DOCTORAL STUDENTS WITH DISABILITIES: CHALLENGES IN GRADUATE PROGRAMS AND RESEARCH METHODOLOGY

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ABSTRACT

Aim/Purpose  Doctoral students with disabilities represent 5 to 10 percent of the graduate student population and, yet, research seldom documents their experiences. We propose a research agenda and methodological approaches that circumvent these limitations, including a substantive focus on universal design to measure graduate program’s awareness of disability, experimental methods to minimize response bias, and ways to redefine disability to improve recruitment of potential research subjects.

Background  Research suggests that doctoral students with disabilities face different challenges than undergraduate students with disabilities and that graduate advisers are pivotal to their success. Existing literature has several limitations, including small sample sizes, a reliance on survey and interview data, little attention to issues of diversity within doctoral students with disabilities, and difficulty defining disability.

Methodology  This article utilizes a systemic literature review (SLR) in order to describe the current state of both the research and the practice of doctoral students with disabilities.

Contribution  This paper defines major gaps in the existing literature and addresses potential ways to address these gaps through research and practice.

Findings  There are barriers for doctoral students with disabilities at every level of the process, which is not being addressed or remediated resulting in greater disadvantages and decreased successful outcomes.
Recommendations for Practitioners

In this context, practitioners will refer to professionals employed at university disability centers and university faculty. Recommendations include disability awareness and resource training for university faculty and staff. Faculty can maintain open lines of communication with their students and advisees related to disability and accommodations as well as increasing program flexibility.

Recommendation for Researchers

Research is critically needed regarding the experiences, needs, and outcomes of doctoral students with disabilities. This research needs to come from both the individuals, faculty, and systemic level of higher education.

Impact on Society

Individuals with disabilities are the largest minority group in the United States. However, this population rarely receives the research, funding, services, and social attention paid to other marginalized groups.

Future Research

Future research needs to utilize larger scale quantitative studies to obtain reliable data. Longitudinal information would greatly improve the information regarding outcomes for doctoral students with disabilities.

Keywords

graduate programs, doctoral students, disability, diversity

INTRODUCTION

Although the disability rights movement and disability rights legislation have helped spur increased enrollment and visibility of students with disabilities, these students continue to face greater physical, social, and emotional barriers in postsecondary education than when compared to their non-disabled peers (Buggie-Hunt, 2007; Hutcheon & Wolbring, 2012). The barriers facing doctoral students with disabilities differ from the barriers in undergraduate education (Farrar, 2006); yet, research seldom documents the experiences of doctoral students with disabilities or offers evidence-based practices for improvement (Jacklin, 2011). Cross-national estimates of doctoral students with disabilities suggest that they comprise between 5 to 10 percent of the graduate population and their numbers are growing (Martin et al., 2011). In this paper, we examine dominant themes in research on the experiences of doctoral students with disabilities, describe limitations in the current literature, and suggest new directions and methods for future research. Increasing our awareness of the challenges facing doctoral students with disabilities is vital, as increased awareness offers ways to improve the accessibility of graduate programs and further diversify both our student body and university faculty.

Disability rights legislation in the United States that protects the rights of students with disabilities includes Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA) of 1990. Postsecondary institutions located in the United States are required, under the ADA, to provide “reasonable accommodations” to individuals with disabilities. Institutions are also legally prohibited from discriminating against an individual based on their disability (ADA, 1990). Essentially, this means that a university is mandated to provide the requested accommodation to a student unless the university can demonstrate that a requested accommodation would cause undue financial hardship or fundamentally alter an academic program. To receive academic accommodations, students must first identify themselves to the school’s disability service professional as a student who has a disability and also must present medical documentation verifying that they have an impairment that “substantially limits one or more major life activities” (ADA, 1990). Despite these laws, many problems of inaccessibility plague universities, in part because the legislation is unfunded (Prince, 2010), but also because of the definition of disability within the ADA. One of the biggest deficits of the ADA was its narrow definition of disability. The ADA defined disability as any physical or mental impairment that results in substantial impairment in one or more life activities (ADA, 1990).

Defining disability is complex; there are two dominant and distinct ways of defining disability: the medical model and the social model. The medical model of disability treats disability as an individual with a deficit that is in need of rehabilitation and “a cure” (Smart, 2009). In contrast, the social
The social model of disability perceives disability as a social construction arising from architectural barriers, prejudice, and unjust economic conditions (Smart, 2009). As such, it focuses on changing attitudes, legislation, and the physical environment to promote equality and inclusion (Smart, 2009). The social model distinguishes between an impairment—defined as the individual physical component—and disability—defined as the identity created through inaccessible design and stigma. Although many disability rights activists reject the medical model, it remains the dominant discourse in the United States. Disability models are theories with great power; they guide public opinion, shape legislation, and drive professional practice.

Thus, one of the main challenges of researching the experiences of doctoral students with disabilities is the dynamic and contested nature of the boundaries and meaning of disability. First, doctoral students with disabilities can have physical, sensory, cognitive, and/or psychiatric disabilities. Their disability may be congenital, acquired in childhood, or obtained while enrolled in graduate school (Olkin, 2002). Second, research on undergraduate students with disabilities finds that most accommodation requests come from students with invisible disabilities—such as learning disabilities, psychiatric disabilities, and attention deficit/hyperactivity disorder (Gordon & Keiser, 2000). Third, many doctoral students with disabilities prefer not to disclose their disability due to persistent stigma around disability, and this is especially true for students with psychiatric disabilities, including bipolar disorder, depression, and schizophrenia (Jacklin, 2011; Jones & Brown, 2013; Olkin, 2002; Padron, 2006). Fourth, many people with impairments may not identify as disabled, whether due to the time of onset of their impairment, the type of impairment they have, or the desire to dissociate themselves from the stigmatizing label of disability (Kafer, 2013; Olkin, 2002). How we, as an academic culture, define disability, who we perceive as disabled, and our attitudes toward disability are at the crux of the experiences of doctoral students with disabilities.

**BACKGROUND**

Most higher education research related to disability examines undergraduate students with disabilities. Despite the existing literature, researchers describe the relative “infancy” of the field (Barnard-Brak, Sulak, Tate, & Lechtenberger, 2010). The current body of research finds that students may feel uncomfortable discussing their disability and the accommodations they need (Salzar, Wick, & Rogers, 2008). Less than 50 percent of students inform their postsecondary institution of their disability and even fewer receive accommodations (Newman & Madaus, 2014). Many undergraduate students with disabilities perform poorly in college, in part due to lower self-advocacy skills, lack of family support, and negative perceptions of campus climates (Murray, Lombardi, & Kosty, 2014). While the numbers of undergraduate students with disabilities has tripled, most of this increase is for white upper- and middle-class students, whereas African-American students with disabilities remain underrepresented (King, 2009). Research has also indicated that undergraduates with disabilities obtain fewer degrees that would set them up to pursue doctoral level education than students without disabilities (Richardson, 2009).

Research examining faculty attitudes towards students with disabilities generally finds positive attitudes (Rao, 2004), but less positive attitudes towards students with schizophrenia, quadriplegia, psychiatric disabilities, and attention deficit disabilities (Glen Maye & Bolin 2007; Hindes & Mather, 2007). When faculty are more knowledgeable about disability, disability laws, and accommodations strategies, they have more positive attitudes towards students with disabilities (Lombardi & Murray, 2011; Zhang et al., 2010), and more awareness increases students’ success (Getzel, 2008). Although the research on doctoral students is scant, it approaches similar themes around disclosure, attitudes, and obstacles.

One of the best examples of scholarship on doctoral students with disabilities is a faculty handbook in which the authors interviewed and surveyed doctoral students with disabilities and faculty advisors in England and Wales about common obstacles and strategies to enhance accessibility (Farrar & Young, 2007). The report offers advice on how to maximize accessibility for every stage of the doc-
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toral program: interviewing, starting supervision, planning the research, giving feedback, fieldwork, networking, conference attendance, and the dissertation defense. Lengthy quotations from doctoral students with disabilities add credibility to the handbook’s advice, the main thrust of which is the importance of faculty supervisors. Doctoral students report higher levels of satisfaction with advisors who (1) they can talk openly to about their disability and the accommodations they need, and (2) who hold them to the same or higher standard than their academic peers. Because it is a handbook and not a research document, it gives short attention to recruitment methods, the number and demographics of the participants, and the methods the authors used to analyze the data.

Other research similarly interviews doctoral students with disabilities, but much of this work relies on small samples of participants, ranging between one and ten people (Jacklin, 2011). Some researchers base their analysis on their own experience of being a doctoral student with a disability, thereby sidestepping some problems of disclosure (Grundy & McGinn, 2008; Koch, 2004; Padron, 2006; Solis, 2006). For example, Perez (2013) connects his own personal experience with interviews of other graduate students with disabilities. Much of this work is unpublished, appearing in either dissertations (Galdi, 2007; Perez, 2013) or conference papers (Holt & McKay, 2000; Rose, 2010). Other research collapses graduate and undergraduate students together (Barnard-Brak et al., 2010; Erten, 2011; Hutcheon & Wolbring, 2012). Research on larger sample sizes merge undergraduate and postgraduate students and, in some cases, fail to differentiate students’ responses by rank (Morinña, Cortés, & Melero, 2014; Salzar et al., 2008).

Research finds that obstacles for people with disabilities begin at the application process (Farrar & Young, 2007; Holt & McKay, 2000). Students report experiencing stress before taking exams as well as stress about how their scores may fail to capture their abilities due to their disability (Belch, 1995; Perez, 2013; Rose, 2010). Once applicants are admitted to doctoral programs, they encounter environmental obstacles in and beyond the classroom—affecting their ability to attend conferences, meet with advisors, and develop social support among their peers (Farrar & Young, 2007). In a survey of directors of disability services at 137 college campuses, Singh (2005) found that only 10 percent rated their campuses as “fully accessible”.

In a study of undergraduate and graduate students, common classroom obstacles include (1) inability to acquire class materials in advance, (2) unhelpful lecture format, and (3) mandatory attendance policies (Morínña et al., 2014). Doctoral students encounter inaccessible university websites and student handbooks and seldom see disabled students represented in these materials (Holt & McKay, 2000; Thompson, Burgstahler, & Moore, 2010). Doctoral students with physical disabilities report difficulties getting to an adviser’s office, classrooms, and departmental social events (Farrar & Young, 2007). Graduate students with visual impairments report difficulty acquiring accessible texts in a timely manner (Farrar & Young, 2007; Perez, 2013) and accessing transportation (Galdi, 2007). At one university, undergraduate and Master’s students reported a shortage of accessible bathrooms and accessible desks at universities, and students with cognitive impairments report that fluorescent lighting in newer buildings hinders concentration (Simonson, Glick, & Nobe, 2013). Another doctoral student avoided working on campus, due to its inaccessibility and lack of quiet space (Jacklin, 2011). A graduate student with a hearing impairment was denied interpreter services in lectures (Argenyi v. Creighton University, 2013). Because fatigue accompanies many disabilities, navigating and compensating for environmental obstacles can leave doctoral students with disabilities less time and ability to focus on the actual work of graduate school (Olkin, 2002).

The Universal Design for Learning (UDL) concept originated from the architectural principle of Universal design concept from the 1990’s that pioneered the idea that all buildings and spaces should be readily accessible to all people (Center for Universal Design, 1997). UDL emphasized equal access to educational curriculum for all (Curry, Cohen, & Lightbody, 2006). The concepts of academic accommodations would become obsolete if UDL were being utilized since all course content would be accessible in all formats without need for adaptation (Bauer & Kroeger, 2004). While online courses are not all necessarily UDL compliant, students with disabilities tend to favor online courses over
traditional in person classes (Crum, 2009; Stewart, Mallery, & Jaehwa, 2010). In a study completed by Verdinellie and Kutner (2015), graduate students with disabilities reported enrolling in online courses based on the flexibility online courses provided in order to manage both their disability and their education. However, students with disabilities reported struggles with online courses. Graduate students with disabilities enrolled in online courses reported feeling isolated from their peers and professors online and struggles getting online accommodations (Verdinellie & Kutner, 2015). Graduate students also reported struggling to communicate effectively with their instructors in online courses due to the lack of response or delays in correspondence (Verdinellie & Kutner, 2015).

**DISCLOSURE AND ACCOMMODATION**

Doctoral students use different strategies to negotiate these obstacles, perhaps the most important of which is a strong relationship with a faculty advisor who can become an ally in acquiring accommodations (Farrar & Young, 2007; Galdi, 2007). Other strategies include finding places on and off campus that allow students to rest (Jacklin, 2011; Solis, 2004) and attending small to mid-size conferences where it is easier to navigate (Grundy & McGinn, 2008). Providing student accommodations in the dissertation defense, such as providing questions in advance or to writing questions on cue cards and finding a room that has minimal background noise, good lighting, and close seating have been shown to be beneficial (Farrar & Young, 2007; Grundy & McGinn, 2008). Doctoral students also recommend that universities provide increased awareness training for faculty, staff, and other students (Erten, 2011; Holt & McKay, 2000; Sowers & Smith, 2003) and that graduate programs increase the flexibility and length of their programs (Olkin, 2002; Rose, 2010).

Disclosure is a recurrent and tricky issue with which doctoral students contend, particularly if their disability is invisible. Doctoral students may develop scripts regarding their disability in which they disclose minimal information about their condition (Barnard-Brak, Lechtenberger, & Lan, 2010). Some doctoral students choose not to disclose because they perceive faculty to be uninformed about the effects of disability (Erten, 2011) or because they want to resist a disabled identity label (Jacklin, 2011). Doctoral students with emotional or psychological disabilities report that they are unwilling to disclose their disability because they fear the stigma that others may attach to it (Jones & Brown, 2013; Padron, 2006). Indeed, departmental chairs consider references to or suggestions of mental illness or instability to be a “kiss of death” in the application process (Appleby & Appleby, 2006). During graduate school, almost 50 percent of doctoral students report experiencing an emotional or stress-related problem that significantly affects their well-being or academic performance (Hyun, Quinn, Madon, & Lustig, 2006). Negative relationships with graduate advisors and the isolation of graduate school can contribute to graduate students’ mental health problems.

Doctoral students with disabilities reported divergent experiences with university offices of disability services. Some research encourages doctoral students to have strong relationships with disability offices’ advisors (Erten, 2011; Farrar & Young, 2007; Hutcheon & Wolbring, 2012), but many graduate students prefer to work out accommodation arrangements with their professors themselves (Barnard-Brak, Sulak, et al., 2010; Perez, 2013) and many students report the importance of a strong relationship with their faculty advisor (Galdi, 2007). While undergraduate students also under-utilize disability services, the interpersonal nature of graduate schools—in which students depend heavily on their relationship with their adviser—may make seeking outside assistance more difficult. It is also imperative to note that, while formal accommodations may be approved by a disabilities services office, these formal accommodations will likely not be enough to address all systemic and attitudinal barriers the student could encounter on their doctoral education journey (Lund, Andrews, & Holt, 2014).

**GAPS IN THE LITERATURE**

There are many gaps in the literature due to the paucity of research on doctoral students with disabilities, and, in this section, we discuss just three of the most important areas. These include (1) the
number of doctoral students with disabilities who enter and matriculate from graduate programs, (2) the practices of disability student offices in relation to doctoral students, and (3) faculty attitudes toward doctoral students with disabilities.

We lack reliable numbers on doctoral students who enter, exit, and matriculate from graduate programs. The National Postsecondary Student Aid Study collects data on how students finance their education and the survey includes questions about disability, which shows that 7 percent of doctoral students have disabilities (Bell, 2011). The second source of data is the annual Survey of Earned Doctorates in the U.S., which found that 1.5 percent of all doctoral recipients declared a disability (National Science Foundation, 2010). Problematically, these surveys use different methods of sampling for entering and exiting students, so we cannot know if the discrepancy is due to disabled doctoral students failing to finish or different sampling techniques (Bell, 2011).

There are good reasons to believe that these figures underestimate the number of doctoral students with disabilities. First, many graduate students may not disclose their disabilities, whether concerns about stigma (Jones & Brown, 2013), because they do not consider themselves disabled (Kafer, 2013), or because they acquire disability during graduate school. Additionally, some of the estimates of the number of doctoral students with disabilities leave out psychiatric disabilities due to the stigma associated (Schreuer & Sachs, 2014). Finally, counting disability varies according to the questions researchers ask and the stakes that students perceive around disclosure. In one study focused on a singular university, the numbers of disabled students ranged from less than 1 percent to over 13 percent, depending on the different sampling techniques used and the time of sampling (Miskovic & Gabel, 2012). Due to the fluctuating numbers and since most research focuses on doctoral students currently enrolled, we know neither how many doctoral students with disabilities drop out of graduate school, nor if they do so for reasons related to their disability, inaccessibility, or unwelcome environments. A final issue with poor estimates of the number of doctoral students with disabilities is that we lack knowledge about issues of diversity within this group. Hence, we cannot know how doctoral students’ experiences vary by different identity categories. For example, how does the experience of being a doctoral student with a disability vary by class, age, gender, race, ethnicity, nationality, or sexual orientation? There are still unanswered questions about how differences within disability—such as time of onset, impairment type, and level of severity—affect people’s experiences.

The second area of little knowledge is the relationship between doctoral students with disabilities and campus offices for disability services. The little research that addresses this relationship is based on qualitative studies with small sample sizes. We lack data that is more systematic and that originates from the offices of disability services. Questions include the following. What proportion of doctoral students with disabilities discloses their disability to offices of disability services? What are common issues that offices of disability services address for doctoral students? How do these issues differ from the kinds that undergraduate students face? Research suggests that the number of students with disabilities is increasing, with the kinds of disabilities becoming more diverse, including psychiatric disabilities, autism, veterans with PTSD, and brain injuries (Madaus, 2011). How does this increase and complexity affect doctoral students? Are offices of disability services developing new policies or practices around doctoral students, and are they coordinating their services with on-campus counseling services to serve students with psychiatric disabilities? Research addressing these issues can offer important insight for faculty, administration, and doctoral students.

The third gap in our knowledge concerns faculty attitudes toward doctoral students with disabilities. We suspect faculty attitudes towards doctoral students with disabilities may differ from their attitudes towards undergraduates for a number of reasons. First, research suggests that faculty members are less positive toward accommodations when they believe these accommodations significantly alter the course of study and that some faculty members perceive accommodations as an unfair advantage (Cook, Rumrill, & Tankersley, 2009). Do faculty members perceive accommodations more likely to cause an unfair advantage and significantly alter the course at the graduate level? Do faculty attitudes shift according to differences of diversity within doctoral students with disabilities? That is to ques-
tion whether faculty attitudes vary by gender, sexuality, race, and class? Second, unlike undergraduate students, doctoral students are not only faculty members’ students, but also teaching assistants, research assistants, and dissertation advisees. How do these different roles affect faculty attitudes? More broadly, how are graduate programs responding to disability? Research suggests that faculty members are less likely to perceive issues of disability among diversity issues (Barnard, Stevens, Siwatu, & Lan, 2008; Schempler & Monk, 2011). Does this lack of awareness correlate with programs less likely to adopt universal design programs of study? Researchers surveyed graduate programs’ awareness of and written policies toward doctoral students with disabilities in 1985 and 1995; they found that while programs awareness and knowledge of disability laws had increased, many still lacked written plan on how to promote accessibility (Ganschow, Coyne, Parks & Antonoff, 1999; Parks, Antonoff, Drake, Skiba, & Soberman, 1987). How have graduate programs changed since then?

**METHODOLOGY**

This article utilized systemic literature review (SLR) in order to describe the current state of both the research and the practice of doctoral students with disabilities. In addition, the narrative literature review allows the authors to provide critical analysis of existing literature as well as to describe knowledge gaps. Initially the authors identified the research question of interest, which for this study was, “What is the current state of the science say in regards to doctoral students with disabilities?” Utilizing the research question, we initially evaluated only research studies that were specific to doctoral students with disabilities, however, we soon recognized that the paucity of existing research mandates that we utilize studies whose participants include all postsecondary students. Only articles published in English were included in this study. The two authors identified themes that were occurring across multiple studies as the main topics of interest. From there, the authors were able to synthesize existing literature and draw conclusions regarding the state of the practice and the science. Providing documentation regarding SLR methodology specific to this paper minimizes bias and demonstrates transparency related to the authors interpretations and suggestions.

**RECOMMENDATIONS FOR FUTURE RESEARCH**

The majority of existing literature on this topic relies on interviews with small samples of respondents or larger surveys that target students or faculty. While these interviews provide rich qualitative data, this method may also pose some problems. First, some doctoral students with disabilities decline participation in research because they do not want to disclose their disability to the researcher (Barnard-Brak, Lechtenberger, et al., 2010) or because they do not identify as disabled. Surveys increase participation, but social desirability bias may make it difficult to know if attitudes reflect behavior. Research on faculty attitudes suggests that their accommodation practices lag behind their attitudes toward accommodations (Cook et al., 2009).

First, longitudinal designs can help answer whether doctoral students with disabilities leave graduate programs at higher numbers than graduate students without disabilities, and if problems with accessibility play a role in their decisions to leave. Additionally, because it is difficult to assess the number of doctoral students with disabilities, longitudinal research designs can capture the dynamic nature of disability. Doctoral students may enter graduate programs with a disability or acquire a disability during graduate school. Among students who enter with a disability, there is still much variation, as the time of onset could vary dramatically. Moreover, because the category of disability is diverse and because people who have impairments may not identify as disabled, we encourage researchers to approach longitudinal studies with multiple theories of disability. The field of disability studies often uses a social model understanding of disability, but this model may fail to capture doctoral students who do not identify as disabled.

Second, experimental survey methods offer researchers one way to circumvent problems of social desirability bias. Because of social desirability bias, faculty may be inclined to over-report their will-
ingness to accommodate students with disabilities. More specifically, because many doctoral students perceive that their disclosure of their disability to professors could trigger negative attitudes, experiments could examine if different disclosure scenarios affect faculty reactions differently. Experimental studies would allow researchers to manipulate the identity of the person with a disability—altering the type of disability but also the set of accompanying identity markers, such as race, gender, class, sexuality, ethnicity, and nationality. A study using an experimental research design shows that disclosing a mental illness led to students’ poorer performance on tests, thus suggesting that students’ own sense of competence diminishes when they disclose previous histories of mental illness (Quinn, Kahng, & Crocker, 2004). Faculty attitudes after disclosure may not only trigger stigma, but may also decrease faculty members’ perception of competence of doctoral students with disabilities.

Surveying offices of disability services about doctoral students with disabilities offers researchers the opportunity to examine accommodation practices and inaccessibility problems more broadly. While this method cannot capture doctoral students with disabilities who choose not to disclose their disability to their institution, it can enable us to understand how offices of disability services conceptualize student needs and the practices they are employing to increase or improve the services they offer. The lack of literature on doctoral students with disabilities suggests that this subpopulation has failed to generate much scholarly attention. Surveys of offices of disability services can reveal what kinds of institutional attention doctoral students with disabilities receive and whether this attention has increased over time.

**RECOMMENDATIONS FOR PRACTITIONERS**

As discussed, students with disabilities at the graduate and doctoral level may not disclose their disability for a variety of reasons. One of the main concerns students have surrounding disclosure is their instructor or faculty members perception of disability and their potential biases. University faculty must be cognizant of their internal biases towards disabilities and their perceptions of accommodations in order to be effective collaborators and mentors with students who have a disability. While accommodating students, it is imperative that faculty also maintain the same level of expectations for students with disabilities. University faculty and instructors must also be knowledgeable about the resources available to students with disabilities in order to direct students who may be struggling. University faculty members can work to increase the flexibility of doctoral curriculum even if that lengthens the time of a student’s program (Rose, 2010). Faculty and course instructors should work to ensure their online and live courses are accessible for students with disabilities and diverse learning styles. This may require additional education on Universal Design for Instruction (UDI) or other inclusive pedagogical strategies to implement in course design. Practitioners also includes professionals working in university disability service centers. These professionals must continually work to educate staff and faculty at the university while engaging and providing resources to students with disabilities.

**CONCLUSION**

Doctoral programs have steep incentives for increasing accessibility for doctoral students as it also promises to increase the accessibility for undergraduates, doctoral students, and faculty. Undergraduate students with disabilities have higher rates of dropping out (Murray, Goldstein, Nourse, & Edgar, 2000) and take longer to complete their degree (Brinckerhoff, Shaw, & McGuire, 1992). Doctoral students with disabilities face limitations environmentally, educationally, and systemically while engaged in postsecondary education. The authors of this paper identified three significant gaps in the existing literature as (1) graduate students, for a variety of reasons, may choose not to disclose their disability leading to data that is not representative of the population, (2) there is inadequate research addressing the actual relationship and service provision of university level disability centers, and (3) the dearth of literature evaluating faculty perceptions of students with disabilities. The number of faculty with disabilities in some fields lags behind the number of earned doctorates for people with
disabilities (Hood, Hood, & McBridge, 2013). Even for faculty in departments in which diversity issues are salient, disability is often ignored and faculty with disabilities are perceived as getting “special treatment” when they receive accommodations (Daughtry, 2009; Sahlin, 2009).

Although college campuses have been promoting the importance of diversity since the 1970s, faculty and students seldom conceptualize disability as a component of diversity (Schempler & Monk, 2011). One way to promote awareness is to promote research of doctoral students with disabilities – to understand how they negotiate the challenges they face. Researching this group of students requires a definition of disability that is open-ended to target all students with impairments and research methods that maintain confidentiality. Our review of the literature reveals a number of directions that researchers might adopt that could help promote accessibility on campus for all students and faculty.

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**BIographies**

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