognition of its necessity and importance has been a relatively

recent occurrence. However, Ireland's HE institutions are now

legally obliged to employ disability officers and to provide

accessible services. This reflects a significant shift in how the

position was previously regarded.

Chapter Two also noted how the provision of advocacy has been recent development in Ireland. The role of advocacy typically involves acting on an individual's behalf, working for their rights and empowering their ability to make choices. Disability officers in HE also engage advocacy, however there was a dearth of literature on this issue. No research has investigated how disability officers in the Irish context manage and understand advocacy. Unfortunately, Ireland currently faces an economic crisis that shows little sign of easing (Bergin, *et al.,* 2012). This has affected disabled people and funding levels in HE, including in disability services (AHEAD, 2009; Nolan, *et al.,* 2010). Thus far, only one Irish study has examined the issue of funding *cutbacks* that have affected disability officers (AHEAD, 2010). Others have been critical of the administration *problems* within the existing funding structures and mechanisms (HEA, 2004a; McCoy, *et al.,* 2009). As discussed in Chapter Three, the participants were required to complete a research questionnaire designed by the researcher. This was distributed to 27 individuals via e-mail. Including the pilot study, a total of 8 disability officers working in HE in Ireland participated in this project. The extent to which findings from the current study can be generalised is limited due to the sample size. However, the study accessed participants employed in a mixture of

universities and institutes of technology and emphasised the

varying experiences of disability officers. This research project

followed the BSA's ethical guidelines, therefore all identifying

information within the data were anonmyised to protect the identity

of the participants. This study was grounded in a qualitative

research methodology and adopted a social model of disability

perspective.

Returning to the central research question, then, "what are

disability officers' views about their role as advocates for disabled

students and the constraints upon effective fulfillment of this role?"

A number of the findings were addressed in Chapter Four.

Conceptually, participants' understanding of advocacy was

generally in keeping with past research studies. Crucially,

however, the responses provided a strong sense of how disability

officers put advocacy into practice, but also how, at times, they

were hindered in doing so. One participant did not see advocacy

as part of her role, though she offered her perspective on the

subject. Disability officers felt that their role as advocates was to

reduce the disadvantages that disabled students may encounter.

In a few instances, participants inferred that they have encouraged

disabled students to engage in self-advocacy, which is whereby an

individual pursues objectives on their own behalf (Bateman, 2000).

Knowing when to encourage self-advocacy as the best option for disabled students was, for disability officers, connected to the setting and maintenance of boundaries. Previous research has argued that this is important in terms of empowerment and also so as to avoid creating excessive dependency (Birmingham, 2001; CIB, 2007). Ultimately, however, the issue self-advocacy was outside of the scope of the present study. Attitudinal barriers from other HE staff were amongst the constraints faced by disability officers when implementing advocacy. This included a perception that disabled students were exclusively the responsibility of disability services. Whilst it was suggested that such barriers now occur less frequently, they have remained difficult to change. Regarding funding cutbacks, as discussed in Chapter Five, the effects ranged from little impact to notable changes in the delivery of disability services. Being 'creative' with funding allocations and engaging with the HEA were two of the strategies disability officers have used to manage the funding cutbacks. A number of the participants spoke about spending less time with disabled students and being selective with the provision of particular supports services. The potential knock on effects on staffing levels was outlined as an area of risk to the quality of support provided to disabled students.

Managing the needs of disabled students was a prominent issue that came into sharper focus in part due to funding cutbacks. One outcome was the decrease in the number of needs assessments being carried out and having to prioritise certain disabled students over others. Given that some of the participants in the current study expressed deep concern about the impact of future funding cutbacks, it is recommended that this area be investigated further. This is particularly important as the number of disabled students continues to rise and also in view of Ireland's turbulent financial circumstances which are continuing. Further research is also necessary to determine whether, as suggested by some participants, staffing levels in disability services may be reduced. So, too, is it necessary to assess whether changes will apply to how the Fund for Students with Disabilities is administered, such as whether part time disabled students will be accommodated.

Finally, perhaps a weakness of the current study was the lack of follow up questions meant that it was not possible to ask participants to elaborate on certain issues. Whilst 8 out of 27 disability officers participated in this research project, one previous Irish study (AHEAD, 2010) had a more successful outcome with 26 participants. Although information gleaned from the AHEAD study was useful in terms focusing on aspects of the current study, it was

important not to become over reliant on this work as a point of

comparison.

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Appendices

Appendix A: Research questionnaire sent to the

participants

<u>Information Sheet</u>

Hello,

My name is Barry Murphy and I am studying for an MA in Disability
Studies. I am currently conducting a research dissertation that
involves communicating with disability officers working in higher
education in Ireland.

Background

Recent data indicates that there has been a clear increase in the
number and range of disabled students attending higher education
in Ireland. Over the past number of years there has also been a
greater recognition of the role of and need for disability officers in
this field. Unfortunately, research has paid little attention to the
views and experiences of disability officers and even less is known
about those working in the Irish context. Whilst funding levels for

higher education have generally increased over the past two

decades, Ireland's financial crisis means that this picture is

undergoing change. Funding cutbacks are now a reality for

disability services in higher education. Advocacy is part of the role

of disability officers, though it is a relatively new concept in Ireland.

It involves negotiation skills, empowerment and understanding an

individual's needs. There is, however, not set guide for advocates

working with disabled people. Few studies have explored the

views of disability officers concerning advocacy.

Current Study

The aim of my study is to hear your views, thoughts and

experiences as a disability officer. I'm particularly interested in your

perspectives on the issues of funding levels and advocacy. If you

agree to participate you will complete a questionnaire about your

role as a disability officer. Your co-operation is completely

voluntary and greatly appreciated.

Research Ethics

This research project is being conducted in accordance with the

British Sociological Association's ethical guidelines on research and has received ethical clearance from the School of Sociology and Social Policy, University of Leeds. The information that is gathered will be anonymised and treated in the strictest of confidence. No personally identifying information will appear in the copies of the research. All information will be stored securely on a password-protected computer. You are free to withdraw from the study at any stage.

Contact Information

If you have any queries about the study please do not hesitate to contact me or my research supervisor via the details provided below. Thank you for your assistance.

Student Researcher:	**Research Supervisor:**
Barry Murphy	Dr. Alison Sheldon
E-mail: @tcd.ie*	Centre for Disability Studies
Mobile: 087 1234567*	School of Sociology & Social Policy

University of Leeds

Leeds LS2 9JT

Email: a.sheldon@leeds.ac.uk

Phone: +44 113 3434715

*Personal details removed for submission to the University of

Leeds VLE

**If you wish to proceed with the research study, please review

and complete the consent form**

Informed Consent

Declaration (participants)

I am willing to discuss my experiences, thoughts and opinions as a

disability officer employed in higher education in Ireland.

I understand that the data collected from this study will form the

basis of a dissertation which is part of an MA in Disability Studies. I

agree that my participation is completely voluntary and I

acknowledge that the dissertation may lead to publication in

journal format or be published on the Disability Archive hosted

online at the Centre for Disability Studies, University of Leeds. I

understand that extracts from transcripts may be used in the dissertation and that personally identifying information will be protected. I am satisfied that the responses will be anonymised and confidentiality will be maintained.

This research study and consent form have both been explained to me. I understand what will happen if I agree to be part of this study. I have had the opportunity to ask questions and I am satisfied that my questions have been answered. I freely and voluntarily agree to be part of this study, though without giving up my legal and ethical rights. I understand that I can withdraw from this study at any time and without negative consequences.

Signature of Participant

I have read and understood the written details provided to me about the study, and I agree to participate in the research project.
(please write yes/no next to whichever option you are agreeable to)

Yes, I agree to the above consent form.

No, I do not agree to the consent form.

Signed:

Date:

Statement of Investigator's Responsibility

I have explained the nature and purpose of this research project. I have offered to answer any questions the participant may have. I believe that the participant understands my explanation and has freely given informed consent. I undertake to uphold my obligation to preserve confidentiality during and following this research project.

Signature of Researcher

Signed: *Barry Murphy*   Date: June 11th,

2012

Please now proceed to the questionnaire

It contains two sections

Questionnaire for Disability Officers working in Higher

Education in Ireland

Feel free to write as much as you wish.

Section 1: Advocacy Issues

This section contains 7 questions.

Question 1. What do you understand by the term 'advocacy'?

Answer:

Question 2. How (if at all) does advocacy fit into your role as a disability officer?

Answer:

Question 3. How have you learned to advocate for disabled students?

Answer:

Question 4. Describe some key outcomes that have affected

disabled students as a result of your advocacy skills.

Answer:

Question 5. What (if anything) do you find most interesting about

acting as an advocate?

Answer:

Question 6. In what ways do you review your process of

advocacy?

Answer:

Question 7. Which (if any) aspects of your role as an advocate do

you find frustrating?

Answer:

End of Section 1

Please now continue to Section 2

Please now continue to Section 2

Section 2: Funding Issues

This section contains 4 questions.

Question 1. How (if at all) have funding cutbacks affected your

role and responsibilities as a disability officer?

Answer:

Question 2. How have you been managing your allocated

caseload since the financial cutbacks?

Answer:

Question 3. How, in your experience, have the cutbacks affected

the students you work with?

Answer:

Question 4. What are your feelings about the future or long-term

implications of financial cutbacks?

Answer:

End of Section 2

<u>Feedback or any other comments are welcome and will be</u>

<u>treated confidentially.</u>

Please return the completed document to <removed>@tcd.ie

End

Thank you for taking the time to complete this questionnaire.

☺

Appendix B: E-mail Sent to the Pilot Study

Participants

Hi <name>,

I spoke to you before about the possibility of doing some research regarding the work and role of disability officers. I'd like to move forward with this, if possible.

Basically, my research involves a questionnaire that you would complete. I'm particularly interested in your experiences in relation to funding and advocacy. I've attached an information sheet, which provides more details.

If you are interested in taking part, do please let me know and I can send on the questionnaire, consent form, etc.

Any questions are welcome, of course.

Best Regards,

Barry Murphy

Email: @tcd.ie
Mobile: 087

Appendix C: Introductory Note Sent to Potential

Participants

Hi <name>,

My name is Barry Murphy and a postgraduate student studying for an MA in Disability Studies with the University of Leeds.

As part of my course, I'm carrying out a research study that looks at the experiences of disability officers working in higher education in Ireland.

I'm particularly interested in your experiences in relation to the issues of funding and advocacy. I've attached a document (in Word format) which contains further information, the consent form and questionnaire. It contains two sections. All responses will be treated in confidence.

I appreciate that this is a very busy time of you for you and your service. If you are interested in participating, I'd appreciate if you could return your completed questionnaire to me by Tuesday, June 26th, 2012.

Any questions are welcome, of course.

Thank you for your time.

Best Wishes,

Barry Murphy

Email: @tcd.ie

Mobile: 087 1234567

Appendix D: Reminder Email Sent to Participants

Hi again, <name>,

Can I just check in with you to gauge your interest at this point? I realise you may be just after coming off of the back of exams only to be soon launching into CAO applications, etc and that you may little spare time...

Regards,

Barry Murphy