



# Accessibility & Accommodations Toolkit

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CENTRE FOR INNOVATION IN  
**CAMPUS MENTAL HEALTH**



Canadian Mental  
Health Association  
Ontario

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# Introduction

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The Accessibility & Accommodations Toolkit is a guide for everyone in the campus community outside of accessibility services to learn how best to support post-secondary students with disabilities. This includes faculty, administrative staff, student leaders, student services, counselling services, and health services, among others. The aim of the toolkit is to provide the campus community with a fulsome understanding of disability, accommodations, and accessibility, in order for them to provide support and referrals to students when necessary, and to design their programming in the most accessible way possible.

This toolkit is the result of collaboration between the Centre for Innovation in Campus Mental Health and eight disability services professionals from Ontario colleges and universities. It is important to note that this toolkit was not developed by students with lived experience of disability. However, as it is a living toolkit, the Centre welcomes the feedback of that community. If you are a student with lived experience of disability and would like to provide feedback on the toolkit, please contact [mpadjen@campusmentalhealth.ca](mailto:mpadjen@campusmentalhealth.ca).

**This toolkit uses both identity-first and person-first language interchangeably throughout the documents to illustrate that both of these approaches to disability-inclusive language are valid and acceptable. While many reading this toolkit may have been taught that person-first language is the appropriate language to use, many people in the disabled community prefer to use identity-first language, similarly to how race or sexuality might be expressed: i.e. “a Black woman”, “a bisexual man”, “a Deaf person”. For more information on language use, see the Language section of the toolkit.**

# Disability

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The following quotes by disabled individuals highlight the many different definitions of disability:

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*“All bodies are varied, from skin colour, to height, to number of limbs, to waist size, to hair colour, to glasses and eye shape and gaps in their teeth, we are all made up of a number of variables...disability is a part of the normal human experience...just another part of our diverse world, not something frightening or sad.”*

*– Jessica Kellgren-Fozard*

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*“Disability is articulated as a struggle, an unnecessary burden that one must overcome to the soundtrack of a string crescendo. But disabled lives are multi-faceted – brimming with personality, pride, ambition, love, empathy, and wit.”*

*– Sinead Burke*

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*“We value our people as they are, for who they are, and understand that people have inherent worth outside of capitalist notions of productivity. Each person is full of history and life experience. Each person has an internal experience composed of their own thoughts, sensations, emotions, sexual fantasies, perceptions, and idiosyncrasies. Disabled people are whole people.”*

*– Leah Lakshmi Piepzna-Samarasinha*

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*“I do not identify as a person with a disability. I’m a disabled person. And I’ll be a monkey’s disabled uncle if I’m going to apologise for that.”*

*– Stella Young*

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*“Understanding disability and ableism is the work of every revolutionary, activist and organiser – of every human being. Disability is one of the most organic and human experiences on the planet. We are all ageing, we are all living in polluted and toxic conditions and the level of violence currently in the world should be enough for all of us to care more about disability and ableism.”*

*– Mia Mingus*

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*“Disability is something imposed on top of our impairments by the way we are unnecessarily isolated and excluded from full participation in society.”*

*– Lennard J. Davis*

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*“It is so important to showcase people with disabilities with intersectional identities because that allows viewers to see beyond disability....People with disabilities are multilayered—we are complex breathing human beings defined by more than just what we lack.”*

*– Lauren Ridloff*

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# Definition

As we can see from the quotes above, disability is a complex human phenomenon with multiple overlapping definitions. According to the Accessible Canada Act, disability “means any impairment, including a physical, mental, intellectual, cognitive, learning, communication or sensory impairment — or a functional limitation — whether permanent, temporary or episodic in nature, or evident or not, that, in interaction with a barrier, hinders a person’s full and equal participation in society.”

In a more nuanced definition, the World Health Organization states that “disability is part of being human...Disability results from the interaction between individuals with a health condition, such as cerebral palsy, Down syndrome and depression, with personal and environmental factors including negative attitudes, inaccessible transportation and public buildings, and limited social support.”

It is also important for us to understand how disability is defined under the Ontario Human Rights Code, since all post-secondary institutions in Ontario fall under its jurisdiction. The following is taken from the Ontario Human Rights Commission’s Policy on Accessible Education for Students with Disabilities (2018). Section 10 of the Code defines “disability” as:

- a.** any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical coordination, blindness or visual impediment, deafness or hearing impairment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,
- b.** a condition of mental impairment or a developmental disability,
- c.** a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,
- d.** a mental disorder, or
- e.** an injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.”

The Ontario Human Rights Commission’s Policy on Ableism and Discrimination (2016), meanwhile, recognizes that the definition of disability has evolved over time, and may now include conditions that aren’t listed in section 10 of the Code. They acknowledge that disability should be defined as broadly as possible.

An important point that is not made clear in these definitions, is that disabilities may be apparent (visible) and non-apparent (invisible). Visible disabilities are readily apparent to others, such as physical disabilities, while invisible disabilities are not immediately apparent, such as chronic illnesses or mental health conditions. Also, some disabilities may be episodic, such that the person experiences fluctuations in the impact their disability has on them, or some good days and some bad days.

Disabilities are incredibly common. In fact, Statistics Canada reports that in 2017, 22% of the Canadian population aged over 15 had at least one disability. They also report that in 2017 mental health-related disabilities were the most prevalent type of disability among youth aged 15-24. While this may not have been the case 20 years ago, a growing proportion of students registered with disability services offices are living with a mental health related disability, and this is changing the climate on campus, as well as the need to reflect on practices.

In one study by Fichten et al. from 2003, extrapolation of the data collected from institution administration suggests that there were over 100,000 students with disabilities (documented or not) enrolled in a Canadian post-secondary institution, but that only one quarter to one half of them were registered to receive disability-related services. Meanwhile, according to the Canadian University Survey Consortium from 2011, 9% of undergraduates and 7% of graduate students self-reported having a disability. This is to highlight that disabilities are common on post-secondary campuses and that the numbers of students with disabilities and the number of students registered with the disability services office will often differ.



# Models of disability

There are several different models that can help us understand disability and its context in society. It is important for post-secondary staff to have an understanding of which models they are employing when speaking to and engaging with students and colleagues with disabilities. If one is employing the biomedical model for example, one should be aware of the critiques of that model and take some time to question one's assumptions.

## Medical model

Under the medical model, disability focuses on the rehabilitation of bodily and mental function. This model supposes that disability impacts an individual's quality of life and that disabilities should be corrected with medical intervention. The model further supposes that by improving the functioning of disabled people with medical interventions, disabled people can access a "normal" life. For example, the phrase "he can't read that book because he's blind" highlights the use of the medical model. The medical model has been often criticised for placing emphasis on the impairment of disability rather than on the systems and structures that impact the lives of disabled people. Further, the medical model paints disabled bodies as pathological and defective, which can have an impact on the self-image of disabled people and how society views and treats people with disabilities.

## Social model

In contrast, the social model of disability portrays disability as a function of the way society is organised rather than a person's impairment or difference. This model looks to remove barriers that restrict life choices for disabled people in order to provide them with the ability to participate fully in "normal" life. According to this model, disability is something a person experiences, not something they have. The model also acknowledges that attitudes towards disabled people can be barriers within themselves, requiring education and proactive action. For example, the phrase "he can't read that book because it's not written in braille" highlights the use of the social model. Importantly, the social model does not deny that disabled people can seek medical intervention to minimise the impact of their impairment, though this has been a common critique of the model.



## Human rights-based model

The human rights-based model of disability builds on the social model by recognizing that people with disabilities have rights and asserting that the state and others have a responsibility to respect those rights. The model comes from the United Nations Convention on the Rights of Persons with Disabilities. This model says that the barriers in society are in fact discriminatory, and gives disabled people routes through which they can assert their rights and complain when they encounter those barriers. The human rights model also acknowledges that disability is a natural part of human diversity and a part of identity, and therefore, they are entitled to the same rights, opportunities, and privileges of persons without disabilities.

## An important note on Indigenous Models of Disability:

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*Understandings of impairment from Indigenous worldviews are somewhat different from the disability models outlined here. These conceptions are usually grounded in respect for the fundamental interdependency of all beings in their diversity and difference. In fact, literature suggests that many Indigenous communities find the term “disability” to be alien and contradictory to their understanding of impairments. For some Indigenous people, the idea of “normalcy” in one’s health is related to the balance that person experiences in their spirituality, family, social connections and ancestral attachment to the land.*

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These are the models of disability you may find yourself and others using when interacting with disabled students and peers. Society as a whole is moving toward use of the social and human rights-based models, due in part to the fact that disabled activists have encouraged their use as they promote dignity and autonomy. However, it's important to have an understanding of these models, so that we can recognize and invite ourselves and others to reflect and change their approach when the medical model is being used exclusively.

# Ableism and stigma

Ableism is a set of negative attitudes, beliefs, and actions that consider disability as “not normal” but also less valuable in society. The impact of ableism is the exclusion of disabled people, so we cannot achieve our institutional and collective goals of equity and inclusion without eliminating ableism. This means shifting our conscious and unconscious beliefs, from viewing disability as negative and abnormal to seeing it as a universal and natural part of the spectrum of human diversity.

Systemic ableism is seen in the ways society is structured to grant unearned privilege to individuals perceived to be non-disabled and unearned disadvantage to those perceived as disabled; it is embedded in the institutions’ values, formal policies as well as everyday practices. Ontario post-secondary institutions can play a role in supporting or dismantling systemic ableism by removing barriers to the full participation of persons with disabilities.

There are a number of examples of ways that ableism is embedded in our institutions, specifically, barriers and attitudes disabled people encounter daily, which are exhausting and can explain why some students sometimes do not have the capacity to self-advocate or why they may see the ableism they encounter at post-secondary as normal. Some common examples of ableism include ignoring the needs of people with disabilities, such as not providing accommodations or assuming that they are not capable of participating in activities. Similarly, asking intrusive questions about a person's disability, such as "what's wrong with you?" is a common form of ableist violence, as is speaking to disabled people in a patronising way, such as using a high-pitched voice or speaking slowly.

Another form of ableism can be found in the belief that accommodations for disabled students are unfair advantages. For example, non-disabled students may complain that disabled students “get extra time”, when in fact spending more time to take a test can be a burden for the student, who now may have less time to spend on other things, like studying for other tests. To create more inclusive post-secondary institutions for disabled students, it is important for non-disabled people to be educated on the needs of disabled students and avoid these attitudinal barriers and behaviours.

Internalised ableism is the internalisation of negative attitudes and beliefs about disability by individuals with disabilities themselves. It can lead to self-doubt, isolation, and a lack of self-advocacy. Internalised ableism can manifest in various ways, such as:

- Denial of disability: Feeling ashamed or embarrassed about their disability, leading them to deny or minimise it. This can lead to a reluctance to seek accommodations or support.
- Internalised stereotypes: Internalising negative stereotypes about disability, leading them to view themselves as less capable or deserving of respect and equality.
- Overcompensation: Feeling the need to overcompensate for their disability, leading them to push themselves beyond their limits or try to mask their disability (often seen in autistic students, students with learning disabilities and other non-evident disabilities).
- Misunderstanding one's disability: Feeling different from peers, or stupid, because no one ever explained to them what their disability is; most common for students with learning disabilities.

Post-secondary staff should be aware of the stigma associated with mental, physical, learning, and sensory disabilities and should reflect on the ways that ableism may show up in their interactions with disabled students and colleagues. Similarly to racism and sexism, ableism is a form of prejudice that we are steeped in as a society and, therefore, it can manifest in our actions and behaviours if we are not thoughtful and deliberate in avoiding it. For more information on this, see the CICMH Anti-Oppressive Practice Toolkit, [parts 1 and 2](#).

Further reading on ableism:

[This is Ableism video](#)

[American Psychological Association  
- Understanding ableism and negative reactions to disability](#)

[Medical News Today - What is ableism, and what is its impact?](#)

# Intersectionality

For more information on intersectionality, check out the [Invisible Intersections](#) toolkit.

The term intersectionality was coined by Black feminist scholar, Kimberlé Crenshaw, in 1989 to illustrate the interlocking systems of power and how they impact those who are most marginalised in society. Intersectionality is a theoretical framework that acknowledges the structural dynamics of power and how one’s identity and experiences can be shaped and informed by factors such as race, class, gender, and disability, among other social relations. Intersectionality states that these overlapping factors create a complex web of prejudices, including oppression and discrimination against individuals and communities. It further understands that features of one’s identity, such as race or disability, do not exist independently of one another, but rather intersect to create a unique experience.

## Case example

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*Fatima, a Black schizophrenic<sup>1</sup> student who is also a lesbian and Muslim, will experience her disability differently from James, a white heterosexual student who uses a wheelchair. Fatima will likely also have to navigate misogyny, racism, Islamophobia, homophobia, as well as ableism, all of which may intersect in various ways to lead to her discrimination. Fatima may experience racism when dealing with healthcare professionals, which could impact her care and, therefore, impact her disability. Fatima may also find that she experiences racism in her disabled community and ableism in her Black community, potentially making her feel like an outsider in spaces meant for belonging. For example, imagine Fatima overhearing a comment about how she must be “crazy” during a campus event for Black Muslims.*

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The following video by advocate Keri Gray provides a helpful explanation of the importance of intersectionality within disability.

[Intersectionality & disability, ft Keri Gray, the Keri Gray Group #DisabilityDemandsJustice - YouTube](#)

<sup>1</sup> In this example, Fatima prefers to use identity-first language (“schizophrenic student”), while James prefers person-first language (“student who uses a wheelchair”).

The intersectionality of disability can also be seen in key statistics. For instance, while 22% of the Canadian population has one or more disabilities, women are consistently more likely than men to have a disability, according to Statistics Canada. Meanwhile, a retrospective study from the 2012 National Health Interview Survey in the United States found that non-Hispanic African Americans were more likely to have a severe disability than were non-Hispanic whites. These statistics illustrate that disability will have different impacts on different communities.

One way that we can incorporate considerations of intersectionality into disability models is through the Disability Justice framework. This framework, developed by disability justice performance project Sins Invalid, understands ableism by connecting it to other structures of power such as colonialism and capitalism. Disability Justice recognizes that these structures of power impact how people's bodies and minds are labelled as "deviant", "unproductive", or "disposable". For example, in a capitalist system, everyone is expected to produce a certain amount of work to be perceived as valuable and "productive members of society", whereas many disabled people don't have the capacity to achieve the level of productivity that is expected of them. These disabled people are, therefore, often labelled as "lazy" or "unproductive".

Disability Justice also has consequences for the idea of independence for disabled people. According to writer and community organiser for disability justice Mia Mingus, "with disability justice, we want to move away from the 'myth of independence', that everyone can and should be able to do everything on their own. I am not fighting for independence... I am fighting for an interdependence that embraces needs and tells the truth: no one does it on their own and the myth of independence is just that, a myth."

It is critical for post-secondary staff to have an understanding of intersectionality to provide culturally-relevant and thoughtful support to students with disabilities. Disability Justice provides us with a framework through which we can implement those considerations of intersectionality and shift our own assumptions about disability.

Further reading on Disability Justice:

[10 Principles of Disability Justice by Sins Invalid](#)

[Disability Justice Network of Ontario](#)

# Language

Primarily, people with disabilities are not a condition, disease, or diagnosis; they are individual human beings. There are two ways that people can describe themselves or others and their disabilities. The use of person-first language refers to the individual first, then their disability. An example of person-first language would be to refer to the individual as “the person with a disability” rather than the “disabled person”. Other individuals may wish to express pride in their disability and identify within a disability group or culture using identity-first language. While both forms of language are responses to deficit-based views of disability, the person-first approach can be representative of reclaiming one’s humanity and identity-first language prioritises the disability in their personal description. Both approaches are equally appropriate and valid and depend on personal preference. When in doubt, ask the person which they prefer. Take the person’s lead and prioritise interactions and communication that respects the individual’s ability and choice to self-identify and promote their personal human dignity.

Language is important when communicating with and about people with disabilities. The words and phrases we use, and the references we make to and about people with disabilities, can be affirming or harmful. Harmful phrases may label a person or convey images of defect or deformity, victimisation and being “less than.”. These terms are offensive, dehumanising, degrading, and stigmatising and can be damaging to the individual and a just society.

People with disabilities generally do not value or benefit from being portrayed as excessively courageous, brave, or special. These terms can imply that it is exceptional for people with disabilities to have skills and talents. Comparisons may be used when speaking about people with or without a disability. A person without a disability can be said to be exactly that; avoid using the term “normal.” A better choice, if a comparison between people is necessary, would be to use a term such as “non-disabled person”. While some disabled people do use the term “able-bodied person”, many critics have argued that the term implies that all people with disabilities lack able bodies, and have recommended that the term not be used.

Further reading on inclusive language:

[TMU Accessible Communications Guide](#)

[Disability Language Style Guide](#)

# Combating ableism

To practise anti-ableism, it is important to ensure that the needs and wants of people with disabilities are included in the social norms and rules of our larger society. We can facilitate positive attitudes and behaviours when relating to or interacting with a person with a disability. Below are listed some considerations for combating ableism.

## Ask first

Do not assume someone wants or needs your help. You may offer assistance if it appears needed but first interact directly with the person to determine if and how you can help. Respect the individual's dignity and comply with the person's preference. Listen and ask before you act. For example, you might say, "It looks like you might be struggling with that door, can I offer any help?"

## Physical contact

Some people with disabilities need and expect their physical bodies to provide them stability and allow their independent navigation of their environment. Even if well-intentioned, grabbing someone's arm or the items they are carrying could set the person off balance and, consequently, impact their safety. Avoid patronising behaviour, such as patting someone on the head, treating them as a child, or touching or handling their wheelchair and other mobility aids without consultation. People with disabilities often consider their equipment an extension of their bodies and a part of their personal space.

When speaking to someone at length, consider how you can facilitate the conversation. For example, if someone is seated in a wheelchair and you are standing above them, there may be a feeling of power imbalance. You may want to position your self at the person's eye level by sitting in a chair across from them. Allow for a comfortable space, and be aware of hovering.

## Manner of Speech

Talk directly to the individual with a disability, do not address their companion or support person as an interpreter. Everyday expressions such as "see you later" or "I have to run" are part of our common language and there is no need to apologise or feel embarrassed if it relates to one's disability. An apology may draw negative attention or be more offensive than using the expression as you would with anyone else.

## Confidentiality

Respect the privacy of the person with a disability and protect their confidentiality when discussing sensitive or personal matters and when collecting, storing, or using personal information with them or on their behalf.

## Do not make assumptions

People with disabilities are the best judge of their own ability. Choices should be presented to an individual and they should be encouraged to make their own decisions (for example, as to when and how they might choose to take part in an activity). Opportunities to participate should consider the interests and needs of a full range of persons with disabilities. People with disabilities of diverse backgrounds are the best source of consultation around options to be considered, offered, and maintained.

## Assumptions to question

- “If a student requires accommodations, they can’t handle post-secondary”
- “Accommodations are a bane to meritocracy”
- “Accommodations provide an unfair advantage”
- “Some students are abusing accommodations”





# Accommodations

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This section of the toolkit is intended to provide the campus community with succinct information on accommodations, to have a better understanding of the process for students and to be better able to refer and guide them through it.

## Principles of accommodation

Accommodations are means of removing or reducing barriers that prevent students with disabilities from participating fully in campus life. Once they have identified a student's disability-related need, post-secondary institutions have a duty to accommodate the needs of students to the point of undue hardship. This duty is not a moral duty but rather a legal one. In Ontario it is based on the Ontario Human Rights Code, which post-secondary institutions are required to follow.

**Accommodation involves three key principles:**

### **[ 1 ] Respect for dignity**

Students with disabilities have the right to receive services in a manner that respects their dignity. Human dignity is a complex concept, involving self-worth, as well as physical and psychological integrity and empowerment. Accommodations that do not respect students' dignity would include those which marginalise, stigmatise, or devalue the student. This principle should include considerations as to how the accommodation is provided and the student's participation in that process. For example, an accommodation in which a student is provided more time to complete the exam, but the room where the student is writing the exam is a janitor's closet, would not be acceptable.

### **[ 2 ] Individualisation**

Students with disabilities are unique individuals, with differing needs and situations. Therefore, accommodations should be considered individually for each student as their needs are identified. This also means that blanket approaches to accommodation that use the student's category of disability or generalisations about disability would not be appropriate or acceptable. For example, providing all visually-impaired students with braille copies of the class reading would be unacceptable, as some visually-impaired students don't read braille and require a larger font instead.

### [ 3 ] Integration and full participation

Whenever possible, it is ideal for accommodations to allow disabled students to receive services or engage in the learning environment in the same way as their non-disabled peers, promoting their full participation. This is to say that accommodations should not separate the students who use them from those who do not. For example, it would not be acceptable to have an accessible entrance at the back of a building which forces wheelchair-using students to go through the kitchen while non-disabled students can enter through the lobby.

Accommodations are not all-or-nothing propositions. Rather they can be imagined as a continuum. At the far end of this continuum would lie the most appropriate accommodation, which meets the student's need, respects their dignity, is individualised to them, and encourages their full participation. Alternative accommodations that are less ideal would be found next on the continuum and may even be implemented as stop-gap solutions until the most appropriate accommodation can be implemented. The Ontario Human Rights Commission states that the furthest end of the accommodations continuum, short of undue hardship, must be reached.

## Case example

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*Nabil, a dyslexic<sup>2</sup> student who frequents your writing centre, requires as an accommodation that the writing centre resources be provided with a different font and with more visual cues. In the meantime, while those resources are being prepared, your writing centre offers Nabil the support of a dedicated staff member who can help him write his essay by presenting the information to him verbally in a 1-on-1 meeting.*

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2 In this case, Nabil prefers identity-first language when referring to his dyslexia.

## Procedural component

The procedural duty to accommodate involves conducting an individualised assessment of the student's need. In a post-secondary environment, this means the institution is required to obtain all relevant information about the student's accommodation request. All Ontario post-secondary institutions have a centralised office that facilitates these requests. Assessments are achieved through dialogue between the student and the staff of the accommodation offices, and may also include collecting and assessing supporting medical documentation. In most cases, the procedural duty to accommodate is triggered by an individual's express request for accommodation. A failure of the post-secondary institution to give thought or consideration to the issue of accommodation, including what steps, if any, could be taken, would be a failure to satisfy the procedural duty to accommodate.

## Substantive component

The substantive duty to accommodate involves determining the appropriateness or reasonableness of the offered accommodation as well as the reasons for not providing an accommodation, including proof of undue hardship. In the post-secondary environment, the institution bestows authority to the accommodation office to uphold the substantive duty to accommodate. Therefore, it is the accommodation office that designs the accommodation plan.

# Undue hardship

The duty to accommodate places an onus on the institution to find a way to accommodate the needs of the student unless doing so would cause undue hardship to the institution. In other words, undue hardship is the legal limit of the duty to accommodate.

While some degree of hardship may occur for institutions in accommodating student needs, inconvenience on its own is not a factor that defines undue hardship. There are three criteria for undue hardship:

- [ 1 ] Cost** - If the cost of an accommodation is so substantial that it would alter the essential nature of the enterprise, or so significant it would substantially affect its viability, it may not be the most appropriate accommodation (though an alternate accommodation would still need to be considered). Mere speculation about financial implications, however, is not generally sufficient, and evidence of undue hardship must be objective, real, direct, and quantifiable. For example, post-secondary institutions need to provide concrete evidence of the full cost of the accommodation and copies of financial statements that provide proof the cost cannot be borne.

**[ 2 ] Outside sources of funding** - To offset costs, institutions must take steps, wherever possible, to obtain grants, subsidies, and other sources of funding. Institutions can also consider cost-sharing and tax deductions. When available, students are expected to avail themselves of outside sources of funding to help cover expenses related to their own accommodation (e.g. the Bursary for Students with Disabilities through OSAP).

**[ 3 ] Health and safety requirements** - If an accommodation is likely to cause significant health or safety risks, it may not be the most appropriate accommodation (though an alternate accommodation would still need to be considered). An assessment of whether an accommodation would cause health and safety risks should use objective evidence to obtain an accurate understanding of the risk, as opposed to basing them on stereotypical views. When only the student is affected by the health and safety risk, the institution is obliged to explain the potential risk to the student so that they can assess whether or not it is acceptable. Removing a student with a disability from a learning environment for health and safety reasons must be done with genuine interest in maintaining a safe environment for all students and staff. It cannot be punitive and must use a proportionate response. The student is then entitled to periodic review of their accommodations and reassessment to determine if their disability status is subject to change.

## Case example

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*Elena is a student who uses a motorised wheelchair . The university is worried that use of the motorised wheelchair could potentially create safety risks for other students. A staff team is put together to assess the actual risk and find ways to reduce the risk. The staff team determines that the safety risk is relatively low and creates a list of rules and regulations to be followed by all students, including Elena, to protect student safety.*

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No other factors, such as inconvenience, morale, third-party preferences, or collective agreements should be considered. Providing accommodations to students may take more time for instructors, especially when retroactive, but this cannot be the reason for denying the accommodation. It is also important to note that the onus of proof in these three criteria lie with the institution and not with the student.

## Other limits on the duty to accommodate

There is not a limitless right to accommodation. Other than the criteria for undue hardship, the following are some other limits students might encounter in getting access to specific accommodations.

- If a specific accommodation would fundamentally alter the nature of the educational service, it would not be considered an appropriate accommodation
- If the student still cannot fulfill essential duties for the class, even after inclusive design has been considered, barriers removed, and accommodation options have been examined, tried, and exhausted.
- If the student, or their parent or guardian, does not participate in the accommodation process, for example by refusing to comply with reasonable requests for information.

There is a legal test for determining essential requirements of a class to ensure that they are not discriminatory by design. This test asks:

1. Is the requirement rationally connected to the task or purpose (vs. habit, tradition, ease)?
2. Is there evidence to support that the requirement is essential?
3. Is the requirement socially constructed such that it excludes specific groups for a reason that is irrelevant or based on assumptions about the group?

## Case example

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*Alex is a student in your Public Speaking course who struggles significantly with social anxiety. They ask to be exempt from giving any presentations, but this accommodation is not deemed appropriate as it would alter the fundamental requirements of the course. Instead, Alex's accommodation advisor works with the faculty to make sure that they are offered the option of presenting to a smaller group of 5 students at the end of class, for each of the presentations required in the course.*

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# Roles & responsibilities

## Role of the post-secondary institution

The legal duty to accommodate rests with the institution, not any single individual or department.

**To meet their duty to accommodate, institutions have the following responsibilities:**

- Ensure that the school environment is welcoming and all students treat one another with respect.
- Take immediate remedial action in response to incidents of bullying and harassment.
- Educate all faculty, staff and students about disability-related issues.
- Review the accessibility of the whole institution.
- Include the needs of disabled students when creating or revising services, policies, processes, courses, programs or curricula, or physical spaces.

## Role of the student

Post-secondary students are expected to be active partners in the disability accommodation process. This includes making their request for accommodations known by registering with the institution's disability services office and providing them with disability documentation. They are also expected to communicate their accommodation needs to their accessibility counsellor (or consultant or advisor – different institutions use different titles) and work with them to determine possible accommodations, including sharing what accommodations have been helpful in the past.

It is important for disabled students to know that accommodations in post-secondary are in place to provide them with equitable access to their courses – they do not guarantee outcomes. They still have to meet the course learning outcomes and essential requirements in order to pass their courses.

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*Although these responsibilities and expectations for the students may seem minimal, and the faculty expectations may seem daunting in contrast, it is important to understand that the process for academic accommodations is not easy for students. In fact, it has been estimated that 100,000 to 200,000 students in Canada need accommodations, but have never sought or received them. The possible reasons for this are varied, including the inability to receive the medical documentation necessary to secure the accommodations. Students may not have access to a doctor who is able or willing to sign off on the medical documentation, and many students do not have doctors who will support the needs of students with mental health diagnoses. Furthermore, a psychoeducational assessment to diagnose learning disabilities, ADHD, or autism as an adult can cost an average of \$3500.*

*Additionally, students who had accommodations in elementary and high school often were not included in the conversations about their accommodations and they likely did not learn to advocate for their accommodation needs. Students may not be aware of how to access accommodations, may fear disclosing to the disability services office, and often fear that their accommodations will not remain confidential once they try to move on to the workplace after graduation. On top of the stigma of disabilities, these barriers mean that for a student to have a letter of accommodation and then to approach their faculty to put the accommodation in place is not a simple process.*

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## **Role of disability support offices**

The accessibility counsellors, also sometimes called consultants or advisors, work with individual students with disabilities to link the student's functional impairments to appropriate academic accommodations, to co-design with the student an individualised accommodation plan, and communicate the plan (or help the student to communicate) to the student's faculty. The work of accessibility services is guided by the three accommodation principles described above.

## Role of faculty

Faculty are key partners in the accommodation of disabled post-secondary students. They too are guided by the three principles described above. Their role includes maintaining the students' right to confidentiality, accepting the student is acting in good faith, and implementing accommodations, as needed. Faculty should contact the student's accessibility counsellor if they have questions, concerns or feel one or more accommodations would result in an undue hardship. It is not their role to deny accommodations that they have concerns about.

To promote the principle of integration and full participation, faculty should make sure that their classroom is welcoming and that all students treat one another with respect, they include disabled students in all class activities, and they take immediate action if any bullying or harassment occurs in the learning environment.

## Role of post-secondary staff

Post-secondary staff, while not usually required to implement accommodations, still have a responsibility to support disabled post-secondary students. Staff should be aware of the disability services office at their institution, and should be able to refer students there when appropriate. For more information on how and when to refer, see the infosheet connected to this toolkit.

# Duty to inquire

## What is the duty to inquire?

The onus has traditionally been on students to make their accommodation needs known to obtain accommodations. However, according to the Ontario Human Rights Commission, post-secondary institutions not only have a duty to accommodate, but they also have a "duty to inquire". This means that the post-secondary institution has a responsibility (among others) to do the following:

- Attempt to help students who are unwell or perceived to have a disability by offering assistance and accommodations.
- Be alert to the possibility that a person may need an accommodation even if they have not made a specific or formal request.
- Consider whether the student needs any accommodations before imposing an academic penalty.



## Why is there a duty to inquire?

There is a duty to inquire because some disabilities leave students unable to identify that they have a disability, or that they require an accommodation. Moreover, students may not seek accommodations due to:

- fear/stigma,
- different cultural understandings of disability,
- new presentation of a condition,
- lack of access to healthcare or discrimination/barriers in the healthcare system.

Inquiring is about paying attention to “red flags”, proactively checking in, offering help, and informing students of supports and resources available, such as accommodation supports. Inquiring does not mean inquiring into the nature of their disability (diagnostic information, etc.), or determining eligibility for accommodation yourself. Proactively checking in can be as simple as sending an email to a student who is showing evidence of some of the red flags below. Students can be informed of supports and resources on a page in the syllabus or in a slide at the end of each lecture.



## Red flags to look out for:

- Student is missing key assignments or tests.
- Verbal communication is excellent but student struggles with written assignments, or vice versa.
- Student has difficulty paying attention in class.
- Student has infrequent class attendance.
- Student makes excessive office hours appointments.
- Student makes repeated requests for special consideration (i.e., extensions).

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*\*For more information on how to recognize the signs of a struggling student, respond, and refer them to supports, check out [More Feet on the Ground](#), a free course for non-clinical staff and student leaders.*

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# Accessibility

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This section of the toolkit is intended to provide an overview of accessibility considerations on post-secondary campuses, specifically focusing on Universal Design for Learning as an accessibility tool.

## Principles of accessibility

Accessibility is the practice of making information, activities, or environments as meaningful and usable as possible for as many people as possible. Accessibility means identifying and responding to conditions of in-access with equitable designs and opportunities. There are three principles of accessibility, which come to us from the Web Content Accessibility Guidelines:

### **[ 1 ] Perceivable**

Information should be presented in ways that people can easily perceive or consume through at least one of their senses.

### **[ 2 ] Operable**

People should be able to interact with the information using their preferred method or device.

### **[ 3 ] Understandable**

Information should be easily understandable, with limited complex words, concepts, or instructions.

While this is a high-level overview of accessibility, more specific best practices for accessibility in post-secondary can be found below in the Universal Design for Learning section.

# Universal design for learning

Universal Design (UD) emerged from the fields of urban design and architecture and the initiatives of Barrier-Free Design. It originated from product and environmental designs that considered many factors yet were not created for the average user, but were made to be utilised by everyone. It is an approach that maximises accessibility for its users.

Universal Design for Instruction, Universal Instructional Design, or more commonly known and focused on here as Universal Design for Learning (UDL), is defined as the design of products and environments to be usable by all students, to the greatest extent possible, without the need for adaptation or specialised design. It can be applied to overall instruction, course materials, to physical spaces and facilities, and the strategies used in curriculum delivery.

UDL offers students with a variety of abilities, identities, ethnicities, language skills and learning styles access to multiple ways of being represented, acting, expressing oneself, and engaging with purpose. This results in a student who can recognize what they are learning, why they are learning, and how they can learn. Successful learning is a shared goal of students and instructors in UDL and it aspires to empower and create “expert learners.”. Expert learners are described as purposeful and motivated, resourceful, and knowledgeable, as well as strategic and goal-oriented.



UDL as a framework is proactive and intentional and enables all learners to gain knowledge, skills, and enthusiasm for learning. Curriculum design and delivery through the lens of UDL is not an afterthought but an integral part of the vision, planning, and operations. Applying UDL principles anticipates needs, provides options, and reduces barriers through deliberate planning. These supports for learning can reduce barriers, all while maintaining high academic standards.

Instructors in higher education who are embracing and seeing the results of a UDL approach are reporting that it does not require them to work more or harder but to work more thoughtfully, and usually results in less work after the fact (for example, fewer emails from students with questions or retroactive accommodation requests).

UDL is rooted in science and how humans learn. Research in neuroscience has demonstrated that learners are unique and are also influenced greatly by their context and environments. This offers hope that if curriculum is well-designed and flexible, the impacts on learning can be quite positive.

The benefits of using UDL as a tool is that it offers guidance for developing instructional goals, assessments, methods, and materials. The very nature of UDL is dynamic, offering the ability to integrate and incorporate customization and adjustments to meet individual needs. A supportive, inclusive, and flexible environment can be provided and can operate from a cultural perspective of access, rather than making accommodations the sole responsibility of people with disabilities or shifting the burden away from the learner.

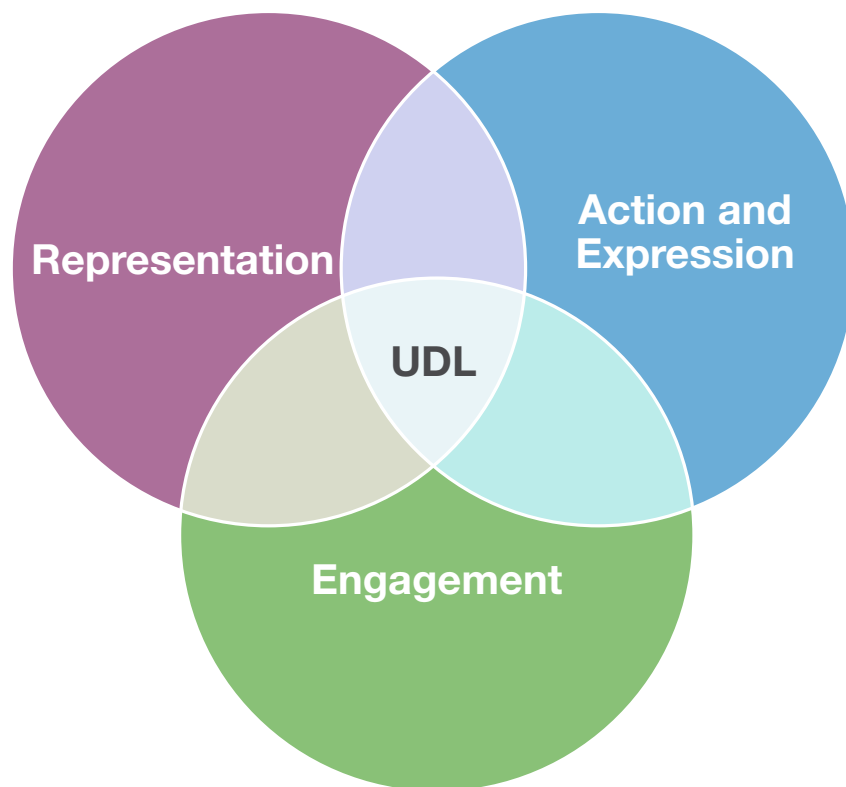
Most institutions have a centre for teaching and learning, which may offer suggestions and guidance on incorporating UDL principles into learning opportunities.

## **What UDL is not**

UDL is not prescriptive, it is not about legislative compliance, it is not a checklist, it is not a one-size-fits-all approach or solution and it is not meant to make learning easy. UDL is also not a mechanism for avoiding the duty to accommodate, as outlined below.

# Principles of UDL

The goal of UDL is to proactively eliminate barriers so that students can focus on learning and demonstrating their abilities. The principles of UDL focus on providing choice in the means that a student acquires knowledge and demonstrates their abilities. UDL encourages multiple means of engagement, multiple means of representation, and multiple means of action and expression.



## Multiple means of engagement

This is also known as the “Why” of learning. The goal is to appeal to the learner’s emotional or affective networks to increase motivation and to recruit interest. Optimise individual choice and autonomy, which increases relevance and value of the material.

**Example:** *Include assignments with topics that feel relevant to students’ lives. Recognize diverse backgrounds and explore roles, statuses, contributions, and experiences of groups typically underrepresented in research studies.*

## Multiple means of representation




This is also known as the “What” of learning. The goal is to present information and content in a variety of ways. Gardner’s theory of Multiple Intelligences suggests people perceive and process information using a combination of eight different modalities. UDL encourages a learning environment that varies the way material is delivered. Modalities may include verbal/language, visual images, logical/reasoning, body/applied physical interaction, music/rhythm, intrapersonal/personal application, interpersonal/ between people and naturalist/patterns in the way nature works.

**Example:** Incorporate visuals into lessons (visual images, drawings, diagrams or videos) to supplement lectures. Share course material in a digital format with all students, which allows for immediate access and alternate format without delay. Record lectures (even in-person ones). Have practice exams available.

## Multiple means of action and expression

This is also known as the “How” of learning. The goal is to provide learners with a multitude of ways to demonstrate or express what they know. Learning is an activity and students should be actively engaged in the process. Enlisting technology provides opportunities for physical interactions with the material. A test is one way to measure knowledge, but it may not be the only way. UDL encourages giving students choice for instruction and evaluation.

**Example:** Allow for choice in how learning outcomes are met. Give students the opportunity to choose between a test, essay, oral presentation or display, to demonstrate their knowledge and abilities.

UDL Guidelines								
Multiple Means of Engagement			Multiple Means of Representation			Multiple Means of Action and Expression		
The 'why' of learning			The 'what' of learning			The 'how' of learning		
Emotional/Affective Networks			Content in a variety of ways			Variety in demonstration of knowledge		
Options for recruiting interest	Options for sustaining effort & persistence	Options for self-regulation	Options for perception	Options for language & symbols	Options for comprehension	Options for physical action	Options for expression & communication	Options for executive functions
								

# Intersection of accessibility and accommodations

Although UDL is designed to support a broad range of diverse learning needs, it does not necessarily eliminate the need for disability-related accommodations. It is important that students using accommodations understand what elements of UDL have been implemented. This information will allow students to assess their needs and move through their course knowing what additional supports they may or may not need.

Educators should continue to seek advice from their disability services office on how to accommodate individual students. It is critical that faculty and other staff understand that the procedural and substantive duty to accommodate requires a full assessment of the student's disability-based needs that may not be upheld within UDL.

## Case example

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*In your course you have implemented UDL by posting your course materials including lecture notes in advance of the class. You think this will make sure all students can access the learning this semester. However, Jackie, a student in your class who struggles with visual processing, requires an audio recording of your lecture and support from a class notetaker as an accommodation.*

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## Case example

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*You have implemented a UDL practice of grace days for your course, where each student can submit their assignments up to two days late. Nick, a student in your class, has a learning disability that you are not aware of, and requires an extension of a week on the final assignment as an accommodation.*

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# Recommendations

## Be aware of different disability models

Having a general understanding of the medical, social, and human rights-based models of disability can help you to identify which models you and others might be using in discussions and programming. Aim to use the social and human rights-based models when thinking about and discussing disability.

## Combat ableism and stigma

Find ways in your role to fight ableism when you see it on campus. This means reflecting on your own ableism as well as questioning institutional forms of ableism that are part of campus processes and procedures.

## Use respectful language

Ask the person you're connecting with if they prefer identity-first or person-first language. Either way, make sure you are speaking to them as equals, and without dehumanising or degrading them. Don't refer to people with disabilities as courageous, brave, or special – they are simply human beings.

## Question your assumptions

Ableism can manifest as assumptions made about students who use accommodations or the accommodation process in general. What kind of opinions do you hold about disabled students and are they based in fact or in subjective experience? Try to engage in self-reflection on a regular basis.

## Get familiar with the accommodation process at your institution

Each school has a unique process to be followed for obtaining accommodations. Familiarise yourself with your institution's process, the required documentation, and the support available to students from the disability services office, so that you can refer students effectively.

## Practice recognizing struggling students and refer them to support

The duty to inquire means that post-secondary staff have a responsibility to offer support to students who may have a disability. Staff should also be aware that some students may need accommodations, even if they haven't requested one. Check out [More Feet on the Ground](#) for a free online course on how to recognize, respond to, and refer a student to supports for their mental health.

## **Learn about Universal Design for Learning**

Universal Design for Learning is an accessibility tool that is available to staff on campus to ensure that programming is within reach for all students. Check out your institution's disability services office or learning resources to see if they offer any training sessions so you can learn more about UDL.

## **Employ both accommodation and accessibility strategies**

Both accommodation and accessibility are critical to ensuring an equitable learning environment for students with disabilities. Accessibility means that students' diversity of learning needs will be considered and accounted for, and accommodation ensures that any students who have outstanding needs will be supported.

# Glossary

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**Ableism:** Oppression faced by disabled people, or those perceived as disabled. Includes prejudice and discrimination.

**Accessible:** The quality of being easy to use by all people, including those with disabilities.

**Autonomy:** The ability and right of a person to have control over their own body and mind.

**Barriers:** Any obstacles, restraints, or impediments that prevent movement or access. These can be physical, like a fence, or conceptual, like an expectation of behaviour.

**Capitalism:** An economic system in which a country's trade and industry is controlled by private actors to make a profit.

**Chronic Disability:** A disability that persists over a long period of time, sometimes the person's whole life.

**Colonialism:** The policies and practices that a person or group of people engage in to exert control over an Indigenous population, as well as to exploit that Indigenous population and their land.

**Disclosure:** The act of sharing information about one's disability with others.

**Episodic Disability:** A disability that features unpredictable episodes of illness that can vary in severity and duration, with periods of wellness in between.

**Identity-first language:** One way of referring to people with disabilities that puts the identity first, usually used when the individual sees their disability as an important part of their self-identity. I.e. "a blind person".

**Neurodivergent:** The quality of having a brain, or mental processing, that works significantly differently from the dominant societal standard of "normalcy". I.e., an autistic individual.

**Pathologize:** To treat something or someone as unhealthy or abnormal. The medical model of disability has been said to pathologize disabled people.

**Permanent Disability:** A mental or physical impairment that indefinitely or permanently impacts the person's capacity.

**Person-first language:** One way of referring to people with disabilities that puts the person first, usually used when the individual wants to assert their humanity. I.e. “a woman with a visual impairment”.

**Racism:** The process by which systems and policies, actions and attitudes create inequitable opportunities and outcomes for people based on race. Racism is different from racial prejudice, hatred, or discrimination. It occurs when this prejudice – whether individual or institutional – is accompanied by the power to carry out systematic discrimination through the institutional policies and practices of the society and by shaping the cultural beliefs and values that support those racist policies and practices.

**Sanism:** The oppression of people who are perceived to be neurodivergent, and the societal pressure to be seen as sane or mentally “normal”.

**Sexism:** Prejudice and discrimination, typically against women, on the basis of sex. Often linked to beliefs about the fundamental nature of women and men, and the role they should play in society.

**Stigma:** The set of negative beliefs, attitudes, and assumptions that are held in society about a circumstance or person.

**Temporary Disability:** A disability that affects a person for a defined period of time. This period of time can be days, weeks, months, or years.

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