

FOURTH ANNUAL INCLUSIVE EXCELLENCE SUMMER SYMPOSIUM

*TAR Heel Approach – Training, Access, and Respect to improve accessibility:
with focus on the international, veteran, and disabled communities*

Module 1: Disability Justice, Awareness & Resources

TRANSCRIPT:

StreamBox

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>> **DR. ADRIAL BRYAN:** Good morning, everyone, and welcome to the inclusive excellence summer symposium, we would like to begin by having Dean Messonnier open with a land acknowledgment and we'll continue.

>> **DEAN MESSONNIER:** Good morning, everybody, and thanks for getting up on this beautiful Carolina day. And I'm really excited about this symposium, we'll start with a land acknowledgment. Are you going to put a slide up, or do you want me to just go ahead?

>> I believe Kristine is on it.

>> **DEAN MESSONNIER:** Next slide, please, then. Great. North Carolina is home to the Occaneechi, Lumbee, Coharie, Haliwa-Saponi, Eastern Band of Cherokee, Meherrin, Tuscarora, Sappony and Waccamaw-Siouan Nations, along with many Other indigenous peoples living in both tribal homeland and urban settings. In fact, North Carolina Has the largest Indigenous population east of the Mississippi River. We acknowledge and give Thanks to the First Peoples of this land and their descendants.

It is also important to acknowledge and honor the crucial role of enslaved people in the early Days of this campus. Enslaved people were sold as escheated property to help fund the Establishment of UNC, and the labor of enslaved

people built UNC-Chapel Hill and undergirded its operations until Emancipation. We acknowledge and give thanks to the enslaved people who built UNC and their descendants. May we build upon the memories and goodwill of all who walked and labored here before us with Truth, integrity and honor.

Thank you, I think I turn the program over to Dr. Ramsey White now.

>> **DR. RAMSEY-WHITE:** to the first day of our fourth annual IE summer symposium.

Over the next three days, we will have the good fortune of hearing from some amazing students and colleagues. Who will provide best practices, and strategies for working with our students who are a part of the international Veteran and disabled communities. And too often we think of the work of the diversity, equity and inclusion in our minds and past experiences, and bring up thoughts of how are we providing better opportunities for students, faculty and staff, based simply on their race or gender. However, in the Gillings school, we seek to create a school environment and climate of excellence for all of the many diverse members of our community. And over the next three days, we will -today, we'll focus on disability, justice, awareness and resources. Tomorrow, understanding international student experiences, and on Wednesday, I'm sorry, Thursday, military connected student experiences and support.

Going to the next slide, I would just like to quickly share why we use the inclusive excellence framework to guide the work of our office and the school's action plan. Inclusive Excellence is a model or a framework that was first introduced in 2005, with the collaborative work from the Association of American Colleges and Universities, you may hear of it referred to as AACU, and it is a model that is used across higher education as well as Governments and local businesses. It is a model that re-envisioned the quality of education and services, in our institutions as well as the way that we think about diversity. In our inclusive excellence action plan, there are six focus areas which incorporate diversity into our curriculum, our research, and our recruiting and other administrative services. It is a model that helps us to move beyond just counting the numbers of diverse people to looking at the multilayered processes, policies, and traditions, and that will help keep the Gillings school of global public health, the number one public School of Public Health in the country.

Now, I just want to share some of the ground rules that we'll have for today's symposium, and not just today, this should follow us across all three days of the symposium. These are just best practices or strategies that when you're making comments in the chat, or even speaking, that you use I statements. That some of the topics that we bring up might cause you to feel uncomfortable. Well, lean into that discomfort, when we Saline into it, like, try to understand what you feel

uncomfortable about it. Don't just get uncomfortable and want to move. Understand that there are no bad questions. I promise you, that if you're thinking it, somebody else is thinking it as well.

But also, do not -- always assume best intentions.

Meaning that people will say certain things and not maybe understand the impact of what it is that they have said. So assume that people are trying to be good people first, and when you also when you make comments, understand the impact that it may have.

Listen with your head and your heart connections just again, it's a way of thinking about looking for the good and the best in people. Be self-aware of how much space we are taking up in the Zoom, the panels will not be recorded. What is said in this space, stays in this space, but what's learned here leaves here. And what that means is, when people are talking and sharing their stories, they're their stories and what we like is for people not to go and share other people's stories and try to make them their own, if you will. Or we want to honor that privilege that people have shared their lived experience with us. But take what they have said and figure out how you're going to use it to learn to move forward to work with the populations of students and faculty and staff that we care about.

And then, because we have people with varying degrees of ability to hear or to read what's in the chat, please make sure that you kind of treat the chat like you're speaking, so try not to talk over people or to put a lot of things in the chat, at one time, because it makes it difficult for some of our other panelists and participants to hear. And if you have a question, please type it into the Q & A box.

Thank you for that time, I'm now going to turn it over to Dr.

Adrial Bryan who will introduce our speakers for today.

Adrial.

>> DR. ADRIAL BRYAN: Thank you, Dr. Ramsey-White, yes, I'm Dr. Adrial Bryan, a quick announcement before we introduce the first speaker, we have Carolina captions is providing real-time closed captioning for us today. You can of course view the closed captioning here on Zoom, or by visiting the website in chat.. So to open this symposium, I would like to introduce our first presenter of the symposium, Laurie Selz-Campbell, Laurie is a clinical associate professor here at the UNC Chapel Hill school of social work, she teaches courses on social justice, social welfare, disability, life course, and mental health recovery. And she is also the supervisor for the ATI social work interns who are clinicians and training who are passionate about incorporating expressive art into their practice. Laurie has worked for many years with adults, dealing with mental illness, and she was a part of the team that implemented the first structured mental illness peer support program here in North Carolina. In 2011, she partnered with Hillary -- who

is the ATI clinical director to cofound the -- she helps to co-facilitate. Laurie is committed to bringing -- pardon me, y'all. Laurie is committed to bringing the voices of individuals with lived experiences to social work education, please welcome, Laurie Selz-Campbell.

>> **LAURIE SELZ CAMPBELL:** Thank you, Adrial, good morning, everyone. Adrial, if you could stop the share? There we go. Okay. Give me two seconds to share my screen with all of you. Can you all see my screen? Hopefully? There we go. Well, my goodness, I'm honored to be the first -- I'm honored to be the first speaker for our symposium, and also, honored to talk about this topic, which is very dear to my heart. And informs my teaching and course design and my work in general. So with that, what I -- where I would like us to go today in our 35 or so minutes that I have a chance to talk with you, is to just give you an overview of what we mean when we talk about the term disability justice. And hopefully, you will see as we have that conversation, why it is that we chose to begin this symposium with this topic. We're going to contrast it specifically with other frameworks that tend to guide our thinking and our programming for folks with disabilities. And we'll talk about why the concept is important. And then, we will wrap up with what could it look like in practice? And you notice I used the word could there, I want to acknowledge that quite honestly, our systems are not set up in a -- in a way that embraces a disability justice frame work. And that is not a condemnation, we -- the university providing disability related services is subject to a whole range of federal laws and policies and that really guide what we do and I hope that as you'll see in a few minutes, I'll contrast the accommodations frame with the justice frame. And I think, though, it is still worthwhile to be aspirational, to think about if we really worked from a justice frame, what might that look like in practice? So that's where we're going to go today. If folks do have questions and answers, I'm happy to entertain those as we talk, and I'll leave that to the moderators to just interrupt me (laughs) and I will stop. I don't have a need to go through the entire lecture without you all talking or participating. So given that, what do we mean by disability justice? I will tell you in a minute, the way that I kind of encapsulate it with my students is bodies, boxes and fences. And we will -- we'll see what that means very clearly in just a few minutes, but what I would invite you to do is just to take a minute and type in to the chat, when you hear the term disability justice, whether or not you've read the literature, doesn't matter, just a few phrases or words about what you think of when you hear that term? Just take a little minute to do that. Disability equity. Equity. Nothing about us without us. Yeah. Rights. Access, accessibility. Accessibility, universal design, equality. Levelling the playing field.

Independent living. The ADA.

Focusing on the human, yes, having resources, fairness, equality, everyone regardless of ability is able to participate. Awesome. Equity and accessibility. Get what they need to participate fully. Wonderful. Bringing to light the injustice of the current system. I love that.

Thriving in life. What we would want for ourselves, I love that. What a great kind of thought frame. Life, liberty and justice for all.

Beautiful. Freedom. Pushing laws. Accountability, oh, I love that, yes. Full integration. Wonderful.

Okay. Oh, wait, wait, I missed a few. I missed one.

Full integration. Assisting disability rights. And I'm sorry, if you hear a little rumbling, my go kitties like to take the time when I'm presenting to start dashing around the house. (Laughs) and for little creatures, they make so much noise. (Laughs) So, yeah.

So wonderful, wonderful kind of associations with the term. Thank you for those. And in many ways, all of those are true. And what I would like to -- and what I would like to do is to even push us a little bit further to think about some additional elements of what it means to work from a justice approach and then think about how that can inform our work together. So bodies, boxes and fences.

Incredibly useful. (Laughs) frame work. Let's see.

Okay. And my -- my PowerPoint is not -- oh, there we go. Okay. Okay.

Excellent. So before I get into the bodies, boxes and fences, I want to acknowledge and state that where disability justice came from is really, its roots in the systemic and societal harms of ableism. You can, you know, if you just Google ableism, you will find many different definitions, this happens to be one of my favorites developed by "TL" Lewis. And if you Google them, you will get to their website, which is quite inspiring, and wonderful, and a couple of the things that I love about this definition, is that it is intersectional, and that it really gets to this notion of whose body and mind are valuable, are privileged, are worthy, and that is the root of ableism. Saying that some are and others maybe not so much. One of the -- and Tal IE la talks about how ableism is intimately connected with one's ability to contribute economically to the capitalist enterprise and so, you know, we see who is valuable and worthy based on language, appearance and ability, satisfactorily produce and reproduce, Excel and behave. And in extricable from anti-Black racism, the history of eugenics, ma -- if we had three hours today, we would spend more time going into that in more detail, but I encourage you to look at her work and they really -- and this definition was developed in a collective way and you will get to explore these ideas more. But I just wanted to kind of put that out there as the foundation.

So some of you may have seen some variation on the equality equity kind of imagery that is, you know, very powerful and kind of demonstrated what we mean by equality and equity. I added the in, in front of equality, because I think that that oftentimes, when we make the assumption that everyone is on a level playing field, and we, you know, we give everybody the same box, essentially, we are perpetuating inequality.

So this, you know, we may see this as the medical model of disability. That focuses on the impairment of the human body. Or in terms of mental health, the human mind. And what we see is that short of intervening with the body, there's inequity. The yellow person can't see over the fence. And the others, the others can. And maybe can't hear the music, either, we don't know. When we talk about equity, and I'll expand on these concepts in just a minute. In some future slides. We are really talking about what some define as the social model of disability. That really looks at the way that our systems and structures disable people.

So in other words, there's nothing wrong with being of short stature. You know, there's nothing inherently wrong with that. Says the person who is 4' 10", but, you know, where it becomes disabling is when we don't construct systems so that the small person can actually see over the fence. And so, the boxes really looks at what we do so that the short person gets more boxes and essentially, people get boxes according to their height, so then they're all equal and they can all see over the fence.

Which is -- which is a good thing. Which is a very good thing. I will -- I will suggest in a few minutes that the way that our ARS and not just ours but the way that the Federal policies are, this is the model that we practice. That, you know, think about the boxes, each box has an accommodation and we kind of -- what we're approaching is equity, so that everybody can see over the fence evenly. So what I would like to share with us is a third narrative, a third way of thinking about disability and about how we care for folks who carry that label.

So what we see here is that the focus of disability justice is not so much on the bodies or the boxes, but disability justice is very much about the fence. So in other words, what is this fence that creates barriers so that some people can see over it and some can't.

Who got to decide how high the fence would be? And make the decision that well, Eh, maybe some people don't so much need to see over the fence. That it's somehow okay to construct the fence at the height where some can't see over it. And, you know, it asks us to interrogate our own assumptions and definitions of disability, impairment, whatever we want to call it.

And really at least in my mind, as a social worker, what I so love about this model is that it really brings human dignity and human rights front and center. And so now we see once the fence has been dismantled, which is really what disability justice is about, dismantling the fence, it's interesting, I'm always curious about this, that now the all people -- all three are the same size, which is -- which is great, I would argue that also, if we dismantle the fence, they could still be different sizes, and still everybody would get to enjoy the music. Or, you know, see the, you know, or, you know, or be in the presence of the concert. And so, it's an interesting graphic, and I've always wondered about it but I think that the metaphor holds, that if we think about bodies, boxes and fences, disability justice is really about questioning the fence. And once we begin questioning it, how does that change how we think about the services and the care that we provide?

I want to -- one of the things that you'll see a reference list at the end, I've sent to Adrial, several references that I'll summarize for you at the end but one is a wonderful disability justice audit tool, which is user-friendly, a self-assessment for organizations, for agencies, to look at their -the degree and the way to which they embrace disability justice.

But the manual lists other characteristics of disability justice, in addition to interrogating the fence.

So some of the principles of a disability justice approach really centered the leadership of most -- those most impacted and historically silenced. In very meaningful ways and in all of our practices.

Thinking and acting intersectionally and collectively, realizing that -- and again, we could spend many hours unpacking this together but the ways in which ableism and racism work together, the ways in which in school systems, ableism becomes a back door to enacting racism in ways that are a little more subtle, but still get the job of racism done. The ways in which for example, in order for a trans person to get gender-affirming care, they essentially need to go out and procure a mental health diagnosis so they need to identify as disabled, as gender dysphoric, in order for an insurance company to pay for their gender-affirming care.

Whether that be surgery, or hormonal treatments or whatever, so there are very subtle ways in which disability intersects with other elements of oppression and the disability justice approach really keeps this in mind. Disrupting the assessment of human worth by the metrics of capitalism. Really questioning the notion of, you know, what does it mean that what we are aiming for is that all, you know, folks will be able to not be reliant on public systems and will be able to contribute to the economy. Well, yes. And what if, for any number of reasons, that's not the reality of folks? How do we embrace and care for and empower in that respect. And then,

finally, an ethic of mutual care and commitment, there is very much, if you're familiar at all with the mutual aid literature, that it talks very much about how communities need to come together because the State or the system is not providing them with their needs and so, there's very much of a mutual aid, sort of underpinning to disability justice.

How are we doing? Do we need to stop a second for questions or shall we motor on?

(Laughs).

>> We do have one question.

>> **LAURIE SELZ CAMPBELL:** Okay.

>> It says, can you speak to the idea of meritocracy as it relates to the disability narrative and the social/medical models.

>> **LAURIE SELZ CAMPBELL:** Yes, absolutely. But for a very long time, we only have a few minutes today. But really, the motion, meritocracy, say that people have merit, based on their ability to essentially be independent, be autonomous, work, contribute to the autonomy, and that anyone -- it's kind of the pull up by your boot straps, anyone can achieve that and if they don't, within meritocracy, the assumption is all too often that they didn't try hard enough, or that they are somehow deficient. And so, yes, meritocracy is very much woven into our discussions and disability justice pushes back against that by saying, no, you or all of us being human beings with all of our variation, are important, worthy, and that meritocracy is a tool that is used to privilege some and marginalize or denigrate others. Does that answer the person's question? Give a little thumbs up or...and any of these things we can -- I know we have ten minutes at the end for Q & A, I think we do, right? So, yeah, so we can come back to that. For sure, and maybe actually, these next slides will help with this a little bit. So why does this matter, aside from being a cool they are theory, which it is. What it does matter in terms of what we actually do? So and one of the things that again, I want to emphasize here, is that I'm kind of lining up these three different frame works and I'm not saying that any one is bad. I mean, they're all -- I think that they all have their place, but I will argue that we stop ourselves in terms of really moving towards justice, that we can do a better job of doing. So what I call, you know, the disability services model, which is, often also the medical model. Centers focuses on the deficits or the impairments or the disabilities that are intrinsic to the person. And we assume that that's where the disability lives. Is within the person. So our actions focus on treating the person, remediating whatever the impairment is, and sometimes, you know, exercising some degree of control often in the name of safety.

This is where some of my mental illness thinking comes in. -- mental health thinking comes in, to we often impose rather controlling interventions on folks, and

we say that it's in the name of their safety, which it might partly be, but we also know it's about other things as well.

Within the medical model, rights and access can be earned by demonstrating that one is competent and that one merits rights and access to the questioners, question a minute ago, and what this often looks like is compliance with treatment. So the -- you know, the sheltered workshop kind of model of employment, once people have demonstrated that they have mastered that, they can move along to more independent employment.

We do this same thing with housing. Within the housing continuum model. So again, this is the bodies, we focus on the -- and we assume that the disability lives in the person and so, what we're doing is intervening with the person. A disability rights model also called the social model of disability, also called the boxes, really focuses on societal disablement. So what do systems, policies, universities, do to, you know, disable people and what can they do in terms of interventions to remove barriers, to provide resources and to provide accommodations?

But this is important, because these are considered sort of special needs, or like extra things, accessing them is very often about demonstrating and proving eligibility. Or that one merits these extra things to help one to function. And we know that these demonstrations of eligibility are often quite burdensome.

And it's not just in the disability system, it's in the welfare system, in so many of our -- so many of our social systems. That there is often some pretty burdensome eligibility and when I say burdensome, I'm talking about financial burden, time burden, psychological burden, I mean, you know, pretty -- many, many different kinds of burdens placed on folks to demonstrate that they -- that they merit this, these special, you know, they merit getting three boxes instead of one.

A disability justice model, really, and you probably would imagine that you see where I'm going with this, that in many ways, you know, when we look at our E RAS services, and again, those are very much shaped by policies, way above us, at the university, it's a robust accommodations model. And within that robust accommodations model, is a pretty involved system for demonstrated eligibility. A justice model in contrast to that, really is sort of Jetsons the idea and the importance of eligibility. It assumes that -- that rather than the fence between abled and disabled, there is simply a variation in the human experience. In human bodies, in human minds, and a justice approach really says it is the responsibility of systems to do our very best to center the dignity and rights of all of those folks.

Without conditions, without eligibility, and by default.

And so that -- and so our actions again, focus on the fences, dismantling the fence.

Full inclusion, self-determination, and I think one of the most powerful ways that we can dismantle the fence is through universal design, which I'm going to chat about in just a minute.

So does that make sense as a differentiation between disability services, disability rights, and disability justice models?

Does anyone have questions?

Or need clarification? About those? Okay. Just go on.

So what would it mean? To shift our frame from accommodations to justice?

And I am focusing here on higher ed, in well, I'm focusing in general, but some of the examples that we use we'll focus on higher ed, because here we all are. And I know that, you know, this is a concern to many, if not all of us. So what would it look like? And again, I have some links in the last slide too, some resources for you. I want to talk a little bit about universal design, as one of the main sort of conduits through which a justice approach is actualized. So this is my definition, you know, sort of linking universal design specifically to this idea of fences. And intersectional oppressions and so forth. And so universal design is really about knocking down the fence rather than kind of working around it. And that I think is important and incredibly powerful. To bear in mind. A more formal definition, of universal design, and I love this quote, the universal design assumes that the range of human ability is ordinary, not special. And I will say universal design emerged really out of sort of architecture and kind of civil engineering fields, and really focused on physical environments at first. And then, we'll see in a minute was kind of taken on by the education field, and adapted.

And so, universal design is essentially the design of products and environments to be usable by all. To the greatest extent possible. In the most independent and natural manner possible. In the widest range of situations, without need for adaptation, modification, assistive devices or special solutions. And usable by those of varying size, physical, sensory, mental health, or intellectual ability or skills or gifts.

So and there's actually the website, the website that I have shared with folks, really helps you to understand in more detail what universal design is about -- universal design is about, and, you know, you will see -- I think, if you look into it, just a little bit, that it really goes beyond what the ADA talks about in terms of accessibility.

Because for any number of reasons, we know that that, you know, even following the letter of the law of the ADA, still creates burden. And still creates inequity. And so we don't have time to go through all of these, but there are kind of seven core principles of universal design through which we can look at anything, so, you know,

as simple as using an elevator. And so, you know, equitable use. Can everyone use the elevator? Or are there people who can't?

Flexibility in use. Can an elevator be used and accessed by someone who is standing?

Someone who is in a wheelchair? Someone who is blind? Someone -- can the elevator be used safely and successfully by all people?

Simple and intuitive use are the kind of guide posts there to support use.

Perceptible information and of course then that would mean accommodating to the varying sort of sensory needs of folks. Tolerance for error.

Is, you know, is elevator use safe enough that any person can use it without risking danger to themselves? You know, and thinking, you know -- I've watched some of our students in wheelchairs trying to get into the elevator, and sometimes it kind of sticks on the edge a little bit. So they have to give it a little extra push there, well, you know, as the elevator is closing, that's a little scary for folks. Low physical effort. And then size and space for approach and use.

And so one of the things that we do in my disability policy class is we have some worksheets that kind of go into more detail about what each of these things means, and we send folks off to do a little inventory of our building, which is -which is pretty accessible in terms of the ADA. But we quickly find that there are many ways that folks with varying abilities have more or less challenges with true access. So that's universal design for physical spaces, universal design for learning was sort of take the concept of universal design was adopted by the education field and there's a really great literature about how we structure our learning experiences to, you know, kind of from the get-go, without -you know, special accommodations, or, you know, but from the get-go to be accessible and engageable, and just invite many different preferences, skills, needs, for engaging with the material that we're teaching. And I will say that over the past few years, I've been really experimenting with my assignments. And I -- and with my kind of readings and videos, I think I could do a better job with that, but with my assignments so that, you know, an assignment is not always an APA paper, you know, ten-page paper. Many -- that there are many ways to represent one's mastery of a concept. And what I have found is that A, it really gives folks a chance to shine in the way that they best shine, and it's beautiful, and it's good for everyone to kind of open up those choices and those options. So that is universal design. For learning, and again, just very, very quick overview of that, so, you know, they talk about how do students engage with the material? How do they connect with it? In addition to reading articles. How do they represent or store or acquire knowledge or skill?

And then how do they represent or express their knowledge or skill, and that's where the assignment piece comes in. And so, you know, some of us may -- we -- depending on if you teach and where you teach, you may have folks working have a group team assignments.

And, you know, universal design for learning approach would tell us that that's great for folks for whom that is effective, comfortable, not burdensome and does it not behoove us to think about an option for the assignment that can be completed individually as well, so again, we could talk for a very long time about that.

So questions? Look at that.

Five minutes. We are on time.

So good. (Laughs) so what I want to close with is just some kind of reflection questions. And again, I am saying this with full appreciation that we in the University exist in a system that doesn't really embrace disability justice, and so, there will be challenges with fully embodying this model. However, you know, one of the things that we talk about in social work, a lot, is, you know, given the brokenness of the systems that we work in, where are our leverage points? Where, you know, that we are not powerless, within those systems, and what are things that we can do to move ourselves towards greater equity and justice and so forth. So my questions, what if, inclusion and accessibility were not optional? What if it was not accessible to say, we can't affordable to make those updates to our dorms? What if it were not acceptable for a faculty member to say, this accommodation is too burdensome, I'm not going to do it?

What, you know, but instead, what if inclusion and accessibility were a cultural norm and an expectation? For all folks who work, live, and engage, study, at our university. What if accommodations were not sort of extra things to be earned or deserved. But instead, just part of our mind set. How we engage with those in our care and, you know, and by, you know, I mean our students, our employees, all of the folks. Supporting dignity, self-determination, and ability to thrive.

And then finally, what if we included impacted folks in all of our efforts towards change?

One of the things, you know, some of the most important things that I've learned about the inaccessibility of our social work building, I have learned from students with disabilities trying to navigate those things and there's things that just went right over my head. That I, you know, that because, you know, because I can open the very heavy door, you know, I have the privilege of not thinking about what if I'm in a motorized wheelchair, where opening a heavy door is some combination of muscles, and backing up and then, kind of maneuvering yourself into the door, and, you know, what if -- and so, that's the beauty in a very practical way of including impacted folks in all of our change efforts because I promise, folks who are directly

impacted by these policies and systems are going to notice and experience stuff that those with greater privilege don't have to notice and often don't. Not with ill intent, you know, we talked at the beginning about assuming good intentions, this is not a purposefully malicious thing, just that we -- you know, it's the natural human phenomenon.

What if we intentionally tried to be more inclusive as we're designing programs. And then so there's what if. And then, where are. Our openings, or leverage points to move towards these aspirations, even though we exist within an institutional frame work where ableism is alive and well.

So, you know, where are -- and I know -- you know, that some of the more sort of radical social change and social movement thinkers will say, that incremental change is not okay. And while I agree, often, incremental change is what we can do and at the same time, as we're working towards these more sort of sweeping changes, what, you know, what can we do to make things better for our students and employees now? And where are our opportunities to make our environments, physical, social, educational, maximally inclusive by default? Again, without eligibility, without bureaucracy, where are our opportunities to do that work at the front end, so that by nature, what we offer to our students is more accessible and more inclusive. So it's 9:50. I have sent all of these materials to Adrial, and she will share them out with you, I included some articles that focus specifically on students in higher ed. And navigating the accommodations system that and I -- I find all of these articles thought provoking, and important. There's the link to -- and I also sent the PDF to Adrial, the disability justice audit tool, which is just cool to read through. And again, really thought provoking. And then, I pulled two websites, cast, and RL mace, one that cast focuses on universal design for learning and RL Mace focuses on universal design for physical spaces and gives more detail than what I was able to give today. And I want to end just with these beautiful images, Micah is an artist, who has used -- uses his art towards the ends of social justice and I chose both of these images because I love them both and I couldn't decide. (Laughs) so I thought, why not choose both?

And so, you know, some -- one of the things that speaks to me is we are powerful, not despite the complexities of our bodies, but because of them.

And, you know, what if -- what if we really believed that and worked to embody that? And so, we did it! we did it!

(laughs) thank you, all, and is this a good time for just a few questions? And would you like me to leave this slide up or should I stop the share?

>> That is up to you, really.

Yeah, we have a couple of questions in the Q & A.

Probably be able to get through about three of them.

>> **LAURIE SELZ CAMPBELL:** Okay.

>> Can you speak to how we create an environment of mutual care and commitment, thinking and acting collectively, disrupting the assessment of human worth by metric, etcetera, within the current academic structure that highly values productivity and many of the specific metrics are at the individual level.

>> **LAURIE SELZ CAMPBELL:** Yes.

Oh, that -- I can talk about that, absolutely, that's - you've asked the important question right there. And there are -- and, you know, what I appreciate about it is the acknowledgment that in many ways our whole education system is set up to focus on individual achievement of benchmarks and, you know, whether those are academic or professionals or competencies or whatever. And that -- and honestly, I don't see that changing. In the immediate future. However, I think that -- so a few ideas come to mind. One is we can name it.

We can -- in our settings, in our, you know, if we are privileged enough to be teaching, we can name that in our classes and just sort of acknowledge that for what it is. We can also -- I'm a big fan of creating sort of dedicated spaces where folks with various marginalized identities can come together, and so with the idea that, you know, the burden of having, to explain one's self, to folks who don't share that identity, all the time, gets pretty exhausting. So that we can create those spaces for care, for support, for kind of letting down one's guard. I think that we can really look at and this is something that I'm trying to do a lot, but look at our assignments and look at our readings and discussions and in class activities and just think about how, you know, are we privileging certain kinds of knowledge acquisition, certain kinds of learning, and really leaving out folks who have challenges with -- with others. And so, those are just a few ideas. So that the naming and the creating spaces, dedicated spaces, and I think, you know, the other thing that we can do is when we -- when we, and we, I mean, like, administrators, or professors or whatever, when we ask folks with marginalized identities for their feedback, or their input, we can act on it. Not just we can't, we need to act on it. One of the things that students so often experience is that they -- they lay out all of this stuff and it's beautiful and organized and it's great, and then nothing happens. And so we can be more accountable.

And I think that again, you know, we may not be able to meet every need, but I would wager to say that there are things that we can do. So I hope that gives you at least a partial answer.

>> Thank you, we have time for one more question. So the question is, why is the word disability still used?

>> **LAURIE SELZ CAMPBELL:** Huh. Yes. That -- I -- I think about that often. And, you know, actually, there are a couple of perspectives on that. I think that the term

disability is used because we are -- our society is still organized in terms of the fences. And on one side of the fence, is not disabled, and on the other side of the fence is disabled. And, you know, the whole -- you know, the Americans with Disabilities Act in many ways is about dealing with the fence. And so in that respect, you know, we -- we use it because that is in fact an accurate depiction of how our society depicts this, this phenomenon. And I've also read some very important and thought provoking materials on, you know, we don't need to eliminate the term disability, we just need to use it differently. Because the fact that people are disabled by their environments is a real thing. And we -- there's an -- the chiming clock. There's a wonderful -- and I can send it to Adrial, there's a wonderful TED Talk by an Australian woman named Stella young, who talks about the social model of disability, and how in some ways, disability is very real. And to say oh, if you just have a positive attitude, and so forth, then it will become irrelevant, that's not true, we live in a disabling society, and so it's kind of both/and. And I really appreciate the spirit of the question. Is there a whole other construct that we need?

>> Thank you so much, Laurie.

I think there are a couple of unanswered questions in the Q & A. If you would like to type in while we go on our break.

>> **LAURIE SELZ CAMPBELL:** Sure.

>> Thank you.

>> **LAURIE SELZ CAMPBELL:** Yes. Oh, yes, I can do that. I can type, yes. I will.

>> Thank you.

>> **DR. ADRIAL BRYAN:** Wonderful, thank you very much, Laurie, for your excellent presentation, and for laying this out for us today.

We are now going to take a five-minute break, we'll come back at 10:00, and have our students with disability panel discussion and Laurie will answer some of your questions in the meantime. We look forward to seeing you all again in about five minutes. (Five minute break)

(Please stand by for live captions to begin)

Students with Disabilities Panel:

>> **DR. ADRIAL BRYAN:** So let's go ahead and get started, so the next section of today's symposium session will be the students with disabilities panel. I will be serving as the moderator and I would now like to introduce the three panelists so Student 1, Student 2, Student 3, please introduce yourselves to everyone and state your name and degree.

>> **STUDENT 1:** (Inaudible) (recording stopped).

>> **STUDENT 2:** My name is Student 2 and I'm a recent graduate

from the MPH program, I concentrated in health equity, social justice and human rights.

>> **DR. ADRIAL BRYAN:** Thank you. Student 1?

>> **STUDENT 1:** Hi, I'm Student 1, (Inaudible).

>> **DR. ADRIAL BRYAN:** Thank you. And Student 3?

>> **STUDENT 3:** Hi, I'm Student 3, and I'm a second-year student in the masters of social work program here at UNC.

>> **DR. ADRIAL BRYAN:** Welcome.

I will of course pose the question and then Student 1, Student 2 and Student 3, if you would answer the questions in that order?

Let's begin, then. So question number one. What are some positive associations or outcomes in having a disability?

>> **STUDENT 1:** For me (Inaudible) incredibly diverse people. (Inaudible) personally I feel that I have become more empathetic as a result (Inaudible) so because of that,

people often mistake me for being able bodied and this can make for awkward interactions when I have to disclose someone, hey -- I really can't read the font in your PowerPoint presentations.

Or something like that, because people are going to be caught off guard and just awkward interactions and I've had so many of these interactions throughout my life that I have come to understand that the people around me also have a lot going on, that I might not be aware of. I fully understand that other people around me can have a lot going on in their own lives and I might not understand or be aware of those things going on. And so I feel like I'm more empathetic as a result of that.

>> **DR. ADRIAL BRYAN:** I think we're having difficulty with your audio. There seems to be a bit of noise in the background, like moving around.

>> **STUDENT 1:** Let me...is that better?

>> **DR. ADRIAL BRYAN:** I think it sounds better to me. (Laughs).

>> **STUDENT 1:** It's connecting to my iPhone and rather than my head phone, really strange.

>>Jess: You sound a little like far away, or smothered.

>> **STUDENT 1:** Hi.

>>Jess: Much better.

>> **DR. ADRIAL BRYAN:** Much better.

>> **STUDENT 1:** Can you hear me better now?

>> **DR. ADRIAL BRYAN:** Yes.

>> **STUDENT 1:** For some reason, Zoom had connected to my iPhone microphone rather than my earbuds, were you able to hear my answer or should I repeat myself?

>> **DR. ADRIAL BRYAN:** Yes, repeat yourself, just to make sure that that none of the information was lost.

>> **STUDENT 1:** I want to acknowledge the people with disabilities are an incredibly diverse group of people. And so, my answer to the question is going to be super different than the answer that you'll hear from other people with disabilities. Personally, I feel that I've become more empathetic as a result of having a disability, I have what we call the invisibility disability, which simply means that my disability isn't really apparent unless I disclose it and people have mistaken me for being able bodied. I have to explain, hey, I can't read the print in the PowerPoint presentation because people are caught off guard and I've had so many intersection -- I understand that people can have a lot going on in their own lives that I might not be fully aware of that, I have become more empathetic.

>> **DR. ADRIAL BRYAN:** Well, thank you. Student 2, what are some positive outcomes or associations in having a disability?

>> **STUDENT 2:** Great. I would say, we are -- well, I would say that like, I am very good at communicating considering I have to like tell people how to best help me be successful.

So I guess I'm like good at knowing people's strengths and able to delegate tasks, this person can help me with this because they're good at this.

I'm also very futuristic, so like, I -- considering that I've been in academia and I have had my disability for since I was born, I'm able to kind of like problem solve like predict the problem solve in like planning on how to fix the problem prior to the problem even happening. And knowing like how to like change up my plans and be flexible, within whatever I'm doing.

>> **DR. ADRIAL BRYAN:** Very good. Thank you. Student 3, the same question?

>> **STUDENT 3:** All right. So I am neurodivergent, ADHD, and I've had that forever so my answer would be kind of echoing like what Student 1 said, a deepened capacity for empathy for other folks. Who are differently abled. Especially like neuro diverse folks. Again, my prior work as a caseworker a lot of my clients were neurodiverse, and just having someone who understood their experience, especially like navigating this Arcane public service environment, all of this stuff that you have to go through to get assistance, like it was helpful for them to know that somebody who shares their experience, was kind of on their side. And just some stuff, like unique to having ADHD, like the way that I have kind of been coping with the way that my brain works differently, forever, and some positives of that are like, problem solving, like I can often I have like an angle or a perspective on a problem

that is like unique. And also, hyper focused, like if I could be like that all the time, oh, that would be great. But (laughs) when I do have hyper focus, it's awesome. And I, you know, I have my kind of like hyper fixation interests and know a lot about specific things that really interest me so that is cool. And more reflecting on this question, I kind of realized like that it was kind of difficult to come up with positives at first because like, it hasn't been super easy to be a person with ADHD in the public education system, and so like there's a lot of shame and socialized with self-identifying as someone who's neurodiverse, yeah, there's a lot of positives that I was able to come up with, so. That's my answer.

>> DR. ADRIAL BRYAN: Very good. And actually, that's a big part of why we have this question is often having a disability comes with negative associations right? And there are challenges that certainly come with a disability. However, there are some nice skills that come about from having a disability that can be very beneficial to the individual. So moving onto the next question, then. (Laughs) are there any disability stereotypes or misconceptions that you would like to dispel?

>> STUDENT 1: I think -- thank you. One, that I think about a lot is the idea that just because someone is succeeding doesn't mean they're not struggling in their success. I think of an example one time an undergrad when I met with a professor to possibly work on a project together, and we were chatting back and forth for like an hour, or so and one of the questions that I asked this professor was have you ever worked with a student with a disability? And his answer, we talked about it for a little bit, he shared that he had worked with a couple and then, you know, we talked about my grades and some of the courses I had taken, and he said your grades are really good, so it doesn't matter that you have a disability, which I think was very well intentioned. But kind of came across not the way that I think he had intended it to come across, kind of came across, color blind to my disability. If you'll allow the analogy. He saw like, well, you do well, it's like you don't have one. Well, I certainly do. I have to deal with it every day, so I would like you to acknowledge that I have one. And so I think he was very well-intentioned but I think just because someone might be succeeding in one metric doesn't mean that they're not struggling in another metric. That's one misconception that I would like to dispel for sure.

>> DR. ADRIAL BRYAN: Thank you. Student 2.

>> STUDENT 2: For me, I'm actually legally blind, and it's quite like obvious when people see me that I'm legally blind.

And I have a hearing impairment as well. So I want to say one huge misconception or like stereotype is people see the disability before they see the individual or see the disability as the individual.

And instead of like seeing the person as an individual, like, a human being with dignity, they just jump into helper mode, how can I help you or just assuming that we need help. Like, for instance, when I was going to my graduation, and fighting through 4,000 people, like, people were constantly grabbing my arm, through the crowd, like, I'm like, I don't need help. I -- (Inaudible) and I mean, also, like, kind of like what Student 1 was saying, people have the tendency to see individuals with disabilities as being like so amazing. Like, I just think that's very weird. Because just like, okay, I have the abilities to like overcome my challenges to be in the places that I'm in. I don't expect for people to just randomly tell me that I'm amazing, even though I am. (Laughs) But not for that reason.

(Laughs).

>> **DR. ADRIAL BRYAN:** Understood. There's a difference. When people give you praise for things that you have done well and acknowledge like even with your disability, hey, this is a challenge, and you can handle it so well, but when people come up to you arbitrarily and just say you're amazing, it is like, how do you know that?

Knowing who I am. To add a full disclosure I'm also visually impaired. Student 3 what is your take?

>> **STUDENT 3:** All right, my take, so this is kind of also you unique to having ADHD, but people minimizing my ADHD, to just one not being able to focus and two, being like an outgoing and lively person and like my personality is not because of ADHD. Like, yeah, maybe I like developed kind of humor as a coping skill, etcetera, like due to my experience. But it has been something that's come up a lot, where people are like, oh, you just have this like ADHD is having this bubbly personality and distractable.

It's larger than that it and impacts a lot more domains of my life than. And also, like, that misconception leads to folks who are a little bit, you know, who are more shy, or reserved like not being identified as especially special assigned as female at birth. Often will have like the ma attentive type rather than the like hyperactive presentation. And so like people go unidentified due to that misconception. And also, another one is that I heard a person like in my like neurodivergent group, pills aren't skills, that resonated with me, just because I'm medicated doesn't mean that I'm cured because like, it sure, it helps with the kind of chemical stuff in my brain to have sustained, attention, however, executive dysfunction is present, organization skills are very definitely lacking. So although like medication is very helpful, it definitely has not cured me.

So those are my two big things.

>> **DR. ADRIAL BRYAN:** Very good. Thank you for bringing up those points. It's important to remember sometimes how misconceptions can wind up being

confining to those that they're placed upon and also that, you know, there's not a magic pill.

Let's move on to the third question.

So what are some of the challenges that come with a visible or invisible disability?
Student 1?

>> **STUDENT 1:** Yeah, so, like I mentioned, my disability is largely invisible. Unless you have a high resolution picture of my retina and see the red cones. Conal dystrophy, it causes low vision and progresses slowly over time, which is frustrating. Coupling this with the fact that so few people have heard of my condition, it is rare, I have to disclose my disability in a moment where I don't want to. I find that draining to explain, my condition is called this and this is what happens. It can be draining at moments. I don't want to always explain it and people sometimes will ask a lot of questions about it, which can be draining. And I think there's a difference too, between like, you know, the good faith questions and the just kind of like, really curious out of left field questions that can be really tiring, like oh, how does this affect your ability to do X in your personal life, well, let's keep this focused on work, right, that can be really draining. And so I have to debate how much I want to disclose, how much I want to explain it, how much context I want to provide and that can be really exhausting overall.

>> **DR. ADRIAL BRYAN:** Absolutely, I will second that. Student 2?

>> **STUDENT 2:** So clearly my disability is very visible. And I would say that my -- the two biggest challenges with my disability being visible is because I am very vulnerable. A young Black female. It's -- who's very like small and easy to just kidnap. (Laughs) I have to be very aware of my surroundings and be very vigilant when I'm in area, when I go home to my parent's house, I -- like I'm way more confined. When I first started using my -- well, let me remind -- I'm very confined. What I mean by that is like, I can't be as -- as free as I would like to be. Because of the type of environment that they live in.

And the crime rates are sky high. And trafficking is very big in Richmond, Virginia, so I have to be very cautious about what I'm doing, where I'm going, and I actually started using my cane when I was in -- I'm going say like 18. And during that time, my parents were like, Student 2, you cannot use your cane in this area. Just because of like safety, and just because they didn't want anybody to target me. So first, like, now, I -- I knew how to like navigate their neighborhood without using my cane. So it's not like a big issue. But I still have to be like very cautious.

My second challenge would be like especially -- I'm sorry. My second challenge would be within like the job like, hiring process, like, you know, like when there's that disclosure, a box you check, yes, I have a disability. And when I go into the interview, it's going to be the first thing that they see. And that's going to be a very

big challenge for me. Considering people are going to like automatically discriminate against me because of the color of my skin because of how visible my disability is.

And in addition to me being a female. So I have to like -we within the blind community, we discuss like, okay, when is the best time for us to disclose our disability within the hiring process? But for me, it's like, I don't really have a choice. Because I'm automatically disclosing it when I walk into the room.

>> DR. ADRIAL BRYAN: No, that's very fair and very real, these are real conversations that we do have in the blind community about when do you disclose? And when do you not? And often as you said, Student 2, you don't get a choice, it's one of the first things that people will notice about you. And just to also touch on the extra challenges that come with getting around. And being very mindful about your location and where you are at all times and that vulnerability. And the persistence to continue on.

Student 3, what are some of the challenges you have with an invisible disability?

>> STUDENT 3: I kind of echoing what Student 1 said. Like, having an invisible disability, nobody is going to approach me like regarding my ADHD unless I disclose it and, you know, kind of like invite that conversation. So that is a -in my case, a level of privilege. But conversely, like, I feel like there's a lot of shame associated with asking for help and accommodations like with some -- like with neurodivergence, especially like in a lot of workplace settings, something that I ran into my last job in graduate school, that is very different, like in academia versus in like a non-academia professional environment. So a lot of -- the thing that I ran into is people like really didn't know how to help me.

And it seemed like my challenges were kind of minimized, it's like, well, why don't you just get it done? Like, that kind of attitude.

And people like not really understanding how much I am impacted by ADHD. And just double checking that that's all that I had. Yes. And also, with like the invisible disability, I was talking to -- I was commiserating with others who had ADHD, the other day, yeah, I feel uncomfortable with claiming the like term disability, like in regards to myself, but like that is kind of some internalized ableism and like minimizing my own struggles, when ADHD is all-encompassing and really, impacts like my daily life a lot. And so yes, that is -- that is my answer.

>> DR. ADRIAL BRYAN: Thank you, I feel like you brought all up excellent points about the emotional exhaustion that can come, whether or not to disclose a disability, the vulnerability and, you know, the sense of can I ask for help? And the fear of minimizing your disability, yourself, or by others.

So related to that, our next question is, what would you like for the Gillings community to know?

>> **STUDENT 1:** Yeah, so, yeah. I would say in a really important thing to take away is that every disability is very unique. The accommodations that I need are going to be completely different from the accommodations that you might find for someone with say like a mobility related disability.

Whereas mine is more sensory disability. And so I think that the most important thing to do is really to stay humble, you may have successfully accommodated and included people with disabilities in the past but you may come across someone with a disability you have never heard about and you have to find a way to include those.

A lot of people have never heard of my condition, and they might have to learn new strategies. For example, I'm like, I'm photo phobic, which just means that I'm slightly more sensitive to bright lights than a lot of people as a result of my condition and so, reading computer screens at hours at a time can be tiring. Maybe I didn't pick the best field, but. That's okay. And so I think another important point is to ask like, good faith questions.

Don't assume that you know everything about a person. Or their disability. Just because you might have heard of it before. And stick to questions that pertain to the workplace or the classroom, you might have a lot of curiosities of how that disability impacts other areas of their life, but stick to the topic.

>> **DR. ADRIAL BRYAN:** Yes, excellent question suggestions. Student 2.

>> **STUDENT 2:** I would like disability justice to be pushed to the forefront of research and the curriculum within Gillings.

You know? I understand that in the 60s, during the civil rights movement, like, Black people with disabilities were really -were left out of the civil rights movements and we were like -- of course, I wasn't there, but they were like, (laughs) -what about us? And even during the Americans with Disabilities Act -- the ADA, Black people were again left out of that -- Black people with disabilities. And I feel like now, we really need to like do the necessary research for Black people with disabilities, or Black and brown communities, with disabilities. We need to be incorporating like, all -- in all of the different diverse type of individuals within research. And it's unfortunate that we're like in 2023, and ableism isn't a public health issue. I mean, we talk all the time about like how people who pick Spanish as the primary language, at the go to the doctor and they can't understand the doctor due to like the language barriers. But what about the ableism barriers? I go to the doctor and they give me documentation and expect for me to read it. Doesn't that create a barrier for me? How can I continue to take care of myself if I can't read this documentation that's going to help me prepare like, it's a huge public health issue and it's impacting a huge population. And we need to start addressing it.

>> **DR. ADRIAL BRYAN:** Absolutely. As someone with the same frustration, yes, I cannot read the printed pages to know when to take the medicine at what time and with or without food. Student 3, what would you like for the Gillings community to know?

>> **STUDENT 3:** I would just like to emphasize that I like generally like graduate students like in all areas of the University are not feeling supported. And that also like includes within the public health school. Like I have heard a lot of frustration like specifically like from graduate students within like public health, especially like professional students that like they're like not feeling supported by like the academic accommodations that are available to them. And feel frustrated that they're not more resources available to like assist them and this is like specifically for neurodiverse graduate students. And that, you know, as like harkening back to like what Laurie was saying, like your universal design is super important and like if we want more neural diverse individuals like as public health professionals, supporting graduate students within like in their educational journey is extremely important.

>> **DR. ADRIAL BRYAN:** Absolutely. I second that as well.

So moving on to the next question, and thank you for all of these suggestions that you have given here. I think it's excellent food for thought for all of us. Our next question deals with the best etiquette for approaching someone who or interacting with someone who may have a disability. Student 1?

>> **STUDENT 1:** Yeah, I'm going to reiterate myself a little bit here. But I think it's really important to ask good faith questions and not assume that you know something about someone with a disability.

Just because you've interacted with people that are disabled in the past. And keep your questions to those that pertain to the workplace or the classroom. And really, if even if you've interacted and with people with disabilities in the past, and say you've learned like, oh, I knew a person with low vision in the past, and they preferred this sort of language around their disability, don't assume that that necessarily applies to other people that you meet in the future. For example, like, some people prefer identity first or first person first language so identity first would be some people might refer to be referred to as a disabled person. Or a disabled student. Whereas person-first language, student with a disability and I'm going to prefer the latter that's my preference ever since I started using disability to describe my condition. But that preference is certainly not universal and so I think it's really important to be prepared to change up your language as you interact with people. And because nothing is going to -- no glove is going to fit all, all hands in that regard.

>> **DR. ADRIAL BRYAN:** Absolutely. Uh-huh.

>> **STUDENT 2:** I would say for me, especially when interacting with like a person who's like visually impaired or blind, I would say like, calmly approach them and introduce yourself, my name is so and so, even if you interact with that person regularly. Because like I'll be on campus, oh, hey, Student 2 in passing, even though I'm like I don't know who the heck that is. (Laughs) so in especially like if you're in a public place, like a train station or something like that, introduce yourself as like, okay, hey, I'm professor or I'm blah, blah, blah, because visually impaired people, we can't like read visual cues. And so for instance, one time I was like, in the train station and the train stations can be very confusing and this guy came up to me, he was like, oh, I'm the sociology teacher, blah, blah, blah, do you need any assistance? Like, that was the perfect way. Because like, he seem like educated enough to -- for me to be willing to trust him, to assist me, so like always ask first before you just touch somebody. Which like, even during COVID, that really got on my nerves. I'm like, in the middle of pandemic and a guy is touching me. (Laughs) and also, like, know -- I feel like it's very like inappropriate for people who do not have disabilities to make jokes about people with disabilities. And so please don't do that. That is not proper etiquette. I think that's all.

>> **DR. ADRIAL BRYAN:** Those are all excellent points and sometimes in situations where people do make jokes, my impression is, in some cases, that they are actually trying to show you that they're comfortable with your disability, but all they're doing is actually revealing more how uncomfortable they are with your disability, and there's just a lot of nuance that comes to along with each disability. And so please, no jokes. Student 3, what are some tips you have? >> Student 3: Just wanted to like yeah kind of echo what Student 1 and Student 2 said, I like -- as PRN with an invisible disability, it's a privilege, people are not going to come up to me or touch me or like, you know, interact with me inappropriately due to my ADHD, just echoing what Student 1 said about listening to about their preferences like for -- people about their preferences, person first versus identity first. Identification of disability.

And yeah, just like being normal. Like listening to people. Like don't go up and touch people you don't know.

(Laughs) Common sense.

And yeah, so just listen to people. Is my summary.

>> **DR. ADRIAL BRYAN:** I think that's an excellent way to summarize that. And I'm going to add one item as a guide dog handler, oftentimes when people approach those of us who handle guide dogs, either they want to address the dog because they're cute, I will never argue that. Or they think that the best way to help this person is by talking to the dog, and the dog will naturally take the person where

you want that individual to go. That is not the appropriate way to do that. When interacting with someone who has a guide dog, ignore the dog as best you can, and then, when giving help, you give the instructions to the person handling the dog who then gives the dog the directions, this may seem like we'll cut out the middleman, but when you do this, you have confirmed the dignity of the guide dog handler and reinforced the relationship between the guide dog and his or her handler, you're helping to strengthen that bond when you do that. Okay. So I want to ask one more question and then, we will go to audience Q & A. So what are some common challenges and accessing the classroom and campus? Student 1?

>> **STUDENT 1:** Yeah. So first, I really want to say that I love the color Carolina blue, I have a lot of Carolina clothing and I wear them all the time. But Carolina blue font, on a white background is absolute worst, it offers a terrible contrast and hard for me to read and I don't think I'm the only one that feels that way. But aside from that, I think that many of my challenges really occur in the -- classroom. I think one of the best ways to make a classroom more accessible is to offer a range of options like what Laurie was talking about earlier and the concept of universal design. In general, honestly, pretty challenge to read most PowerPoint presentations when projected in classrooms and I prefer to follow along with lectures using slides that I have pulled up on my own device. If I can pull it up on my own computer or tablet, I'll be fine. So I obviously prefer when teachers make their slides available ahead of time and the same goes for material on a white board, I'm in the bio stats Ph.D. program, most of the classes have been structured like traditional math courses and lecture slides for theorems and proofs of examples written on the board and some professors have taken the steps to write those examples on PDFs ahead of time and e-mail those students and those classes have been more accessible to believe me and I've gotten more out of them because of that. I have learned the most from those teachers who have scanned the PDFs ahead of time to the course website and also a note from Adrial, we need more audible on campus, she as a firmer grasp of that.

>> **DR. ADRIAL BRYAN:** This is a current thing I'm battling to get more audible pedestrian signals on campus, we have some that only have flashing signals and not super helpful to those who are visually impaired. And to that end, a question I usually get, how does the guide dog know when to cross the street? He doesn't. I tell him when to cross the street. So audible pedestrian signals. Thank you for letting me champion that cause. (Laughs) Student 2?

>> **STUDENT 2:** I would say minimizing the amount of construction on campus. Just because like, there's times when I've like wanted to like, oh, maybe catch the bus halfway to campus, and then walk the rest of the way, just being ambitious. (Laughs) Where like, wanting to get like exercise, because it's a nice day, there's

construction on all sides of the streets. And that's very like inaccessible to like know when and where to cross and where I'm approaching construction. Also, always like providing Zoom links for classes. Like, even though the class may be in-person, or it may be hybrid, it's very good to like create like that Zoom link, record the lectures, so that like students can rewatch it if they need to, or like I may be physically in class but I'm still going to open up the Zoom to like look at the PowerPoint slides, like, from my computer, more closely. Because sometimes like professors will be playing videos or go completely off the PowerPoint and I will like to follow with that via Zoom.

Also, we need a more braille signage within the School of Public Health or in general, across campus.

Which that's a very big issue for like low vision individuals.

>> **DR. ADRIAL BRYAN:** Absolutely. We enjoy knowing which room we're walking into, too. (laughs) Student 3?

>> **STUDENT 3:** All right. I would just first like to say, UNC is not aspirational in terms of disability, that is one thing that I wanted to highlight up front. (Laughs) yeah, I -- my alma mater, like a similarly like a big -- like a research institution, like in central Illinois, there was a whole building dedicated to disability services. The requirements for documentation were a lot less like stringent and like honestly adversarial than they are here in order to get accommodations, nigh ed to have a full psych evaluation, that's \$1500, those things and also, and yeah, also like in-house counseling for any student with a disability throughout the entire life of the program. Like no matter which area of the university they are in undergraduate through grad, all we have here is the general CAPS and then the learning center which a lot of graduate professional students cannot make week-in-advance appointments, and people with neurodiversity, like I need to have my schedule locked down per week, I need to have -- I can't like -- the same day appointment is not going to work for me. And then, also, why can't we keep these elevators running?

Elevators were not invented yesterday. This is (Inaudible) technology, oh, how do we get this to work?

The elevators at the Hamilton hall never work and the article in the daily Tar Heel that I highly recommend about disability justice on this campus, students who use wheelchairs, like, being trapped on floors of buildings, like, there was a really impactful quote from a woman who was saying that like, in the Haynes art center, on the second floor and the -- elevator didn't work and maintenance was trying to fix it, well, I hope you don't have to sleep here. And I can't imagine how awful that would be, being -- not being able to go about your day. Because the flipping elevator doesn't work. Just really unacceptable. And especially for university with

this much money, and this many resources. Like how are you going to send me an e-mail saying we raised a billion dollars in donations so, cool.

And then be like, no, I'm sorrier we can't fund disability services. We just don't have enough money. And also, just one more thing, chairs in buildings, and like, just classrooms in general, like, it would be so easy to like have more just like chairs and seating that is environmentally -- friendly to all kinds of bodies. I've heard from classmates over and over again, who like, are not like, do not fit like the thin like able-body mold saying these chairs are wildly uncomfortable and I struggle to like exist in this space.

And like, that is like this baseline, like probably one of the easiest like accessible things to change. And so, that is -that is my points.

>> **DR. ADRIAL BRYAN:** Thank you.

>>**STUDENT 2:** You're on fire. (Laughs).

>> **STUDENT 3:** That's my soap box for sure.

>> **DR. ADRIAL BRYAN:** There's a lot of passion going on here.

So with that, let's turn now to some questions from the audience. So do we have any questions lined up in the Q & A?

>> **CHELSEA PORTER:** Yes. This is Chelsea, we do actually have a couple, first off, a couple of people were saying these are such great recommendations, thank you all for bringing these to our attention. So someone also mentioned that the bus system app is not working, so it's impossible to know if or when the bus system is coming.

So.

>> **DR. ADRIAL BRYAN:** Amen.

>> **CHELSEA PORTER:** I think we could be having this conversation for a while and a reminder as I'm getting to the questions, please use the Q & A to post your questions, and we will go through and ask our panelists your questions, so first question. What service or accommodation do you feel is missing at UNC that would best serve you personally? Academically and/or socially? For example, quiet study space availability, live captioning during lectures, etcetera, we'll keep the round Robin thing going, Student 1 if you have an idea?

>> I'm still thinking, can I pass the baton.

>> **CHELSEA PORTER:** Sure, absolutely. Student 3, yeah, go ahead.

>> **STUDENT 3:** Yeah, I know my answer.

(Laughs) I think that immediately identified coming into the university, it was awesome, and the staff at ARS are hardworking and dedicated and they do what they can with the limited resources that they are given. But one big accessibility

thing/like deficiency that I've noticed is complete lack of specific services for graduate students. With disabilities.

Graduate students like who are neurodivergent have learning differences have different needs than undergrads, I don't take tests in my program, what am I supposed to do with about extended testing time. That is echoed by a lot of graduate students and calling back to what I had said about the University of Illinois, and the vast array of services that they provide for students with disabilities. Like compared to here, where there's nothing. Like, if the learning center, there's one program that is like the dissertation boot camp for Ph.D. students, that is not something that is specifically useful to me as a masters student. And that's fantastic that it exists but there needs to be more. I would say maybe like dedicated academic coaching, for graduate students, like expanding the learning center services to allow graduate students to make advanced appointments and recurring appointments. And this is, you know, even more like aspirational, but having the in-house counseling services for students with disabilities in general, rather than just relying on caps. Like, just having like more resources, please, that is my answer.

>> **STUDENT 2:** I would definitely say that like having -- I don't know what it's called -- like Adrial, that braille thing is that --

>> **DR. ADRIAL BRYAN:** The braille blazer thing?

>> **STUDENT 2:** Yeah.

>> **DR. ADRIAL BRYAN:** We're so good.

>> Yeah.

>> **DR. ADRIAL BRYAN:** Yeah, yeah. There's a printer type machine that instead it brailles out documents really quickly.

>> **STUDENT 2:** Yeah, so I would rather like ARS or each school to have like their own accessibility equipment, kind of like, you know, just have it without needing it, until you need it. You know,? If that makes sense?

>> **CHELSEA PORTER:** Yes, Student 2, that makes perfect sense, absolutely. Any other comments, Student 1 did you have something to add for this one.

>> Student 1: Just improving the bus system overall would be great, and like Student 3 mentioned in-house counseling for people with disabilities would be great. I would have benefitted from that in my last five years here.

>> **CHELSEA PORTER:** Yeah, and something we always talk about in the digital accessibility office is how better accessibility impacts everybody in a positive way. And I think that bus system could definitely help everybody for sure.

>> Yeah.

>> **CHELSEA PORTER:** Great. All right, we've got a couple of other questions rolling in here. This is a pretty good one. For y'all to think about.

For those of you with visibility disabilities, have you ever been met with skepticism when requesting accommodations even when going through the proper process and documentation, what advice do you have for those in similar positions? Whoever has an idea, unmute and go ahead.

>> **STUDENT 3:** So fortunately, this is not something that I have experienced here at UNC. So well, but also, too, this speaks to different barriers like I haven't gone through the formal process of getting accommodations. Because I was diagnosed with ADHD when I was like nine. I don't have what a full psych coeducational evaluation. To provide to get accommodations.

Accommodations that aren't -- help that won't be specifically helpful to me as a graduate student. One issue related. However, I wish that I had a better answer to this question. Because like in work environments, like yes, there has -- I have felt like invalidated and kind of like wow, what do you expect me to do about that? These are your job duties. Like you need to do them. And like, just a general like unhelpfulness. And yeah, like I have developed like pretty great self-advocacy skills over the years. But, you know? It can be very difficult like when you are like on a different level with a person in power who is kind of like gate keeping these resources. And I just think that better awareness like of invisibility disabilities like needs to be a thing across the board. And not just like, oh, we grow out of ADHD, right? Or like, so sometimes I wish. Like, that would be great. But (laughs) no, I still have it. So it's still impacting me. But one thing that I was told by a professor, like, with -- with ADHD, which was that awesome to have a professional with ADHD, so cool. But she said like, knowing yourself and knowing like what kind of jobs are going to be like most like just supportive and feasible for you, like, she told me like, folks like with our kind of struggles like, having a job that like requires you to do a number of units to fulfill a quota, is not going to be an accessible job. Like it's just not going to be a good environment. Like, so jobs that require that, which is a lot of casework jobs, they're like you need to do X amount of things per month in order to fulfill a quota. I -yeah, so, no, moving forward, I know like if there's a job that requires that, like I -- I'm just not going to do it. I'm not going to apply for that particular position. But once again, I wish I had a better answer to this.

>> **STUDENT 1:** Like Student 3, I've been fortunate in that I haven't really had a lot of people disbelieve me about my disability in graduate school.

I had a few experiences like that in undergrad that I can speak to. I had -- I was working in a chemistry lab once and the graduate student in charge of mentoring me in that position just told me to try harder. When I told him that I couldn't read something. Reading the results of some small experiment. Just try harder, I can't focus my eyesight to better acuity, I wish I could.

That's not going to happen. I don't have the good advice to handle that situation on a professional perspective but I would echo what Laurie was saying earlier, you are valuable regardless of whatever productivity you're able to achieve. You are a valuable human because you are alive on this earth.

Keeping that in mind as hard as it may be able to do that on some days.

>> **CHELSEA PORTER:** Really good answers, absolutely. We have a couple of other things in the Q & A here, just because we're running low on time, a few of these are more comments and questions about funding that I don't think anyone here has the appropriate pay scale so to speak to really answer but I will mention it. With regards to providing for students, is it a funding or allocation of funding, things are not allocated in North Carolina schools or stingy to providing resources, yes, to both of those is probably -- I'm seeing nodding and things but, you know, we here - nobody here is in charge of the funding so we hope and pray it goes to the right places that it needs to. And also sort of funding -- mentioning totally agree with expanding learning center services to including graduate students in general, the university needs to invest funding in expanding disability services across the board. I think we can all agree with that.

And lastly, this is more of a comment for everyone. I just want to thank you all for what you have shared, I have a sensory sensitivity, this is not me, this is Laura that is mentioning this here, so she gets her recognition, I have a sensory, I've had to dim the lights in my office.

Eliminate the Carolina blue from fonts and slides at a minimum. I need to learn more about -- so we can advocate a more amongst faculty about these small but significant things needed, having slides available, etcetera. I will take this moment to plug the digital accessibility office, even though we're about to do a presentation, those are the very things that our office can help you with. Color contrast, for your slides, again, we love Carolina blue, but you can only use it on certain situations, if at all and providing those slides and making those slides accessible to a variety of different assistive technologies, we're going to dig into a little bit of that as well. I do also want to take a minute to mention that there's not -- going way back to what Student 3 was mentioning earlier, that a full psycho-evals are not always needed necessarily but I'm going to pivot and say when Tiffany does her presentation, she's mention a little bit of the nuances to that as well and there are no more questions in the chat. So I just want to thank everybody so much and Adrial!, back to you as we go to the break.

>> **DR. ADRIAL BRYAN:** Wonderful. Yes, thank you, Chelsea for reading all of those questions and keeping track of them. And to everyone who has been moderating the Q & A, panel, thank you so much.

So we're going to take a five- minute break and when we come back as Chelsea mentioned, we will talk about the digital accessibility office and EOC and so we will see you all again in about five minutes.

>> **LANE FIELDS:** I'm going to share my slides here, can you - - whoever is sharing stop sharing? So I can put up our little presentation?

>> **CHELSEA PORTER:** I'm seeing the module one (recording in progress.

>> **CHELSEA PORTER:** It won't let me share otherwise. Perfect. Okay.

All right, so good morning, everyone. We are the digital accessibility office, here to talk about the digital accessibility, so what we're going to cover, we're going to do some brief introductions and talk about assistive technology, some accessibility wins, how we are all better at this together, what can you do to improve digital accessibility? And then wrap up with Q & A. Our slides are also available for download at that link that I have failed to copy before I got into this presentation. So let me grab that real quick so I can put that in the chat, I want to make sure that everybody can grab that, if they need to. There we go. Some brief introductions we are the digital accessibility office, I'm so excited that I have a team to introduce for the first time in several Moss. My name is Chelsea Porter, the head of digital accessibility here at UNC Chapel Hill, a background in instruction and accessibility. My co-presenter is Lane Fields, one of the consults, a background in E learning and system administration. And then, our other new digital accessibility consultant, a background in diversity and inclusion, education and public service. And we will have one more consultant joining us next week, to finally fill out our four-person team. We are here to help you with anything digital accessibility related that Carolina blue on white backgrounds, talk to us about it, making an accessible PowerPoint presentation, talk to us about it and much more, I'll give information on our services and how to reach out to us towards the ended of the presentation. So assistive technology, lane, take it away.

>> **LANE FIELDS:** This is Lane, am I coming in loud and clear.

>> **CHELSEA PORTER:** Yes, you sound great.

>> **LANE FIELDS:** Get, thank you. So as Chelsea said, my name is lane fields I'm a digital accessibility consultant and I'll be talking to you about assistive technology and digging into the complexity of assistive technology. Next slide, please. Great. So I'm sorry.

(Laughs) when you encounter the phrase, assistive technology, you may think of computer programs, such as screen readers or jaws or maybe devices such as hearing aids as a digital accessibility consultant, I often encounter the nitty gritty of a website and disabled folks can navigate and interact with content effectively. Assistive technology or AT isn't super high-tech, either dealing with HTML or web app development.

We interact with devices daily that we may not immediately recognize as AT, I would like to talk to you about mobile Smartphones for a minute, I think most of us have one. And there are actually many features of a Smartphone that would constitute assistive technology. So first off, we have for notifications, so a soundless notification, such as a vibration isn't just for when you're in a meeting and you can't be disrupting the rest of the folks in the meeting. A vibration function actually helps folks with hearing impairments, for example, know that they're receiving a notification or someone has sensory issues and they feel overwhelmed by the different tweets and sounds that might be coming out of a phone. And might be useful to have a vibration or another alternative to audio note if KAGSs, an led or a flashlight notification. Numerous other accessibility features exist in your Smartphones. So digital assistance, such as Siri, Google assistant, Alexa, these all help manage tasks and perform commands. And some of these assistants can actually generate live captions or call transcripts.

So focus functions and screen time functions, allow folks especially folks who might be neurodivergent or might struggle with attention issues, help people concentrate on their tasks at hand. Or eliminate anything that might be distracting when they're trying to do another task. Volume loudness warnings are a great example of assistive technology, too.

In case you have your headphones and sometimes if something is a little bit too loud to a point where it might damage your physical like actual like functions of your inner, for example, even if you might not be aware that it's too loud, there might be a warning. And finally, face and touch ID, this is another great example, so for example, if somebody has limited dexterity, in their hands, face ID or touch ID, with just using your thumb, might be able to help somebody who struggles the type in a password to log into their device. These are not the only examples of accessible features in your Smartphones and I encourage you to check them out and play around with them. But these are some things that you might think about. Next slide, please.

So we're going to offer you a demonstration of a PDF screen reader, so it's important to know if you are repairing content and we'll talk about this momentarily, but content needs to be rendered correctly in order for assistive technology to work. And so that's where DAO comes in, we can help you make your content more accessible, to interact with these AT programs or devices that your students or colleagues might be using.

So the meaning of content -- meaning of content can be lost if you don't render it correctly and OCR or optical character recognition, we'll talk about shortly, for now, let's do this quick screen reader demo. Chelsea, take it away.

I don't know, is it playing?

There it goes, we're not getting the audio from your -not getting the audio from your computer, Chelsea, but... (There is a video playing that has captions displayed)

>> **LANE FIELDS:** Excellent, thank you, Chelsea. So those of you who were able to hear that, and I know that they were talking very fast, but for context, so a screen reader announces each element on a page, so for example, there are tables in the document that was in that demo, and so, for every table or every header, or every cell, it would indicate where each one changed. And this is important because when we render our content successfully, there's greater context and more ability to interpret the content by all users. So if you have somebody using a screen reader, it's especially important to make sure that the content is rendered correctly and again, that's what DAO is for. Next slide, please.

I'm sorry. Is that -- is that the right one? Could you go back? I'm sorry. Oh, it is, okay. I'm sorry. I had an out of date version of my notes in front of me. So we're going to talk a little bit about some common assistive technology. So at UNC, we have many different examples of technology that would be used in a particular setting in the classroom for example, so we often see dictation for notes, for note taking, text to speech for transcription or captioning like in this meeting today.

Note taker, offer the same purpose, and then built in captioning. And Tiffany will be able to explain a little bit more about some of these common assistive technologies, I'm not sure if she wants to jump in right now, I don't want to put her on the spot, but. ...I know that she also will probably talk about this during her presentation as well. Okay. Next slide, please.

Great. And so accessibility wins. So how accessible digital content work together. As I've been leading up to the importance of -- I've been emphasizing the importance of folks making sure that their content is able to talk to assistive technology. And vice versa. So next slide, please.

So how accessible content enhances usability for all. So as I mentioned, when we were talking about screen readers, a good example would be having an accessible PDF with correct optical character recognition. So optical character recognition, OCR, not the office of civil rights, (laughs) is so OCR is basically taking a piece of text and making that piece of text legible to a screen reader. And this can be done in a number of different technical ways we don't need to get into that right now necessarily, but a good way to test and see if something has been optimized for OCR is if you have a PDF or a scanned file, and you can highlight individual words or characters in it, and copy them into another document, then that's a good sign that the PDF has been optimized for OCR.

If it hasn't and you just have a scanned copy of a book and blurry, someone who uses a screen reader will not be able to effectively interact with your content. It's essential to learn and do one's activities that we use OCR.

And there are actually many different use cases for this. So sometimes when we think about disabilities, right, you know, we might think of something that might be a permanent or long-term disability such as a visual impairment or total blindness. So in this example, a blind person would need full screen reader functionality with an accessible PDF. But there are also other kind of disabilities that might pop up for people or situations where somebody might want to use a screen reader. For example, when you get your eyes die dilated at the doctor, I wear glasses and you can see that Chelsea has glasses on, too, so that's the temporary disability, right? Because, you know, you no longer have the ability to focus your sight on something and this is challenging because it's hard to focus on the text, and might be having a headache, for a little bit, and so, OCR or an accessible PDF would give you the ability to zoom in to text without pixel, and similar to having dilated eyes, migraine, an intermittent disable. You might have migraines for your entire life or a certain condition that pops up from time to time, but not all the time. Users can listen to their content read out loud by text to speech in OCR enhanced PDF documents. Next slide, please.

But closed captions is an another good example of from assistive technology, that folks will -- that benefit all students. So on the screen is a chart that -- or AN a table that talks about a survey, why students found closed captions helpful and that the reasons given are learning aids such as comprehension or focus, and 75.5% of students selected that. As a remedy for poor audio quality, which 22.4% of students selected that.

Clarification for instructors who are difficult to understand at 8.3% and environments such as a noisy bus our library, 6.7%.

Disability accommodation at 6.0% and convenience, such as note taking or reading along at 5.1%. So notice that only 6% of these users said that they have h a disability.

It's certainly possible that more might have. And they might have not known it at the time. So plenty of people have invisible or undiagnosed disabilities that might be unknown to themselves, for example, I did not learn until this past year that I have a nonverbal learning disability, an auditory processing disorder. So I actually use captions during my interview process for this job. And it was successful. So as an example of how you can help students and all folks be successful. But going back really quickly, and I know that I'm running out of time to keep talking, but I just wanted to say that even though only 6% of users self-described as having a disability, as you can see, there are many other reasons why it would be important to include closed captioning. We always want to center folks with disabilities, and also at the same time, there might be a myriad of other reasons why somebody might benefit from AT. Next slide, please.

And I think that this is my last slide. So thank you all for your patience. We just want to let you know that we know that assistive technology can be difficult to scale or implement and learning new assistive technology can be challenging. And we can't always anticipate how a person might react to a form of assistive technology, it's always individualized. So it's important to center or involve the disabled person or the individual who needs the accommodation in making these decisions but that's when DAO is for and ARS, we're going to pass it to Chelsea, thank you.

>> **CHELSEA PORTER:** Thank you so much and this transitions perfectly where we're talking about working in partnership with users to, we are all better together. We can collaborate with each other, with the DAO, with the EOC, with ARS, and each other in our departments to learn how to increase accessibility and what we're talking about here, digital accessibility, so collaborating to make our content more accessible. And there is a human element to accessibility that I think has just been already talked about a whole lot today, I even added an extra bullet point after Laurie's presentation earlier, the accessibility content, as Lane said, if our content is not accessible, all of the assistive technology in the world is not going to make it accessible and easy to access for people. And like Laurie's presentation earlier, accessible content helps break down that fence. Right?

Like, instead of raising those accessibility barriers, we just make accessible content can we start putting that fence down.

But of course, we need support from everybody. And including administrations, and the individual departments. Such as purchasing tools and resources for everyone to benefit from. That's also something that the digital accessibility can help you with. Vetting and analyzing different tools and resources like third-party tools and things that you might be purchasing, to ensure that they are as accessible as possible. And understanding the variety of user backgrounds. So one of our -- part of our mission statement is that digital accessibility increasing usability for all of y'all. And that means that if we're talking about everyone, then we need to think about the variety of different user backgrounds, this could just simply be somebody is not super tech savvy, it might take them a minute to work around a new piece of technology to myriad of different disabilities that we've already been talking about today. So again, we're all a little different, we're all coming from different places. And just being open and understanding that, which include a culture of inclusivity and a timely response to issues that come up. Now, Tiffany will talk about this a little bit more but the EOC can assist with faculty or staff accommodations for accessibility, and ARS can assist with student accommodations. More on that in just a moment. And let's talk about the cost of making content accessible versus not, we're talking about hopefully the previous presentations have talked about the

need and the wants for making content accessible, but, you know, I also don't want people to think that we're adding more work to your plate. I guess in a way we kind of are. But I can say that creating accessible content, creating accessible Word document, PowerPoint, website, is much quicker and easier than fixing something that's not accessible.

So learning to do it right the first time, will save you a ton of time in the long run. Your stress for everyone involved is going to be limited, your users are going to have a much better user experience, less stress for them, and also less stress for you in the event of an accommodation need, there will be fewer fixes required if steps towards accessibility have already been taken. And then of course, we'll throw in the financial, I never like to harp on this, but it does lower the risk of complaints, lawsuits, etcetera, while also making a more welcoming environment for everyone. Everyone.

There are those compliance challenges, though, assistive technology or AT does not compensate for inaccessible learning environment or ableist bias. Laurie nailed that bullet point in her presentation earlier. Lane, yeah, we have screen reader, all of these wonderful AT things but if the content is not accessible, it's not going to help. There are also must be buy in and agreement that accessible digital content is important from peers like students or other colleagues, to the rest of staff and administration. And then, there's also the challenge of keeping up with changes and in regulations, standards and new tech can be overwhelming, not your job, this is DAO's job, we are here to help, we are here to help navigate those waters, more on that as we go. A brief moment to mention, yes, we should want to make our content accessible but there's laws that say we must make our content accessible, the Americans with Disabilities Act, the civil rights law, passed in 1990, which prohibits the discrimination against people with disabilities, and public and private sectors, side note, we are waiting with bait breath that at any moment, the Department of Justice will be releasing new guidelines related to the ADA, and web accessibility standards under the ADA. Which so far, they have not had, so even movement on that is happening. Any day now, we're excited and waiting for that. There's also the rehabilitation act of 1973, a couple of things in there, but one of the big ones, section 508, prevents agencies from providing technology that isn't accessible to people with disabilities, most importantly, this was updated in 2017, since we didn't really have the Internet or content in 1973, UT up but updated to include the web guidelines 2.0 level AA as the standard, so finally, we are told here's what you must do to be in compliance to make your content accessible and that's what we're leaning on as the DAO, that's the guidelines, tips and tricks that we teach in all of our trainings and our meetings.

There's also UNC's own homegrown policy and standard on digital accessibility that references section 508 and WCAG as well, if you would like to do digging on WCAG, I have' link in the slides that you can go to.

So now that we have told you about the importance of digital accessibility, what can you do about it? Let's talk about some quick tips for making your content accessible to the broader audience, first and foremost, we need to realize that accessibility is a process, not a project. It is a way of thinking and an ongoing commitment. It's going to be overwhelming and near impossible for you to go, okay, already, I'm going to make all of my courses accessible by August. That may not be a realistic deadline. Right? Something more realistic, I'll going to Mac sure that all of the images in my PowerPoint has ALT text. Then take the next baby step. So set goals and deadlines, break it down into chunks. Design with accessible in mind for new projects. Again, that's where DAO, our trainings and services and things can help teach you how to do that.

Audit and fix existing content as it's becoming available and keeping in mind that the end goal is increased usability for everyone. All of your students, users, etcetera, will have a better experience acting with accessible content.

Now, I would love to be able to dig into this these top ten tips but I'm going to <ing you to DAO's website on the top ten tips where we talk about headings, consistent layout, keeping it text, text spacing, plain language, color contrast, like not using Carolina blue on a white background, alternative text for images, captioning for video and asking the DAO if you need help with any of these top ten tips can be applied to all of your digital content. Websites, etcetera. Start with these easy little bite sized pieces and then grow from there. Keeping up with the accessibility like I said early earlier, the changes and tech can be overwhelming, I have a team now of people that are more than happy to talk with you, give you advice, give you tips, tricks, we have tools and resources available. And many trainings as well that can help with all of these topics, digital accessibility awareness, captioning, webbing web accessibility, document remediation for Word, PowerPoint and PDFs, procuring accessible technology and accessibility and course design. Small caveat here, we are taking a break from our trainings, this summer, and I know that they will be back on the schedule by late July, if not August, but if you have questions in the meantime, talk with us, we'll schedule a one-on-one consultation to go over all of this information with you. If this has been very interesting to you, up to this point, and you are really digging this concept of digital accessibility, you can a also join the digital accessibility liaisons, a wonderful group of almost 190-strong individuals across campus, who are dedicated to learning more about accessibility, spreading the word, and just leaning on each other for support. More information can be found at the link there as well.

This seems redundant but I want to re-emphasize, you are not alone in this journey, reach out to the DAO, and we are here to help, one-on-one consultations, full website assessments, course reviewers, procurement support for assistive technology, student groups who are interested. And other tools and resource we have available for you. You can request our services at the online help desk at -- digital_accessibility@unc.edu, we would be happy to chat with you. This slide is a link to UNC policy and standards on digital accessibility, if you like a little light reading during your lunch break today, and that wraps our portion of the presentation up. Even though I do have the Q & A slide here, I want to give the mic over to Tiffany, who is going to be talking about EOC, and ARC and more. So I'm going to stop my share here.

>> **TIFFANY BAILEY:** Hi, everyone, give me one minute. (Laughs) always the technical things, right? It doesn't help that I have three screens, either, so, I don't know if I'm coming or going here.

So...

>> We see it.

>> **TIFFANY BAILEY:** Awesome.

Let me -- everything got all wonky, I'm Tiffany Bailey, the director of equal opportunity and Americans with Disabilities Act coordinator in equal opportunity and compliance. Some of you may know me from my former role in accessibility resources, as the director, so here in my new role, I oversee employee accommodations, both for faculty and staff. And ADA accommodations, in addition religious accommodations for students and employees and pregnancy accommodations for students and employees. And I'm going to do my best to represent Simon today, I don't have a British accent, clearly, however, (laughs) I'll try to drop in some slang along the way. Feel free to ask any questions, happy to entertain them as we move along and we have a Q & A period as well.

So let me rock and roll here.

So I'm going to talk a little bit about the commonalities between the ARS and DAO, EOC process and thanks to everybody who's shared today, everybody that's been a part of this, the student panelists, a lot of mic drops.

And so, our role both in ARS and EOC is to determine accommodations. And so that is potentially when we're looking at beyond those things that have been universally designed like course materials, programmatic type of things, and to help to ensure that our employees and our students have equal access. I've been doing this work now for about 17 years.

I think? And I'm an individual with a disability.

Both hidden and visible. So I come to this not only with just that, but just with a passion for wanting to change and make a difference and so typically, how our employee and student accommodations process works is that a student may mention to an instructor or an employee may mention to their supervisor that they may want to request an accommodation based on disability. And we want to make sure that folks are always referring folks to the appropriate offices for those accommodations. It's really important that we're involved in that process. And, you know, requests can be made to any one, so we have referrals from academic advisors who meet with student who have disclosed a disability or human resources representatives on the employee side, who are referring employees to our office to request accommodations.

So the processes are outlined at the various -- at our various websites, so let me drop those in. I answered a question earlier about this for instructors. For faculty and staff. This is the EOC process. And the ARS process is outlined here. So two separate offices, two separate kind of policies that oversee our frame work, but we work really collectively together on larger campus-wide access efforts which I'm going to talk about in a minute.

Documentation is always -- can be a huge barrier for folks. And we recognize that. And we really try to take and what we tell people is submit what you have have and let us take a look. You know,? Psychoeducational evaluations, Student 3 was talking about this earlier, sometimes they're required and sometimes they're not. We do an individualized assessment, a lot of what we can we've do is gray, but we try to be as flexible as possible regarding documentation. And we're always centering the individual in our conversations, so the student or the employee, we want to hear about what's the experience? You know, tell us what accommodations you're requesting, if you don't know, take us through the day-to-day. Each individual class. Or when you report on site for your job, so we really are looking at that kind of dialogue and that's part of what we call them interactive process. -- the interactive process.

So EOC staff or ARS staff, will meet with the individual, who's requesting accommodations and from an employee perspective, we will meet with the supervisor to discuss accommodations EOC and ARS, we'll meet with instructors as needed. When students are intersecting with ARS, a large set of accommodations to be reasonable, a standard accommodations, which is notified, use the hub to notify individual instructors of that. Typically the dialogue with instructors, the instructor might think is not reasonable, or they don't know how to facilitate that in their class, so that's a lot of education and guidance that goes along with that as well.

And so all of that is a part of this ongoing analysis which ultimately will result in formal determination on academic accommodations or for us for employee

accommodations. I thought it would be great to kind of outline some examples, because a lot of times, I think it's -- it can be hard to kind of think about what might be reasonable or what are some common accommodations within the process.

So I'm going to talk a little bit about employee accommodation first. Yes.

I'm sorry. I was just reading the question in the chat. And I'll get there.

So some examples of workplace accommodations could be purchasing or modifying equipment. Making the worksite physically accessible, depending on what that might be, right, potential ergonomic equipment or working with an employee who has to do site visits, and they have a physical disability. How are we able to provide an accommodation in that regard? Making a website or electronic information accessible, this is where our DAO partners come into play and we work really closely with Lane and Chelsea on, you know, making sure that we're providing access and helping the departments and individual supervisors to create materials that are accessible, so that people can use their assistive technology to intersect with that information. It could be modifying a schedule. So for example, impacts of a condition maybe it's that, you know, somebody wants to request a 9:00 a.m. start time instead of an 8:00 a.m. start time. And they extended their day a bit. Could be a number of different things related to that. Allowing leave, ADA leave as an O come DAGS, much like FLA, it's under that frame work.

Modifying methods, job restructures, modifying policies and accommodation is in essence a modification to a policy. Or providing a service like readers and interpreters, so these are just broad general examples of that.

Examples of classroom accommodations. Extended time on assessments, quizzes, exams, etcetera.

Supplementary notes or technology, like audio note taker, to be able to have a method for capturing notes if somebody has challenges with processing, attention and focus, we want to make sure that the students are able to accurately access that information. Per assignment extensions. For flaring conditions, low distraction or separate setting when it comes to testing. And textbooks and course materials and electronic format, there's so much that can be done, you know, as Laurie was talking about, as well, prior to a course or in the course structure that provides access for the greatest amount of people, so thinking about okay, I have this textbook, where can students acquire it in the electronic format? How am I structuring my activities? For the course?

Can I give people options to choose an individual project or group project? Those kinds of things are all examples of making sure that your course is accessible and designed using universal design principles and perspectives.

Closed captioning, another big one. Limited attendance adjustments, so flexibility to the absences. This has become a large topic. University approved absences, so

technically, what ARS does around disability and what we do around religious and pregnancy accommodations are a type of university approved absence, but we make those determinations under our various legal frameworks and so if you read the University approved absence policy, it does mention that. And then there's the larger more prod broader flexibility provided by university approved absence around death of a loved one or other things that are considered under that process.

And then, a assistive technology, it could be the provision of dragon naturally speaking, which is a dictation software. And any kind of text to speech software. That students come to us needing.

You know, usually, students laptops are outfitted with type of assistive technology already, but we have folks who come to us sometimes who don't have that technology. Aren't really sure what technology to ask for. So part of that and what the assistive technology accessible technology person in ARS, Caitlyn, does, is to just kind of talk through like, what might be beneficial for somebody who's experiencing these types of impacts to be able to use, how can we introduce and train somebody to use this.

So I did mention that we also do an EOC pregnancy and religious accommodations. And so, our various policies are on our website. Different legal framework, but a lot of the classroom a come decisions are similar to what -accommodations are similar to what we would see for students with disabilities that are proved to be reasonable, we have the similar discussions about tell us about the, you know, the impact, tell us more about your requests, talk to us about the specifics of this particular course. And we have one huge e-mail that you can e-mail us from. ARS is for student academic accommodations is a accommodations -I want to make sure to highlight. That I know WEFR we're covering a lot but I want to leave plenty of time for question and answer.

So some things that are upcoming, so there is an instructor accommodation training that's been developed by ARS and EOC which will be launched in August. In the fall. So that's coming. And I was taking copious notes during the student panel, as well, elevator outages and communication and reporting.

That is going to be something that actually was just in the meeting about this yesterday.

We're working on a notification system and a place where folks can go to see real-time live updates about elevator outages, campus wide. And additionally, I very much heard about the audible pedestrian signal.

(Laughs) and I have that on my list. Construction and planning.

More services for graduate students so in way, I took all of these notes, so some things are definitely coming out. And so I would -- I want you all to be on the lookout as our teams ARS and EOC are working on things this summer to implement, including classroom furniture things as well. So...we are -- EOC is working on an updated accommodation policy, so that will be launching soon. In which a person for employee ADA applicant or visitor accommodations, pregnancy, religion, can intersect with one policy. That has various procedures and then also, there's one request form, so we're trying to streamline as much as possible, to make it as easy as possible for folks. And another thing that we did recently was launch a report an access concern form. So I want to plug that as well. Really excited about this.

For folks to report access concerns to our office, and that can be done anonymously as well. And there are multiple different topics or areas, including physical or building access, programmatic attitudinal parking technology and others. So we really want it to cover a broad variety of things. And then we can intersect with our campus partners on this. Which then, leads me to university accessibility efforts generally. And I'm working on bringing together a large group of folks to be talking about and working on accessible planning for the institution as part of my role in the ADA coordinators, to help and lead and oversee those efforts and we're working on that now, so more good things to come. It does take a while, I appreciate everybody's patience, I often talk about this, like working within systems and thinking about scraping away at a wall, with a dental tool, when you really want to bust through it. And so, (laughs) -- I have to be patient sometimes, but. I promise you, we hear you, and we're working on it.

And now, I'm going to invite my other panel member back in to open it up for questions.

Thank you all, I know that was quick. But I'm happy to chat any time.

One question.

>> **CHELSEA PORTER:** The one question in there is for you, Tiffany, for right now.

>> **TIFFANY BAILEY:** Yes. It is possible to have a conversation with both ARS or EOC.

You know, a lot of times, folks are nervous about connecting with our office.

They want to know what kind of information we request. What kind of information

we disclose and we do not disclose disability, just we do not. And we talk more

about it from an accommodation perspective in terms of impact, but if you can't -- if

you don't see, you know, potential accommodations that you might be requesting

and want to chat through it, we are happy to meet.

I will also say that for employees, there is a resource called the ask Jan network.

In which you can go and look by disability type. And it will kind of take you through

what are some potential

workplace accommodations. So there is that, that's available for employees, which I find to be super helpful.

>> **CHELSEA PORTER:** Great, Tiffany, thank you, are ARS and EOC involved in the new building/renovation design process now?

>> **TIFFANY BAILEY:** Yes. I am.

Yes, I am. As a matter of fact. What are some of the accommodations that I should think about in the context of small group discussions and collaborative work on discussions during class time?

That's a great question.

Michelle. I think that something to be mindful of, even small group or large group interactions are -- can be challenging for some folks and especially some of our neurodiverse folks as well.

And people on the autism specific -- spectrum. I would say that, you know, being mindful of how you're setting those up, you know,, talking about what does group participation look like and thinking about that inclusively and broadly, and, you know, if you know, that something has disclosed -if somebody has disclosed to you, you can also talk to them, do you have any tips or anything that, you know, would be important for me to keep in mind as, you know, we're going through these activities, I always recommend people put folks with disabilities in the driver seat, this is not our first rodeo, and so oftentimes, you know, we have solutions already that we thought about. Or and it's just -- you don't have to have all of the answers, you just have to ask. What would be best.

>> **CHELSEA PORTER:** Really love that concept of asking because it kind of goes to like what lane was saying earlier, too, there may be students or faculty and staff members that aren't aware that they have a disability, whether it's a processing disability, or some other, so just like asking ahead of time, like, the group, that's like, what do you all think will work well for this activity? That's we're getting ready to do and start implementing that. It's something that me as a new team lead is trying to take into account. Like as I'm talking with my group, what's going to work for you all individually? And how can we bring thatting to as a group to work stronger together?

Remember, better together.

Like from our presentation.

>> **TIFFANY BAILEY:** Yes.

>> **LANE FIELDS:** I'll chime in, too. Because I am neurodivergent myself, and want to echo the things that Tiffany and Chelsea have said.

Something that works really well for me, or a situation that might work really well for me, is it going to be the same -isn't going to be the same across each other like, you know, neurodivergent person, so if you have like, you know, one person who

has a particular challenge, there's no one size fits all, sort of thing and again that's my role is to learn more about how individuals respond to different things and how our teams can help you.

>> **CHELSEA PORTER:** Does anybody have any questions about digital accessibility and EOC and AR, -- ARS, we have a couple of minutes before we wrap up. I've been keeping an eye on the Q &A panel. But often types questions don't just pop in your head, it's inevitably, like tonight in the shower, that you can -- we have sent out our e-mails and we'll put them in the chat, we're here to chat with you about any questions or concerns that you might have.

>> **TIFFANY BAILEY:** Agreed.

And please always, too, you know, you can -- you can call, you can e-mail us, you can put in a report an access concern form, we're going to be sharing with campus partners.

We want to know what you're experiencing and whatever is best for you, let us know.

Nonworking push button. A particular department, or something that you've noticed in terms of the culture, this is going to help us to plan and be able to target our kind of training efforts, and education efforts. So we really want to hear from you.

I cannot stress that enough.

>> **CHELSEA PORTER:** The same goes for any digital accessibility barriers that you all run into that this group sitting right here, you know, me, lane, Stephanie, we're going to like dig in, try to resolve those type of issues. And as best we absolutely can, like I do have to like give a shout-out to our I.T. department that is upgrading the time keeping.

We have a love-hate relationship with the TIM.

>> **LANE FIELDS:** Just a hate one.

>> **CHELSEA PORTER:** New version that's coming is nothing is ever 100% accessible, as much as we would love it to be, but it is so much -- it's through initiatives like this that we're able to push different departments and things for making more accessible content for all of us to use, so, yeah.

>> **TIFFANY BAILEY:** And I also want to acknowledge that, you know, it's frustrating when things move slow. It's frustrating for me. And but, you know, our other goal is to be able to communicate openly to say, we have this down,

we know, we're working on it.

There's still stuff from my ARS time that I have on my list of things to address, so I want you all to know that those are at the top of our radar and we're weaving them in and trying to break it down, whenever we can and it takes entirely too long to change systems, yes, it does, so.

>> **DR. ADRIAL BRYAN:** All right. Well, thank you so much, Chelsea, lane and Tiffany, for your wonderful presentation. And for laying out for us all of the services and accessibility options and strategies we can take here at UNC. There are a -- there's a lot of people we need to thank, so much work went into today and tomorrow, and Thursday. And I would like to thank everyone in the Inclusive Excellence office, those helping out behind the scenes, Chris, and Kristine, and Ye, as well as our closed captioner, Christy, thank you very much, and to those who helped with the panels today. So Jessica Vargas and our speakers, Laurie, please come back tomorrow. Tomorrow, we're going to be talking about understanding international student experiences. And Dr. Gigi Taylor and Dr. Warren Christian will be leading the sessions tomorrow, including a student panel discussion, and they will also be giving advice on how to make the classroom more accessible. We look forward to seeing you tomorrow. Bye, everyone. (Conclusion).

>>**JESS ROE:** We want to make a note that the survey link will be sent out following this Zoom, but you can also access it here, via QR code.

>> **DR. ADRIAL BRYAN:** Please take a few minutes to fill out the survey and give us information on how we can improve. That information will be very helpful. Thank you.

(Recording stopped)