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2020

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UNIVERSITY OF CALIFORNIA
RIVERSIDE

Dis/rupting and Dis/mantling Racism and Ableism in Higher Education

A Dissertation submitted in partial satisfaction
of the requirements for the degree of

Doctor of Philosophy

in

Education

by

Danielle Mireles

December 2020

Dissertation Committee:

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Dr. Eddie Comeaux, Co-Chairperson

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Acknowledgements

I am in deep gratitude to my dissertation committee, family and friends, and community inside and outside of academia who have held and sustained me through my PhD journey. Dr. Rita Kohli, I am eternally grateful for your nudge to start the PhD program at UCR. Through coursework and our work together in Mellon AIS, you have continuously guided me throughout this process. In our many conversations together, you gave me the language and tools to articulate and expand upon my ideas – many of which emerged from our talks. I deeply appreciate your mentorship, and ways in which you embody your work in all ways. I strive to impact the lives of students as much as you have impacted mine. Dr. Eddie Comeaux, my co-chair, thank you for providing me not only opportunities to grow as a scholar in higher education, but providing me the means to do so through opportunities to work as a teaching assistant. So often, our academic identities are nurtured, but we are not provided with the means to survive outside of the academy. I appreciate the countless times you made time for me to discuss my doctoral work, advocated for me, and nurtured my identity as a scholar. Dr. Begoña Echeverria, thank you for serving as my advisor and providing spaces for me to connect with other graduate students. As a commuter student, and working multiple jobs, these spaces were so very needed and kept me connected to the campus community. You have continuously challenged me as a scholar, and writer (where would I be without your writing “-ectomies”?). Thank you for always pushing my thinking in all ways. To all three of you, I am honored that each of you served on my committee.

I am fortunate to have shared space with phenomenal friends, colleagues, and students. Pat Ordoñez-Kim (*mamas*), I value our friendship immensely and the ways in which we have cultivated joy and laughter in our program. I am in deep gratitude for our many discussions about this work, and I am excited for the work we plan to do together. To the members of my original cohort, Amy-Scott Williams, Micki Lin, and Kyle McMillen, thank you for your continual support and our many text threads which sustained me through coursework. To the “Fabulous Five,” “Fantastic Four,” and “Magnificent Seven,” thank you for fostering community with me under Dr. Echeverria. Rabea Qamar, I am especially honored to have shared space with you. To Heather Killeen, our amazing Graduate Student Coordinator, thank you for always having an open door, the countless conversations, and attending all of my presentations on campus. To Sara Grummert and Margarita Vizcarra, thank you for fostering spaces of community care and mutual aid on and off campus. I appreciate the spaces we carved out and held for each other. Last, to my former students, thank you for sharing space with me and for continuing to reach out to me in your emails.

To my family and friends, thank you for providing safe and loving places for me outside the institution. Thank you to my mom, Pamela, for supporting me through the many years I decided to stay in school. To my derby community, Julie Henry and Leah Trujillo, for the immeasurable support you have and continue to offer. I appreciate our many phone calls and text threads, and deeply value my friendships with each of you. To Dr. Michael Carter, I would have not attended graduate school at all if you had not given me the opportunity to find my identity as a scholar at Cal State Northridge. Thank you for

continuing to mentor me and providing much needed moral support. I appreciate each of you and the ways in which you have supported me through my PhD journey.

To
Margarita Vizcarra
Rest in Power

ABSTRACT OF THE DISSERTATION

Dis/rupting and Dis/mantling Racism and Ableism in Higher Education

by

Danielle Mireles

Doctor of Philosophy, Graduate Program in Education

University of California, Riverside, December 2020

Dr. Begoña Echeverria, Co-Chairperson

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The marginalization of “dis/abled” Black and students of Color is well-documented in the K-12 contexts (Annamma et al., 2013; Artiles, 2013; Artiles et al., 2002; Artiles, & Trent, 1994; Blanchett, 2006). Studies have found that not only do Black and students of Color experience overrepresentation in Special Education but that Special Education placement increases the likelihood of these students being removed from schools and placed into carceral facilities (Annamma, 2015; Annamma, 2017; Artiles, 2013; Artiles et al., 2002; Artiles et al., 2010; Sullivan & Artiles, 2011). While these studies allow us to understand barriers impacting dis/abled Black and students of Color in the K-12 system, far less is known about this student population upon entering higher education. Extending Dis/ability Critical Race Theory (DisCrit), my study examines the racialized experiences of dis/abled Black and students of color attending four-year colleges and universities in California. I

build on existing literature in K-12 and higher education contexts to examine the ways in which race and dis/ability intersect and perpetuate inequity for students in the study. I found that many existing policies and practices were not objective or race-neutral and privileged constructions of dis/ability rooted in hegemonic whiteness which invisibilized the experiences of Black and students of Color with dis/abilities. Building on Pérez Huber et al.'s framework (2010) of racist nativism, CRT, and DisCrit, I propose “racist ableism” as a conceptual framework to theorize these intersections of race and ability. I use racist ableism to describe how particular forms of ableism, informed by racist beliefs and institutions, oppress and dehumanize Black, Indigenous and people of Color based on actual or perceived (or, inversely, lack of perceived) dis/ability, thereby reinforcing the relationship between whiteness and ability. Last, I found that institutions of higher education police, surveil, and criminalize dis/ability. I identify particular practices, such as requiring students to register for services or using campus police in crisis response, as embodying carceral logics and carceral control. Overall, these findings highlight the need for colleges and universities to reexamine existing policies and practices with regard to dis/ability. Intersectional framing is of paramount importance if colleges and universities are going to meet the needs of increasingly diverse student bodies.

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Chapter One:

Racialization of Dis/abled Black Students and Students of Color

Introduction

“I think it’s because like [the Disability Resource Center] thought I was cheating like I didn’t deserve to be given the extra amount of time, or, you know? Like, ‘cause you look at me and you don’t think I’m - nothing’s wrong unless you see me walking or my hear me talking- hear me talking you might think but just at face value like just looking at me you don’t think that I’m disabled so they think like she’s, you know, getting over on disability, you know?”

When Tiffany, a 27-year-old Black female Science, Technology, Engineering, and Math (STEM) student with a traumatic brain injury, shared this with me during one of our interviews in January of 2019, we, and the rest of the college community, had yet to learn that the United States Department of Justice was only a couple of months away from exposing the largest college admissions bribery scandal in U.S. history (Medina et al., 2019). The scandal, we learned, occurred between 2011 and early 2019 and was led by the CEO of The Key, a college admissions preparatory company (Medina et al., 2019). The indictment included the names of influential people including Hollywood actress Felicity Huffman and Lori Laughlin and prominent college coaches such as Jovan Vavic, a USC water polo coach, and Gordon Ernst, a former Georgetown tennis coach (Das et al., 2019; Medina et al., 2019). Several universities and colleges including Yale, the University of Southern California (USC), and the University of California, Los Angeles (UCLA) had admitted upwards of 750 (mostly white and wealthy) students whose parents had paid specialists to diagnose their children with dis/abilities so that they could receive extended time on tests (Medina et al., 2019).

At the same time the Department of Justice was about to make public the results of their investigation, I had just begun interviewing and collecting qualitative data on the lived experiences of dis/abled Black and students of Color attending four-year colleges and universities in California. While research on dis/abled students has largely focused on microanalyses of individual experiences such as accommodation strategies (Barnard-Brak et al., 2010), student perceptions and experiences (Denhart, 2008; Frymier & Wazner, 2003; Hartman-Hall & Haaga, 2002), and faculty-student interactions (Sniatecki et al., 2015; West et al., 2016; Wright & Meyer, 2017), less is understood about how larger systems of oppression impact the experiences of dis/abled Black, Indigenous, and students of Color (BIPoC) on college campuses.

Statement of Problem

Following the admissions scandal, many newspaper articles emerged focusing on the potential ramifications the scandal would have on dis/abled students in higher education. However, Imani Barbarin (2019), a Black and Disabled disability representation and inclusion advocate, understood that the most severely impacted by the scandal would be dis/abled BIPoC:

Those facing charges will likely walk away with everything but their pride intact—it will be disabled students at the intersection of race that will face even more bias and roadblocks in their educational career and in seeking accommodations that are ensured to them by law. In other words, greater restrictions after the College Admissions Scandal will be the pollution disabled communities of color will be breathing in. (para. 3)

While the admissions scandal is one pollutant dis/abled BIPoC will be ‘breathing in,’ other forms of pollution on campus in the form of institutional racism and racial microaggressions already exist on college campuses. Pérez Huber and Solórzano (2015)

define institutional racism as “the formal or informal structural mechanisms, such as policies and processes, that systematically subordinate, marginalize, and exclude non-dominant groups” (p. 230). Rather than focusing on racism as individualized (e.g., a racist person), institutional racism focuses on the ways in which racism is (re)produced within institutions through policies and practices which often present themselves as objective and race-neutral (Pérez Huber & Solórzano, 2015). Institutional racism also helps us understand the ways in which racism is embedded within institutions rather than merely occurring within their walls (Ahmed, 2012).

Much less is understood about the racialized experiences of dis/abled BIPOC and how racism, ableism, and other forms of oppression intersect and impact their experiences on college and university campuses. Research on the experiences of dis/abled BIPOC in K-12 has documented several effects of racist and ableist structures, policies, and practices within schools including: overrepresentation of Black, Indigenous, and Latinx students in Special Education (Adkison-Bradley et al., 2006; Artiles et al., 2002; Skiba et al., 2008; Zhang & Katsiyannis, 2002); increased likelihood of these students, particularly Black students, being removed from mainstream classrooms and placed into segregated Special Education classrooms than white peers with the same or similar diagnoses (Annamma, 2016; Annamma, 2017; Annamma, Morrison, & Jackson, 2014; Blanchett, 2006; Fierros & Conroy, 2002); higher rates of suspension and expulsion due to disciplinary actions and policing in schools (Annamma, 2016; Annamma, 2017; Wald & Losen, 2003); and increased risk of incarceration in juvenile or adult carceral systems (Annamma, 2016; Annamma, 2017; Osher et al., 2002; Kim et al., 2010). While we know much about how

racism and ableism operate within K-12 education to systematically marginalize dis/abled BIPoC, less is known about these students and their experiences in higher education.

In the United States, nineteen-percent of the undergraduate student population identifies as having a dis/ability (National Center for Education Statistics, 2019). Dis/abled students at colleges and universities are often required to obtain and submit medical documentation in order to register as a student with a dis/ability and access dis/ability-related services. As Dolmage (2017) explains, “To a certain degree, all disabilities on college campuses are invisible – until an accommodation is granted, they have no legal reality” (p. 9). By “legal reality,” Dolmage means dis/abled students’ rights under the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973. I refer to this form of recognition as *institutionally dis/abled*. I use this term to highlight the politics of recognition which facilitate access to particular forms of institutionally sanctioned access such as the ability to register with a Disability Resource Center on campus and to be granted institutionally approved accommodations. Referring to students with institutional recognition as institutionally dis/abled also calls attention to the large number of dis/abled students whom institutions do not officially recognize as such. Students without institutional recognition may choose not to register as dis/abled with their campus for a variety of reasons, including fear of stigmatization or being othered (Denhart, 2008; Terras et al., 2015). Other students may be unable to register for services, because their body and/or mind does not meet institutional criteria, or they are unable to access “proper” documentation to register (Kafer, 2013, p. 12). Last, some students may have what Mingus (2011) refers to as “the lived experiences of dis/ability,” but who nonetheless

do not identify as being a dis/abled person (para. 17). Thus, institutional dis/ability allows universities to uphold structural ableism and racism by policing which bodies and minds are valuable and worthy of institutional support and which are not. Puar (2017) explains:

Part of how white centrality is maintained is through the policing of disability itself: what it is, who or what is responsible for it, how one lives it, whether it melds into an overarching condition of precarity of a population or is significant as an exceptional attribute of an otherwise fortunate life. (p. xix)

In other words, the very act of defining dis/ability within narrow institutional terms maintains white and abled-body supremacy by excluding BIPoC from accessing institutional resources, because they do not meet strict criteria of what is considered to be dis/ability or may not have access to institutions which can diagnose them. Kafer (2013) explains, “Scholars of chronic illness have started this work, arguing for the necessity of including within the disability communities those who lack a ‘proper’ read (read: medically acceptable, doctor-provided, and insurer-approved) diagnosis for their symptoms” (p. 12). Returning to the college admissions scandal, wealthy white students were able to acquire dis/ability labels through official and sanctioned channels which facilitated access to test-taking accommodations which they used to cheat on college entrance exams (Barbarin, 2019). Despite decades of empirical research documenting systemic racism in U.S. healthcare and public health institutions, many college campuses require medical or other similar documentation as a prerequisite to registering for campus services (Feagin & Bennefield, 2014). This requirement acts as a form of gatekeeping and is a racialized barrier for BIPoC.

In general, Black, Indigenous, and People of Color are less likely to identify as dis/abled than white people (Bailey & Mobley, 2019; Puar, 2017). BIPoC already occupy

at least one (and many occupy more than one) stigmatized identity and may be hesitant to further stigmatize themselves by identifying as dis/abled (Bailey & Mobley, 2019; Puar, 2017). Bailey and Mobley (2019) explain, “Stigma further complicates acknowledging disability, as it places an already precarious self at further risk of marginalization and vulnerability to state and medical violence, incarceration, and economic exploitation” (p. 7). In the United States, the belief that innate, or biological, racial differences exist between white people and BIPOC has been used to justify their enslavement, segregation, and incarceration (Annamma et al., 2015; Baynton, 2017; Pickens, 2019). As Baynton (2017) explains, “Not only has it been considered justifiable to treat disabled people unequally, but the concept of disability has been used to justify discrimination against other groups by attributing disability to them” (p. 28). Dis/ability, specifically the use of intellectual and developmental dis/abilities as well as psychiatric dis/abilities, has been deployed by state and federal governments, universities and colleges, and other institutions as justification to dehumanize and oppress BIPOC (Ben-Moshe, 2020; Baynton, 2017; Pickens, 2019). Antiracism, specifically, weaponizes ableism as a rhetorical tool to justify state-sanctioned police violence including in the most recent murders of George Floyd, Eric Garner, Sandra Bland, Tanisha Anderson, Michelle Cusseaux, and many others (Crawford-Roberts et al., 2020). Most recently, the autopsy findings from the murder of George Floyd by Minneapolis police officers were misconstrued and manipulated by police by “falsely overstat[ing] the role Floyd’s coronary artery disease and hypertension [may have played in his death]” (Crawford-Roberts et al., 2020). This form of racialized ableism in which

dis/ability becomes the cause of death rather than state-sanctioned police violence is a mechanism of antiblack racism and upholds white supremacy.

BIPoC are also more likely to have “debilitating” experiences that are not recognized within traditional dis/ability rights discourses (Puar, 2017, p. xv). Puar (2017) operationalizes:

the term ‘debility’ as a needed disruption (but also exposes it as a collaborator) of the category of disability and triangulating of the ability/disability binary, noting that while some bodies may not be recognized or identified as disabled, they may well be debilitated, in part by being foreclosed access to legibility and resources as disabled. (p. xv)

In other words, BIPoC and their communities have experiences which do not conform to narrow, individualistic notions of dis/ability. Environmental racism including the intentional lead poisoning in Flint, Michigan, the placement of superfund sites near communities of Color (particularly reservations), and increased likelihood of asthma and death from asthma because of close proximity to oil and natural gas industries which exceed EPA zone standards are some examples of debilitation (Washington, 2019). Schalk (2018), in her discussion of crip theory, explains, “People of color and the poor are more likely to have experiences on the borders or outside of able-bodiedness or able-mindedness due to violence and failures of society to provide access to affordable, quality insurance, housing, and medical care” (p. 10). The violence and harm BIPoC and their communities encounter are a result of systemic oppression and white supremacy.

These issues become obfuscated in research that only centers race and racism, or only dis/ability and ableism, rather than analyzing them together. Understanding dis/ability and race in the context of intersectionality illuminates the nuances in the lived experience

of dis/ability for BIPoC, but also exposes the ways in which racism and ableism reinforce one another. Intersectionality was introduced as a theoretical tool by Kimberlé Crenshaw (1989) to challenge frameworks which viewed race and gender as mutually exclusive rather than as interconnected and mutually constitutive. While many who use intersectionality as a framework frequently focus on identity alone, Schalk (2018) argues that “the incorporation of (dis)ability into intersectional frameworks where it is often left out helps highlight the necessity of including identity, but not being limited to identity alone in intersectional analyses because of the way discourses of (dis)ability have been used to justify discrimination and violence against other marginalized groups” (p. 8). If we only examine dis/ability as an identity, we exclude those who may experience ableism, but do not identify as being dis/abled or are unable to identify as dis/abled within particular institutions such as colleges and universities because of a politics of recognition. Moreover, centering ableism without an analysis of race often inadvertently centers whiteness as it becomes invisibilized in many conceptualizations of ableism. As Bell (2017) argues, “it should be understood that many white disabled people have cultural capital by virtue of their race and are, therefore, more on the inside than they are on the outside” (p. 404).

Intersectionality not only allows scholars to understand how occupying more than one minoritized identity positions some individuals even further on the margins, but also considers how racist and ableist systems of power create and sustain systemic inequality under ideologies of white supremacy. For example, intersectional analysis on overrepresentation of Black, Indigenous, and Latinx students reveals how they are disproportionately labeled in “subjective” or “soft” dis/ability categories such as

intellectual dis/abilities, speech and language dis/abilities, emotional and behavioral dis/abilities, and ADHD (Annamma, 2017; Artiles, 2011; Klingner & Harry, 2006; Skiba et al., 2006; Smith & Erevelles, 2004). Intersectional analysis as an analytical tool also allows for action by identifying how policies and practices impact multiply-marginalized people in nuanced and complex ways and disrupting them. Understanding racism and antiblackness in analyses of ableism is a move toward decentering whiteness and dismantling white supremacy.

Purpose of Study

While limited, a growing body of literature in higher education demonstrates the importance of intersectional framing (Banks & Hughes, 2013; Durodoye, et al., 2004; Novakovic & Ross, 2015; Petersen, 2009). This research provides crucial insight into the ways in which racism and ableism are interconnected, and their impact on multiply-marginalized Black, Indigenous, and students of Color. Framed by Dis/ability Critical Race Theory (DisCrit), this dissertation seeks to expose the ways in which structures, policies and practices on college campuses contribute to racialized inequity for Black students and students of Color with dis/abilities. The following questions guided this dissertation project and allowed me to move through each stage of the research process in a way which centered the lived experiences and knowledges of dis/abled students of Color:

- (1) What are the experiences of dis/abled Black students and students of Color attending four-year colleges and universities?
- (2) How well are current programs, policies, and practices on college campuses serving dis/abled Black students and students of Color?

(3) To what extent do dis/abled Black students and students of Color resist dominant ideologies and discourses regarding race and dis/ability?

Terminology

In this dissertation, I weave together literature from the fields of Critical Disability Studies and Critical Race Studies, and incorporate terms from the disability justice movement to examine the experiences of multiply-marginalized Black students and students of Color. In the following section, I define relevant terminology.

Dis/abled and dis/ability

This dissertation rejects legal and institutional understandings of dis/ability and recognizes that these definitions act as forms of gatekeeping and policing; these definitions privilege constructions of dis/ability rooted in whiteness (Puar, 2017). I specifically use the terms “dis/ability” and dis/abled” with a slash from Dis/ability Critical Race Theory which “counter[s] the emphasis on having a whole person be represented by what he or she cannot do, rather than what he or she can” as a way to “disrupt notions of the fixity and permanency of the concept of disability, seeking rather to analyze the entire context in which the person functions” (Annamma et al., 2015, p. 1). Dis/ability is not limited to static institutional definitions of who is or who is not recognized as dis/abled but instead recognizes that ableism has been used as a mechanism to oppress BIPOC as well as other historically marginalized groups (Baynton, 2017).

Ableism

Historically, research has focused on ableism as separate from other systems of oppression. In this dissertation, I am guided by definitions of “ableism” proffered by Talila

A. Lewis (2020) and Patty Berne (2015). Both definitions locate ableism as interconnected to other systems of oppression. Lewis (2020), in a working community definition of ableism, defines it as:

A system that places value on people's bodies and minds based on societally constructed ideas of normalcy, intelligence, excellence and productivity. These constructed ideas are deeply rooted in anti-Blackness, eugenics, colonialism and capitalism. This form of systemic oppression leads to people and society determining who is valuable and worthy based on a person's appearance and/or their ability to satisfactorily [re]produce, excel, and "behave." You do not have to be disabled to experience ableism. (para 3)

Unlike previous definitions of ableism, Lewis' definition removes white centrality and focuses on ableism as a system which is rooted in white supremacy. Berne (2015), in a working draft of "Disability Justice," also locates able-bodied supremacy within the context of "intersecting systems of domination and exploitation":

We cannot comprehend ableism without grasping its interrelations with heteropatriarchy, white supremacy, colonialism and capitalism, each system co-creating an ideal bodymind built upon the exclusion and elimination of a subjugated "other" from whom profits and status are extracted. 500+ years of violence against black and brown communities includes 500+ years of bodies and minds deemed dangerous by being non-normative – again, not simply within able-bodied normativity, but within the violence of heteronormativity, white supremacy, gender normativity, within which our various bodies and multiple communities have been deemed "deviant", "unproductive", "invalid". (para. 1)

Together, these definitions guided my understanding of ableism and able-bodied supremacy in relation to and intertwined with other systems of oppression and within larger, overarching ideologies of white supremacy. As Schalk (2018) argues, "Without recognizing ableism as a part of the house that needs to get taken down or by continuing to participate in ableism in anti-racist and feminist work, we are only further entrenching

systems that are being used to oppress us” (p. 141). Recognizing ableism and interrogating its role in maintaining white supremacy moves us closer to dismantling it.

Able-bodied(ness) or able-minded(ness)

While ‘able-bodied’ and ‘able-minded’ are often defined within a binary understanding to dis/abled experiences, ‘able-bodiedness’ and ‘able-mindedness’ are recognized as being compulsory (McRuer, 2017). McRuer (2017) argues that able-bodied is conceptualized as being “free from physical disability” rather than “function[ing] by covering over, with the appearance of choice, a system where there is actually no choice” and where “able-bodied identities, able-bodied perspectives are preferable” (p. 395). Moreover, as Bailey and Mobley (2019) explain,

The tropes utilized to distinguish between supposedly superior white bodies and purportedly inferior bodies of color have relied on corporeal assessments that take the able white male body as the center and “norm.” Notions of disability inform how theories of race were formed, and theories of racial embodiment and inferiority (racism) formed the ways in which we conceptualize disability. (p. 9)

In other words, able-bodiedness and able-mindedness privilege white cis-heterosexual men which upholds structural racialized normalcy and operates within white supremacy. These terms are used to locate experiences of people who do not identify as dis/abled or who do not have the lived experience of dis/ability.

Racism

It is crucial that I explain my conceptualization of racism in this dissertation because, as Eduardo Bonilla-Silva (2006) explains that, “whereas for most whites racism is prejudice, for people of color racism is systemic and institutionalized” (p. 8). I conceptualize racism as “the belief in the inherent superiority of one race over all others

and thereby the right to dominance, manifest and implied” (Lorde, 1992, p. 496). Specifically, I center Shaun Harper’s (2012) theorization which defines racism as “individual actions (both intentional and unconscious) that engender marginalization and inflict varying degrees of harm on minoritized persons; structures that determine and cyclically remanufacture racial inequity; and institutional norms that sustain White privilege and permit the ongoing subordination of minoritized persons” (p. 10). Harper’s conceptualization locates the everyday interactions which perpetuate systemic racism within structural racism.

Antiblack and Antiblackness

I use the terms antiblack (or antiblack racism) and antiblackness to distinguish Black experiences from the experiences of Indigenous people and non-Black people of Color with individual and systemic racism. According to Dumas and Ross (2016), “antiblackness is not simply racism against Black people” but, rather, “antiblackness refers to a broader antagonistic relationship between blackness and (the possibility of) humanity” (p. 429). In other words, antiblackness is a power structure and discourse that is deployed to dehumanize and oppress Black people and communities in order to privilege white and non-Black people of Color, which maintains white supremacy (Dumas, 2016; Dumas & Ross, 2016).

Microaggressions

I focus on a Critical Race Theory conceptualization of microaggressions which centers race and racism. Racial microaggressions refer to “subtle, stunning, often-automatic, and non-verbal exchanges which are ‘put downs’” (Pierce et al., 1978, p. 66).

While Pierce et al. (1978) originally conceptualized racial microaggressions to describe the everyday experiences of Black people, it has since been applied to other racial and ethnic minority groups including Indigenous and First Nations communities, Latinx communities, and Asians, Asian Americans, and Pacific Islanders (Pérez Huber and Solórzano, 2015). Racial microaggressions can be subtle or blatant, or even visual representations “of racist ideas and beliefs about People of Color” (Pérez Huber and Solórzano, 2015). The accumulation of racial microaggressions over time “can lead to mental, emotional, and physical strain” and have a negative impact on how Black, Indigenous, and students of Color experience the campus racial climate (Yosso et al., 2009, p. 661).

Literature Review

As discussed previously, ableism upholds white, abled-body supremacy by dehumanizing and oppressing BIPOC. While scholars have sought to dispel the notion that inherent intellectual or developmental differences exist between racial groups, few have problematized why dis/ability, as a construct, continues to be effective in discrediting BIPOC and other minoritized groups (Baynton, 2017; Schalk, 2018). While literature on medical racism and scientific racism rarely include an analysis of ableism explicitly, scholar-activists such as Subini Annamma, Sami Schalk, TL Lewis, Jasbir K. Puar, Mia Mingus and others have challenged the ways racism, including medical and scientific racism, is conceptualized in their work. These scholars and activists have pushed to include an analysis of racism and ableism, and the specific ways it has been mobilized to maintain white supremacy, across a large body of work inside and outside of academia.

American colleges and universities actively participate in the (re)production of racialized ableist knowledge. As Wilder (2014) argues in his foundational text, *Ebony & Ivy: Race, Slavery, and the Troubled History of American's Universities*, “Race research brought the political and social ascent of the college... scholars from the American colonies were central actors in the emergence of... racial science” (p. 10-11). Racial science, or scientific racism, sought to “scientifically” and “methodically” prove the existence of intellectual and biological differences between racial groups (Dolmage, 2017). These studies often perpetuated the myth of a racial hierarchy; they justified slavery and colonization, as well as immigration and reproductive restrictions (Dolmage, 2017; Menchaca, 1997; Washington, 2006). Samuel Morton’s study of craniometry, in which he measured the relationship between race, skull size, and intellectual capacity, is one of the most commonly cited examples of scientific racism (Menchaca, 1997).

Medical colleges played key roles in what Washington (2006) refers to as the “racial research wars” – the centuries of abuse Black communities endured by scientists and physicians in the medical system including those operating at American colleges and universities (p. 8). While the Tuskegee Study is perhaps the most commonly cited example of medical abuse, as Washington (2006) argues, “researchers who exploit African Americans were the norm for much of our nation’s history, when black patients were commonly regarded as fit subjects for nonconsensual, nontherapeutic research” (p. 13). Nontherapeutic research refers specifically to “medical issues for the benefit of future patients or of medical knowledge” (Washington, 2006, p. 5). Stealing or purchasing of Black bodies for physician’s training, forced surgical procedures on Black female slaves

to advance gynecological knowledge, and using Black people as experimental spectacles in medical theaters were some of the ways in which medical colleges abused and debased Black people and communities for nontherapeutic research (Washington, 2006). While not a comprehensive history of the literature on medical and scientific racism, these examples demonstrate that institutions of higher education have played a pivotal role in not only legitimizing knowledge which pathologized Black communities, but have also perpetuated racialized medical violence on these communities.

Colleges and universities have long been entangled with what is increasingly being named as the medical industrial complex (MIC). Mia Mingus (2015) defines the MIC as:

an enormous system with tentacles that reach beyond simply doctors, nurses, clinics, and hospitals. It is a system about profit, first and foremost, rather than “health,” wellbeing and care. Its roots run deep and its history and present are connected to everything including eugenics, capitalism, colonization, slavery, immigration, war, prisons, and reproductive oppression. It is not just a major piece of the history of ableism, but *all* systems of oppression. (para. 3)

Similar to the prison industrial complex and military industrial complex, increasing privatization of services has allowed the MIC to maintain control over oppressed communities (Mingus, 2015). State and private hospitals, pharmaceutical companies, and state disability services and programs are some of the many institutions which form the MIC (Mingus, 2015). Returning to Lewis’ (2020) definition of ableism, the MIC decides who is valuable and who is worthy by placing value, quite literally, on people’s bodies and minds. Understanding that colleges and universities operate within this complex is essential to understanding how ableism and racism have become embedded into these institutions.

Dis/abled Black, Indigenous, and Students of Color in Higher Education

Dis/abled BIPOC belong to at least two, if not more, historically marginalized groups in higher education: BIPOC and dis/abled students. While the numbers of students of Color and dis/abled students continue to steadily increase in enrollment at four-year college campuses, both student groups continue to encounter oppressive structures which adversely impact their experiences on college campuses (Snyder & Dillow, 2019). Neoliberal racism often obfuscates the barriers BIPOC encounter by “provid[ing] the ideological and legal framework for asserting that since American society is now a meritocracy, government should be race neutral, affirmative action programs should be dismantled, civil rights laws discarded, and the welfare state eliminated” (Giroux, 2003, p. 201). Systemic forms of oppression are further invisibilized as colleges and universities increasingly position diversity as central to their missions and a necessity in an increasingly global society while leaving racist and ableist policies and practices intact.

Experiences of Black, Indigenous, and Students of Color in Higher Education

Prior to arriving at college, BIPOC encounter several structural barriers. Black and Latinx students, in particular, are more likely to be placed in remedial and vocational classes and less likely to be placed in honors and advanced placement classes (Oakes, 2005), experience disproportionality and overrepresentation in Special Education classes (Artiles et al., 2002; Artiles & Trent, 1994; Harry & Klingner, 2014; Sullivan & Artiles, 2011), are more likely to have experiences with school discipline and criminalization (Annamma, 2015; Annamma et al., 2014; Osher et al., 2002; Wald & Losen, 2003), and are more likely to experience racialized pushout from schools (Annamma 2017; Morris,

2016; Osher et al., 2002). Pushout is an alternative term to dropout, which focuses on dropout as an individual outcome, and, instead, highlights the structural mechanisms which push or remove students from schools (Wald & Losen, 2003). These issues are compounded for students that experience multiple forms of marginalization, such as BIPoC that identify as dis/abled, or dis/abled and queer, who are at an increased risk for coming into contact with juvenile and adult carceral systems (Annamma, 2016; Annamma, 2017; Morris, 2016). It is also important to note that while previous research on the school-to-prison pipeline has focused on the experiences of Black and Latino boys and youth, Morris' (2016) and Annamma's (2017) research on incarcerated girls and youth of Color has shown that they are also disproportionately impacted by school discipline procedures which increases their likelihood of racialized pushout and incarceration.

Upon arriving at college campuses, BIPoC often must navigate unwelcome and hostile campus climates. Research on BIPoC has found, in comparison to white students, they were less satisfied with their campus climates (Museus et al., 2008), perceived their climates as being more racist and less accepting (Rankin, & Reason, 2005), and were more likely to experience harassment and inequitable treatment by faculty, staff, and peers (Ancis et al., 2000; Rankin & Reason, 2005). The collective experiences of BIPoC on campus is often referred to as the campus racial climate. Reid and Radhakrishnan (2003) define campus racial climate as "students' observations of their experience as racial minorities on campus... [and] include everything from students' experiences with racism to the belief that the university is not doing enough to support diversity" (p. 264-265). For instance, hate crimes or speech and the increased presence of campus police on campuses

contribute to a hostile campus racial climate for BIPOC. In one study on campus climate, Gleditsch and Berg (2017) found that faculty perceived Asian and White students as more intelligent than African American, Latino, and Native American students. While not framed as ableism in the study, racialized perceptions of intelligence, or lack of, are a form of racialized ableism. These racist and ableist attitudes and beliefs often manifest in the form of racial microaggressions.

Racial microaggressions can also create a hostile campus climate for BIPOC. As discussed earlier, racial microaggressions are “a form of systemic, everyday racism used to keep those at the racial margins in their place” (Pérez Huber & Solórzano, 2015, p. 298). Important in this conceptualization of racial microaggressions is “everyday experiences with racism are more than an individual experience, but part of a larger systemic racism that includes institutional and ideological forms” (Pérez Huber & Solórzano, 2015, p. 301). In other words, structural racism is upheld through racial microaggressions. In one study on the experiences of African American undergraduate students, Solórzano et al. (2000) found that experiencing racial microaggressions contributed to a negative campus climate and students developed feelings of self-doubt, frustration, and isolation. These experiences discouraged students from using student services on campus, affected their academic performance, and even led to some students leaving, or considering leaving the institution altogether (Solórzano et al., 2000).

While not always conceptualized as ableism, many racial microaggressions rely on assumptions or stereotypes regarding intelligence. For example, racial microaggressions which directly or indirectly reference the academic or intellectual capabilities of Black,

Indigenous, and students of Color are a form of racialized ableism. Yosso et al. (2009) and Solórzano et al. (2000) discuss racial microaggressions in which peers or faculty perceived students of Color as unintelligent or dumb. While perceptions of intelligence are often discussed in relation to academic merit, these perceptions can be (re)framed as the product of larger racialized ableist beliefs and attitudes regarding BIPoC. While research has focused on how BIPoC engage in acts of resistance which counter racist discourses, these studies often do not discuss how BIPoC particularly dis/abled BIPoC, resist racialized ableist discourses in ways that do not perpetuate ableism.

Experiences of Dis/abled Students in Higher Education

Legislative, social, and cultural changes have increased access to higher education for dis/abled students in the second half of the twentieth century (Dolmage, 2017). These changes include the passage of formal legislation such as Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, as well as shifting attitudes and beliefs regarding the rights of dis/abled people (Dolmage, 2017). Section 504 as well as the ADA prohibit discrimination on the basis of dis/ability and require that the majority of public and private postsecondary institutions provide accommodations and modifications for dis/abled students (Rehabilitation Act of 1973, 1973; Americans with Disabilities Act of 1990, 1991). Accommodations include extending time to complete a degree, while auxiliary aids refer to university accommodations or modifications such as extended test-time or access to a student notetaker (Wolanin & Steele, 2004). On many campuses, students with dis/abilities can register with a Disability Resource Center which provides access to accommodations. While on the surface the existence of these services

may seem to imply that the university values access and equity for dis/abled students, they also function to ensure the university complies with federal legislation (Lester et al., 2013). Moreover, the structure of these offices does not challenge structural ableism within the larger institution.

Structural, or institutional ableism, refers to the ways in which ableism is embedded into the fabric of institutions (Fierros, 2006). Within higher education, even the notion of compliance, implies that ableism exists outside university walls, and can occur within university walls, but fundamentally ignores the ways in which it is built into the very structure of the university. Dolmage (2017), in *Academic Ableism: Disability and Higher Education*, explains that universities were instrumental in “segregat[ing] society based upon arbitrary ideas of ability” (p. 15). These ideas, while arbitrary, were detrimental not only for dis/abled people, but also BIPoC, women, and the queer community who were pathologized within these discourses of ability (Baynton, 2017; Dolmage, 2017).

According to Fierros (2006):

Similar to institutional racism, institutional ableism is distinguished from the individual bigotry toward people with disabilities by the existence of systemic, pervasive, and habitual policies and practices that disadvantage individuals based on their abilities. But because of institutional ableism’s hold on our society, it is unlikely that any legal remedy will eliminate the educational inequity faced by students with disabilities. (p. 2)

In other words, rather than understanding ableism as individual acts, such as a professor denying an accommodation to a student, it can be conceptualized as structures, policies, and practices within the institution that act as forms of institutionalized gatekeeping.

Dis/abled students’ decision to register or not register with their campus’ Disability Resource Center are complex and shaped by both students’ previous experiences with

navigating dis/ability in schooling and larger societal attitudes and beliefs regarding dis/ability. Processes of stigmatization and ‘othering’ may discourage students from registering to receive services from their campus’ Disability Resource Center (Denhart, 2008; Kranke et al., 2013; Trammal, 2009). Students with mental health dis/abilities, in particular, may especially struggle with identifying as dis/abled due to fears of or experiences with stigma which stereotype people with mental health dis/abilities as unpredictable or dangerous (Martin, 2009). Dis/abled students may also choose not to register for services because of “internalized ableism” (Campbell, 2008), which “can mean the disabled [person] is caught ‘between a rock and a hard place’; in order to attain the benefit of a ‘disabled identity’ one must constantly participate in processes of disability disavowal, aspiring towards normativity, a state of near able-bodiedness, or at very least to effect a state of ‘passing’” (p. 156). In college, dis/abled students may choose to present themselves as able-bodied individuals or utilize their ability to ‘pass’ to avoid stigmatization or judgement from faculty or peers (Denhart, 2008; Terras et al., 2015). In some cases, dis/abled students may lack sufficient knowledge or hold misconceptions regarding who qualifies as a ‘student with a dis/ability’ on campus (Kranke et al., 2013; Lyman et al., 2016; Marshak et al., 2010). In other words, students with invisible dis/abilities such as mental health dis/abilities or chronic pain or illness may be unaware that they qualify for support.

Upon registering for services, dis/abled students frequently encounter institutional barriers that make access to accommodations and other mandated services and modifications difficult. As discussed previously, the majority of campuses require students

to formally register through a Disability Resource Center prior to receiving access to academic adjustments or auxiliary aids (Wolanin & Steele, 2004). Even after registering, students must often request the accommodations and modifications they need on a class-by-class basis. While this gives students some flexibility in terms of strategically negotiating which professors they inform regarding their institutional status as a dis/abled student, it also means that students may be communicating access needs with upwards of three or more professors a quarter or semester depending on the number of units in which they are enrolled and if they are attending school full-time. This process can be further complicated by the types or forms of access students need, which can range from one or two modifications or accommodations to several which differ depending on various factors including the structure and type of instruction in the class. Throughout this, colleges and universities expect students to have ongoing contact with their campus' Disability Resource Center (Lyman et al., 2016). Lyman et al. (2016), in their study of the experiences of dis/abled students receiving accommodations at a private, religious predominantly white institution (PWI), found that the process of requesting and receiving accommodations was lengthy and discouraging for students often resulting in inadequate or ineffective accommodations or, in some cases, the accommodations were not granted at all. Rather than Disability Resource Centers making the campus more accessible, they often make it less accessible by creating additional barriers for dis/abled students.

Faculty attitudes and beliefs also present a significant barrier to access for dis/abled students. Wolanin and Steele (2004) explain that “many faculty members have perceived the necessity of providing academic adjustments to students with disabilities as

undermining their academic authority and compromising academic standards and values” (p. 42). In other words, some faculty members consider dis/abled students as threat to the ‘meritocracy’ of the institution. Meritocracy, or rather the myth of meritocracy, refers to the idealization of “a social system... in which individuals get ahead and earn rewards in direct proportion to their individual efforts and abilities” (McNamee & Miller, 2009, p. 2). Within higher education, meritocracy manifests in the belief that students gain access to institutions based on individual merit (Vue et al., 2017). In other words, students are there because they have proven their worth and value to the institution. Dis/abled students, or those who require accommodations to attain equitable access to education, are perceived as a threat to institutional values regarding meritocracy.

West et al. (2016), in their study on inclusive instructional practices, found that instructors did not or were hesitant to make concessions such as extra credit or course-reading load because these were perceived to “compromise the intellectual rigor of their course” or “increase their teaching workload” (p. 368). Similarly, Frymier and Wanzer (2003) found that many professors perceived accommodations as unfair advantages. This issue may be further compounded for dis/abled BIPoC already encountering racialized assumptions regarding how they accessed the institution such as athletic ability or as beneficiaries of affirmative action (Feagin, 1992; Fries-Britt & Turner, 2001; Vue et al., 2017).

Disability Resource Center staff and college faculty are not the only people that interact with dis/abled students. In general, college campuses often fail to meet the needs of students with psychiatric dis/abilities and may not have policies or practices to

adequately support students near to or experiencing crisis (Belch & Marshak, 2006). In some cases, faculty, staff, or administrators may react by involving judicial systems, campus police, or untrained emergency responders which often results in escalation and places these students in immediate danger (Belch & Marshak, 2006; Nishar, 2020). In 2018, a University of Chicago Police Department officer shot Charles Thomas, a student of Color, during a mental health crisis (Ewing et al., 2018; Newman, 2018). As of February of 2020, Thomas was still incarcerated following an escape from house arrest during another mental health crisis (Cruz-Alvarez, 2020). In 2020, Brown University student, pseudonymously referred to as “Sara Doe,” was “tranquilized, forced onto the ground, stepped on, and handcuffed” by Emergency Medical Technicians (EMTs) and Department of Public Safety officers following a bystander report that she hit her head during a campus event (Nishar, 2020, para. 3). Doe, a trauma survivor, bit an EMT during the physical confrontation which resulted in a felony charge, a restitution bill that she must pay the EMT, and her suspension from Brown (Nishar, 2020). The involvement of campus police is especially disturbing when considering national data trends on the intersections between policing, race, and dis/ability (Mueller et al., 2019).

While the number of research studies in higher education using intersectionality has steadily grown, very few studies examine the experiences of dis/abled students in relation to race, class, sexuality, and/or other identities. Research in Latino Critical Race Theory (LatCrit) has exposed how different dimensions of identity “can elicit multiple forms of subordination, and each dimension can also be subjected to different forms of oppression” (Villalpando, 2004, p. 43). The experiences of dis/abled students of Color are

shaped by their racial and ethnic identities, dis/ability identity, gender identity, sexual identity, socioeconomic status, documentation status, and so on. Research that has examined the experiences of multiply- marginalized dis/abled students, such as those that are low-income, queer, or BIPOC, has found that they encounter additional barriers navigating college campuses (Banks & Hughes, 2013; Harley et al, 2002; Henry et al., 2010; Miller, 2018; Miller et al., 2019; Pellegrino et al., 2011; Petersen, 2009). While dis/abled students are generally underrepresented in higher education, dis/abled students from low-income families are even less likely than their middle-class and upper-middle class counterparts to attend college (Novakovic & Ross, 2015). Low income dis/abled students encounter several barriers in higher education including insufficient financial aid and loans as well as higher likelihood of accumulating significant debt because dis/ability is not factored into financial aid or loan offers (Wolanin, 2005).

Harley et al. (2002), Henry et al. (2010), Miller (2018), and Miller et al. (2019) have examined the experiences of queer dis/abled students within higher education. Miller (2018) found that queer dis/abled students varied in how they made sense of their identities relationally. Miller (2018) identified five perspectives: intersectional, interactive, overlapping, parallel, and/or oppositional. Unlike other studies on dis/abled students, Miller locates queer dis/abled students experiences within oppressive structures that systematically oppress minoritized students. Moreover, Miller highlights the ways in which queer dis/abled students resisted these structures. Miller (2018) explains, “students adopted multiple perspectives simultaneously to resist oppression, navigate changing contexts, and build resilience and community” (p. 241). By examining students’ multiple social

locations, Miller (2018) demonstrates the importance of advancing intersectional frameworks in higher education research which examines the experience of students with dis/abilities.

In another study, Miller et al. (2019) examined how queer dis/abled university students managed disclosure of their queer and dis/ability identities. Their study examined the complexity of the disclosure process for (in)visibly dis/abled and queer students, and “students commented that disclosing disability and LGBTQ identities in certain contexts could lead to exclusion, harassment, and marginalization” and that “these concerns and fears were often based on students’ prior experiences in which they had experienced such marginalization after their identities became visible or known” (Miller et al., 2019, p. 315). Rather than viewing disclosure only in the context of an individualistic microanalysis, Miller et al. (2019) highlight that the disclosure process goes beyond self-advocacy skills, and that students’ choices to disclose were contextualized and strategic. Miller (2018) and Miller et al. (2019) demonstrate the need for studies which move beyond single-identity focuses and center students’ multidimensional identities.

Dis/abled BIPoC encounter additional barriers in the disclosure process and the accommodation process. Policies created to ensure the success of dis/abled students are color-evasive. The term “color-evasive” (Annamma et al., 2017) is used in place of color-blind to describe racism because “color-blindness, as a racial ideology, conflates lack of eyesight with lack of knowing. Said differently, the inherent ableism in this term equates blindness with ignorance” (p. 154). Using existing research on African American students, dis/abled students, and dis/abled African American students, Durodoye et al. (2004)

examined the transition process from high school to college for African American students with learning dis/abilities. Durodoye et al. (2004) focus on the role of school counselors in “developing a comprehensive transition plan which emphasizes family, sense of belonging, and overcoming oppression” (p. 133). The researchers make several suggestions on what counselors can do to meet dis/abled African American students needs including assisting students with identifying campus organizations with strong commitments to African American students and fostering racial and dis/ability literacy (Durodoye et al., 2004, p. 136-137).

In another study on disproportionality in two- and four-year colleges in southern Georgia, Pellegrino et al. (2011) found that African American students were underrepresented in seeking evaluation to document a dis/ability (specifically learning dis/abilities, AD/HD, and psychological disorder). Pellegrino et al. (2011) discuss the implications of fees in relation to documenting dis/abilities which create additional barriers for Black dis/abled students, particularly those from low-income families, which highlights the importance of centering intersectionality in research on dis/abled student experiences. Oesterreich and Knight (2008) have also identified differential and inequitable access along race and class lines in K-12 as important factors to consider when identifying why dis/abled BIPoC may not be attending college. Low-income BIPoC remain underrepresented in college preparatory courses including advanced placement classes (Artiles et al., 2005; Oakes, 2005) and are less likely to have access to SAT/ACT tutoring or classes (Oesterreich & Knight, 2008).

Banks and Hughes (2013), in their study of undergraduate dis/abled Black male students attending a Historically Black College or University (HBCU), use Critical Race Theory and disability theory frameworks as well as W.E.B. DuBois' notion of double consciousness. Their research design uses counternarratives which allowed participants to reflect on their experiences and challenge dominant narratives (Banks & Hughes, 2013). Students recounted how they experienced lowered expectations from professors and were subject to negative academic stereotypes regarding race, gender, and/or dis/ability (Banks & Hughes, 2013). Moreover, race appeared to “amplify such perceptions of incompetence [related to disability]” (Banks & Hughes, 2013, p. 377). One participant, who identified as having cerebral palsy, reported that his peers assumed that his gait resulted from his involvement in a gang shooting (Banks & Hughes, 2013). By examining race and dis/ability together and utilizing CRT and disability theory, the researchers moved past descriptive or exploratory analyses. These frameworks allowed the researchers to illustrate how African American males were not only raced and dis/abled by their peers and faculty, but also how they resisted these labels by (re)defining dis/ability as difference rather than deficit (Banks & Hughes, 2013).

Petersen (2009) study examined the educational experiences of four African American women with disabilities using Giroux's theory of resistance as a guiding theoretical framework. Petersen's (2009) participants contended with messages that they were less smart or less able because of stereotypes related to dis/ability and/or gender and/or race. Both of these studies demonstrate the importance of not overlooking multiply-marginalized individuals. Even more importantly, they demonstrate the need for critical

theoretical frameworks when examining the experiences of dis/abled students and dis/abled BIPoC in higher education.

Conclusion

While research on dis/abled students in higher education is growing, very little has highlighted the experiences of dis/abled Black, Indigenous, and students of Color or centered their experiential knowledge in studies. Within the higher education literature, very few top-tier journals have discussed the educational experiences of dis/abled students and their college-going experiences (Peña, 2014). Research that does exist frequently centers the experiences of dis/abled students in higher education who are registered with a Disability Resource Center which invisibilizes the experiences of students who are dis/abled but not registered for services. Moreover, systems-level analyses of oppression are often missing, instead focusing on dis/ability without examining ableism. Last, the majority of research on dis/abled students focuses on a single identity (dis/ability) without consideration of intersecting identities. In this dissertation, my aim is to highlight the experiential knowledge of dis/abled students of Color and to center these experiences within larger systems of oppression and ideologies of white supremacy. Understanding the ways in which structural racism, anti-blackness, and ableism are embedded into universities and colleges will allow us to disrupt and dismantle these systems.

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Chapter Two:
**Counternarratives of Dis/abled Black Students and Students of Color at Four-Year
Colleges and Universities**

Introduction

The histories of white supremacy and ableism are inextricably entwined, both forged in the crucible of colonial conquest and capitalist domination. One cannot look at the history of US slavery, the stealing of indigenous lands, and US imperialism without seeing the way that white supremacy leverages ableism to create a subjugated ‘other’ deemed less worthy/abled/smart/capable ... We cannot comprehend ableism without grasping its interrelations with heteropatriarchy, white supremacy, colonialism and capitalism. (Berne, 2019, p. 18)

Dis/abled Black, Indigenous, or students of Color (BIPoC) navigate at least two or more marginalized identities within higher education. Not only do they encounter racialized institutions historically hostile to BIPoC, but these same institutions are also structurally ableist and remain inaccessible to dis/abled students. BIPoC with dis/abilities navigate the margins between multiple and intersecting forms of oppression simultaneously. In other words, they are multiply-marginalized students.

Little intersectional research examines the experiences of multiply-marginalized dis/abled students in higher education. Intersectionality, a framework coined by Kimberlé Crenshaw, “views categories of gender, sexuality, class, nation, ability, ethnicity and age – among others – as interrelated and mutually shaping one another” (Collins & Bilge, 2016, p. 2). Specifically, intersectionality considers the ways in which oppressive systems such as racism or sexism intersect in the lives of multiply-marginalized people (Crenshaw, 1991; Collins & Bilge, 2016). Higher education research largely ignores the experiences of multiply-marginalized dis/abled students. While we know that BIPOC, LGBTQIA++, low-

income, first generation, and undocumented students' experience marginalization in higher education, researchers have yet to highlight the experiences of multiply-marginalized dis/abled students along these lines. Moreover, the research that does exist rarely centers the knowledge of dis/abled BIPoC. This paper addresses this gap by centering the lived experiences of dis/abled Black students and students of Color navigating race and dis/ability within four-year colleges. I argue that the counternarratives of students in the study reveal the ways in which their experiences with ableism were compounded by multiple and intersecting forms of oppression in their day-to-day lives. Students' counternarratives also revealed how they were hesitant or reluctant to identify as dis/abled or students with dis/abilities, encountered institutional barriers which made it difficult to register for or receive dis/ability-related support services, experienced dis/ability battle fatigue (which builds upon Smith and colleagues' conceptualization of racial battle fatigue), and engaged in resistance to racist and ableist systems.

Ableism, Racism, and Antiracism

While racism and ableism are often viewed as parallel, scholars have begun to examine not only how they intersect, but the ways in which they work together to maintain white supremacy (Annamma et al., 2013, Annamma et al., 2015; Pickens, 2019; Schalk, 2018). Bailey and Mobley (2019) explain: "Race—and specifically Blackness—has been used to mark disability, while disability has inherently 'Blackened' those perceived as unfit. Black people were—and continue to be—assumed intellectually disabled precisely because of race" (p. 6). These racist and antiracist ideologies not only harm dis/abled BIPoC but also able-bodied BIPoC pathologized by these discourses. During the 1800s,

white physicians pathologized enslaved Black people through the creation of racialized medical diagnoses such as *drapetomania*, which caused enslaved Black people to run away, and *dysaesthesia aethiopos*, which caused enslaved Black people to misbehave (Metzl, 2010; Pickens, 2019). More recently, Metzl (2010) identified how schizophrenia became linked to blackness during the civil rights era. These examples demonstrate not only how certain dis/abilities become racialized, but also how racist and antiblack discourses pathologize BIPoC (especially Black people and communities).

In the United States, approximately 1 in 4 people identify as having a dis/ability (Centers for Disease Control and Prevention [CDC], 2019), mirroring the approximately 19% of undergraduates who identify as having a dis/ability on college and university campuses (National Center for Education Statistics, 2019). While these statistics capture the number of dis/abled people who meet institutional definitions of dis/ability primarily through federal policies such as the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973, they exclude those who do not have access to acquiring diagnoses through private or public health institutions and individuals who do not identify as dis/abled but have the lived experiences of dis/ability (Feagin & Bennefield, 2014; Kafer, 2013; Mingus, 2011).

Federal policies further marginalize and disenfranchise individuals who do not have formal diagnoses. As Puar (2017) argues, “disability rights [is] a capacitating frame that recognizes some disabilities at the expense of other disabilities that do not fit the respectability and empowerment models of disability progress” (p. xvii). While dis/ability rights may appear to increase access for dis/abled people, they often provide only the legal

minimum, thereby reinforcing existing power structures which distribute access to resources inequitably (Puar, 2017). In the United States, inaccessibility to quality healthcare and persisting systemic racism in medical institutions remain significant structural barriers to the acquisition of “formal” diagnoses and medical treatment (Feagin & Bennefield, 2014; Kafer, 2013). For many people, cost is a significant barrier (CDC, 2019).

BIPoC are more likely to have experiences which do not fit neatly into an ability-dis/ability binary. Black, Indigenous, and communities of Color are disproportionately exposed to “air pollution, poisonous heavy metals, industrial chemicals, pathogens, vitamin deficiencies, diabetes, and even tobacco and alcohol in segregated, environmentally hazardous sacrifice zones,” (Washington, 2019). The exposure to sacrifice zones results in increased likelihood of lead poisoning, asthma, cancer, and other medical conditions (Washington, 2019). In 2020, COVID-19 disproportionately impacted the Navajo Nation and low-income Black and Latinx communities (Lovelace Jr., 2020; Silverman et al., 2020). While Black people make up only thirteen percent of the U.S. population, they numbered twenty-three percent of COVID-19 related deaths as of May 2020 (Lovelace Jr., 2020). Research also found a correlation between air pollution exposure and COVID-19 deaths (Hendryx & Luo, 2020; Petroni et al., 2020).

Puar (2017) refers to these experiences, generally not conceived as dis/ability, as “debilitating” (p. xv). Many BIPoC have experiences not recognized as dis/ability within dis/ability legal rights discourses and so are excluded from accessing resources guaranteed to dis/abled people under federal legislation (Puar, 2017). In this sense, ability and

dis/ability become forms of property (Annamma et al., 2015). Those “who can claim whiteness and/or normalcy” are “confer[ed] economic benefits” while those “who cannot lay claim to these identities” are further marginalized and disadvantaged (Annamma et al., 2013, p. 16). Moreover ableism, like racism, is endemic (Delgado & Stefancic, 2001). Pickens (2019) explains, “racism and ableism are quotidian practices in which the experience of being race and being disabled are mundane” (p. 11). In other words, racism and ableism seem ordinary and normalized thereby rendering invisible how they work together and intersect.

Student Experiences

Even prior to arriving at four-year institutions, dis/abled BIPoC encounter racialized barriers to access in the education pipeline. Black, Indigenous, and Latinx students are more likely to be placed in remedial classes or segregated special education classrooms than white or Asian students (Adkison-Bradley et al., 2006; Artiles et al., 2002; Blanchett, 2006; Oakes, 2005; Skiba et al., 2008; Zhang & Katsiyannis, 2002). Special education placement often fails to expose students to challenging curriculum that prepares them for college (Blanchett, 2006). For BIPoC, particularly those labeled with emotional or behavioral dis/abilities, this placement can increase the likelihood of disciplinary actions including suspension and expulsion which often results in racialized pushout from schools and placement into juvenile or adult carceral systems (Annamma, 2016; Annamma, 2017; Artiles, 2013; Morris, 2016). Despite decades of research on the experiences of dis/abled BIPoC in K-12 education, we know little about the experiences of dis/abled BIPoC in higher education.

While dis/abled BIPOC encounter barriers to access, these are often not understood as racialized barriers nor are their experiences with ableism framed within racist realities. Rather, colleges and universities present dis/ability policies and practices as race-neutral or objective. For example, while requiring medical documentation of dis/ability may appear to be ‘objective’ and ‘fair criteria’ for establishing if a student qualifies for services, this policy ignores years of research documenting systemic racism in U.S. healthcare (Feagin & Bennefield, 2014). Feagin and Bennefield (2014) explain: “Many generations of unjust enrichment from oppression have resulted in whites having superior [health] resources” and “people with high socioeconomic statuses utilize superior resources for better health, while individuals with low status have historically been denied such resources” (p. 8). These everyday practices perpetuate “unacknowledged dominant ideologies of [color-evasive] fairness and race-neutral meritocracy on which higher education bases much of its student support services” (Villalpando, 2004, p. 41). Dis/ability service offices and other support services on campus that interact with or support dis/abled students also (re)produce these dominant ideologies.

Research on dis/abled students in higher education focuses on self-determination and self-advocacy strategies (Barnard-Brak et al., 2010; Getzel & Thoma, 2008), disclosure of dis/ability (Denhart, 2008), faculty-student interactions (Sniatecki et al., 2015; West et al., 2016; Wright & Meyer, 2017), and faculty perceptions of dis/ability (West et al., 2016; Frymier & Wazner, 2003). This research privileges whiteness by centering western cultural understandings of dis/ability; it does not discuss ableism nor ableism in relation to other systems of oppression. Moreover, this research stems from a deficit perspective which does

not position dis/abled students as knowledge-holders. While Disability Studies scholars recognize dis/ability as socially constructed in much the same way race or gender scholars understand race or gender to be socially constructed, research on dis/ability and dis/abled experiences within higher education often treats dis/ability as objective and static (Annamma et al., 2013).

Research on the experiences of BIPoC in higher education has found that students often navigate unwelcoming and hostile campus racial climates. Campus racial climate refers to “the overall racial climate of the college campus” and “an important part of examining college access, persistence, graduation, and transfer to and through graduate and professional school” (Solórzano et al., 2000, p. 62). BIPoC often encounter and navigate racist stereotypes regarding their academic ability, merit, and competence (Fries-Britt & Turner, 2001; Feagin, 1992; Feagin et al., 1996; Harper & Hurtado, 2007). These include perceptions that BIPoC, particularly Black students, benefit from affirmative action or are admitted to college on the basis of athletic abilities rather than on academic abilities (Feagin, 1992; Fries-Britt & Turner, 2001; Vue et al., 2017). In Feagin et al.’s (1996) *The Agony of Higher Education*, African American students recounted several experiences with racial stereotyping by white faculty members. In one excerpt, a Black male athlete recounted missing a test because of athletic commitments. The professor did not believe him and required the student to obtain formal documentation. Feagin et al. (1996) explain:

The student’s humiliation is compounded by having to obtain a formal excuse from his coach, who is thus informed that the student is not trusted. This is a painful situation to be put in, especially when one is a member of a group whites have long stereotyped as undependable and untrustworthy (p. 87).

BIPoC, particularly Black students, navigate distrust from faculty regarding their motives. These reinforce stereotypes which contribute to a hostile campus climate.

These stereotypes often take shape in the form of racial microaggressions, “a form of systemic, everyday racism” which perpetuates structural racism and reinforces ideologies of white supremacy (Pérez Huber & Solórzano, 2015, p. 298). In a study on the experiences of undergraduate African American students, Solórzano et al. (2000) found that experiencing racial microaggressions led to feelings of self-doubt, frustration, and isolation. In another study, Yosso et al. (2009) found that undergraduate Latina/o’s experiences with racial microaggressions contributed to a negative and hostile campus racial climate. Other studies on microaggressions have found that campus culture and racial microaggressions also contribute to racial battle fatigue (Smith et al., 2011). Racial battle fatigue is defined as “the cumulative psychosocial–physiological impact of racial micro and macroaggressions on racially marginalized targets” (Smith et al., 2016, p. 1192). These issues are compounded for multiply-marginalized BIPoC on college campuses.

While limited, recent research on BIPoC with dis/abilities in higher education demonstrates the importance of intersectional framing when examining the experiences of multiply-marginalized students (Banks & Hughes, 2013; Durodoye et al., 2004; Karpicz, 2020; Petersen, 2009). This scholarship provides rich insight into the ways in which racism, particularly antiblack racism, and ableism intersect in higher education contexts. It also illuminates several unique barriers that these students, particularly Black students, navigate on college campuses.

Black dis/abled students encounter several barriers in transitioning to colleges and universities including inequitable access along race, dis/ability, and class lines (Oesterreich & Knight, 2008), lack of resources for transitioning (Durodoye et al., 2004), and underrepresentation in seeking evaluation for dis/abilities (Pellegrino et al., 2011). While limited, research in higher education has found that Black dis/abled students encounter racialization which often minimize or erase their lived experiences with dis/ability. Banks and Hughes' (2013) and Petersen's (2009) studies examined how racist stereotypes impacted the lived realities of Black dis/abled students. Specifically, racialized perceptions of ability including perceived lack of intelligence or competence impacted how faculty, staff, and peers perceived students. While not focused on undergraduate education, Karpicz's (2020) qualitative study examines perceptions of self-advocacy amongst dis/abled graduate students of Color highlights the necessity of intersectional work. Using Dis/ability Critical Race Theory, Karpicz (2020) centers the voices of multiply-marginalized students to disrupt majoritarian narratives of self-advocacy in higher education. Karpicz (2020) found that disabled graduate students of color encountered racialized access barriers including resistance from faculty to provide accommodations and a need to engage in higher levels of disclosure than their white peers.

In this chapter, I extend the existing literature on BIPoC, students with dis/abilities, and BIPoC with dis/abilities to further explore the ways in which racism and ableism intersect in higher education contexts. I center the counternarratives of Black students and students of Color in the study to expose the ways in which policies and practices contributed to racialized and ableist inequity (Solórzano & Yosso, 2002). In my analysis,

I recognize the margins as not only oppressive sites, but also “site[s] of radical possibility” and “a space of resistance” which allow us to radically reimagine alternatives to oppressive systems (hooks, 1989, p. 20). The following research questions guide this chapter:

- (1) What are the experiences of dis/abled Black students and students of Color attending four-year colleges and universities?
- (2) How well are current programs, policies, and practices on college campuses serving dis/abled students of Color?

Theoretical Framework

To understand the experiences of dis/abled Black students and students of Color on college campuses, I utilize Dis/ability Critical Race Theory (DisCrit). Subini Annamma, David Connor, and Beth Ferri (2013) introduced DisCrit as a theoretical framework to examine the interconnectedness between racism and ableism in education. Building on previous scholarship from Critical Race Theory and Disability Studies, DisCrit allows scholars to recognize the ways in which racism and ableism work together to maintain ideologies of white and able-bodied supremacies in western contexts (Annamma et al., 2013). DisCrit acknowledges the “legal, ideological and historical aspects of dis/ability and race and how both have been used separately and together to deny the rights of certain citizens” (Annamma et al., 2013, p. 14). It recognizes the ways in which racism and ableism are interlocked with other systems of oppression such as sexism, classism, and nativism (Annamma et al., 2013). DisCrit also argues, building on Harris’ (1993) work, that ‘Ability’ and ‘Whiteness’ are forms of property which protect the rights “of those who can claim Whiteness and/or normalcy” (Annamma et al., 2015, p. 24). It also offers an

intersectional lens to examine how “the same labels provide different opportunities to students of different races” (Annamma et al., 2015, p. 24). For example, Black students and students of Color are more likely to be placed in segregated special education settings than their white peers with the same or similar dis/ability labels (Fierros & Conroy, 2002). Researchers have shown that special education placement increases students’ likelihood of experiencing racialized pushout from schools and placement into juvenile or adult incarceration facilities (Annamma, 2016; Meiners, 2007). Finally, DisCrit framing allows resistance to be recognized in various forms (Annamma et al., 2015).

A DisCrit framework allowed me to make sense of the experiences of Black students and students of Color in the study. First, recognition of racism and ableism as intertwined exposed the ways in which students’ experiences of dis/ability were racialized. Second, I was able to identify how particular structures, policies, and practices provided or denied access based on students’ social positions. Third, DisCrit framing exposed the impact of these structures, policies, and practices on the everyday experiences of students in the study. Fourth, centering students’ everyday experiences, I was able to identify how majoritarian narratives regarding race and ability were normalized. Last, DisCrit allowed me to highlight the ways in which students resisted majoritarian narratives through counternarratives.

Methodology

This study examined the experiences of Black students and students of Color labeled as or who identified as dis/abled on college campuses. In my analysis, I was guided by Critical Race Methodology (CRM). CRM shares the same five themes identified in

Solórzano's (1995) conceptualization of CRT. First, CRM acknowledges the "intercentricity" of race and racism as it intersects with other forms of oppression (Solórzano & Yosso, 2002, p. 25). Second, it challenges ideologies of white supremacy which privilege neutrality and objectivity (Solórzano & Yosso, 2002). Third, it is committed to advancing racial justice and equity through disruption and elimination of all forms of oppression (Solórzano & Yosso, 2002). Fourth, it centers the experiential knowledge of Black, Indigenous, and people of Color (Solórzano & Yosso, 2002). Last, it uses an interdisciplinary lens (Solórzano & Yosso, 2002). I extend CRM to examine racism as it intersects with ableism in the present study.

A major tenet of DisCrit is "privilege[ing] the voices of marginalized populations, traditionally not acknowledged in the research" (Annamma et al., 2013, p. 11). In the study, I center the counternarratives of students as "a form of academic activism to explicitly 'talk back' to master-narratives" (Annamma et al., 2013, p. 14). Counternarratives "serv[e] several important methodological functions" (Fernández, 2002, p. 48) and "challenge the dominant and totalizing narrative of white supremacy" (Cook & Dixson, 2012, p. 1243). By centering the voices of Black students and students of Color in the study, I aim to: (1) bring forward voices that have been silenced both in the literature concerning these students but also at the institutions in which they attend; and (2) disrupt dominant narratives regarding race and ability.

The dissertation project from which this chapter emerges focused on the following research questions: (1) What are the experiences of dis/abled Black students and students of Color attending four-year colleges and universities? (2) How well are current programs,

policies, and practices on college campuses serving dis/abled Black students and students of Color? and; (3) To what extent do dis/abled Black students of Color resist dominant ideologies and discourses regarding race and dis/ability?

Participants

I recruited participants through: (a) a recruitment letter was circulated via email to campus organizations/clubs, cultural centers, and professors which asked them to forward the letter to their students or members; (b) and a flyer which was posted on campus community boards. To be eligible to participate in the study, students had to: (1) identify as Black, Indigenous, or a student of Color; (2) identify as having a dis/ability (or dis/abilities); and (3) had completed at least one semester or quarter at their current four-year institution. Participants did not have to be registered with their campuses' Disability Resource Center to be eligible to participate in the study.

Twenty-three students between the ages of eighteen and thirty-four participated in the qualitative questionnaire portion of the study. Ten of the survey participants met with me for informal, semi-structured interviews (Table 1). Interview participants ranged in age from nineteen and thirty-four and represented five college and university campuses in California. Participants identified across a range of racial/ethnic identities: two participants identified as Black or African American, two participants identified as Korean, two participants identified as biracial (Black-Mexican and Black-Guatemalan), one participant identified as Indian, one participant identified as Filipina, one participant identified as Latina (Mexican-Guatemalan), and one participant identified as Mexican-American. Participants also identified across dis/ability labels (e.g. Traumatic Brain Injury, Major

Depressive Disorder, Type 1 Diabetes, chronic allergies/illness) and many had more than one dis/ability. The majority of participants had attended K-12 in California schools. Seven participants attended public universities or colleges, two attended a private, Predominately White Institution (PWI), and one participant attended a private, Christian college. While six participants had registered for Disability Resource Centers on campus, not all participants utilized accommodations offered to them; four participants did not register for services.

Table 1: Research Participants

Participant	Age	Dis/ability	Race/Ethnicity	University/ College	Registered with DRC?
Tiffany	27	Traumatic Brain Injury	Black or African American	Public	Yes
Baudelaire	21	half deaf or deaf	Mexican American	Public	Yes
Susana	23	Major Depressive Disorder; General Anxiety Disorder	Filipina	Public	Yes
Bea	21	Type 1 Diabetic	Latina; Mexican- Guatemalan	Public	No
Alex	21	depression anxiety	Asian; Asian-American Korean	Private	No
Micah	20	chronic allergies/ illness; Tourette's Syndrome	Indian	Private	Yes
Rodrigo	34	head trauma; PTSD; tinnitus; hearing impaired	Korean	Public	Yes
Marisol	34	physical and mental	Afro-Latina (Black-Mexican)	Public	Yes
Kennedy	19	cognitive processing disorder	African American	Private, Christian	No
Andrea	29	General Anxiety; Depression; Adjustment Disorder	Biracial - Guatemalan/ Black or African American	Public	No

Data Collection

I collected data through two methods: a) a qualitative questionnaire on *SurveyMonkey*; and (b) two 60-90-minute informal, in-depth interviews. As a method, the questionnaire (see Appendix A) allowed me to obtain data on students' experiences who may have not otherwise met with me for an interview. This not only gave me *breadth*, but also allowed me to triangulate the findings from my interview data. The questionnaire included questions on: (1) demographics; (2) Disability Resource Centers and campus climate; and (3) interest in participating in an in-person or virtual interview. The interviews expanded on the questionnaire and provided depth on students' experiences on campus. I modeled my interview protocol after Seidman's (2006) three-step series. Seidman's (2006) series highlights the importance of experiences within the context of peoples' lives and the meaning that they ascribe to those experiences. Instead of three interviews, I met with the majority of participants twice; one participant met with me three times and another participant met with my only once. The first interview focused on students' experiences in K-12 (and community college, if applicable). This allowed me to better contextualize their experiences at their four-year colleges. The second interview focused on their experiences at their college or university. The interview guide is located in Appendix B.

Data Analysis

Interview data was audio-recorded with participants' consent and transcribed. I followed Harding's (2013) four-step process for thematic analysis. Thematic analysis is an accessible and flexible method "for systematically identifying, organizing, and offering insight into patterns of meaning (themes) across a data set" (Braun & Clarke, 2012, p. 504).

After reading transcripts thoroughly, I identified initial categories. Next, I coded transcripts using *a priori* codes and emergent codes (Creswell & Poth, 2016). The *a priori* codes drew on my conceptual frameworks. I then uploaded a preliminary codebook to *Dedoose* software where I continued to review and revise codes and categories. I revisited the first three steps multiple times as I collected and analyzed data in a “loop” (Bassett, 2010, p. 504). Last, I identified patterns and themes and selected findings based on: (a) commonalities, differences, and relationships; and (b) their relevance to my research study.

Credibility and Trustworthiness

To ensure the validity of my research methods, I used triangulation, member checking, and a methodological journal. Triangulation refers to the “process of using multiple perceptions to clarify meaning, verifying the repeatability of an observation or interpretation” (Stake, 2005, p. 454). The qualitative questionnaire functioned as a secondary source of data. It allowed me to see if my findings were consistent. Second, I used member-checking which acts as “a quality control process by which a researcher seeks to improve the accuracy, credibility and validity of what has been recorded during a research interview” (Harper & Cole, 2012, p. 1). Participants had the option to review their transcripts. Last, I kept a methodological journal which helped me “step back” and “take a fresh analytic look” (Charmaz, 2014, p. 167). This allowed me engage in reflective practice by recording thoughts and perspectives on my data. Each of these allowed me to establish trustworthiness and credibility of my findings.

Researcher's Positionality

As a multiply-dis/abled light-skinned Latina, I recognize that while I share some identity markers with my participants, my experience differs in relation to my proximity to whiteness and white privilege. I do not claim to be objective or neutral because “scholarship – the formal production, identification, and organization of what will be called ‘knowledge’ – is inevitably political” (Crenshaw et al., 1995, p. xiii). In my professional career, I have worked within the non-profit industrial complex as a Direct Support Person (DSP).¹ While I have never formally registered with any institutions for supports as a dis/abled person, my experience as a DSP within the community college system exposed me to several issues dis/abled students encountered navigating higher education and led me to pursue this as a dissertation project.

Findings

I found several themes in locating students' experiences within the existing literature on dis/abled college students and BIPOC students. First, students in the study were hesitant or reluctant to identify as students with dis/abilities. In their counternarratives, students discussed feeling unworthy or undeserving of services, stigma, and imposter syndrome. Second, students encountered institutional barriers which prevented them from registering for dis/ability-related supports on their campuses. Students in the study identified how race positioned them differently and made it difficult

¹ The non-profit industrial complex (NPIC) refers to “a “set of symbiotic relationships that link together political and financial technologies of state and owning-class proctorship and surveillance over public political intercourse, including and especially emergent progressive and leftist social movements, since about the mid-1970s” (Rodriguez, 2004, as cited in Mananzala & Spade, 2008).

for students to register for support or obtain medical documentation. Third, students discussed experiencing exhaustion, frustration, and distress which I refer to as *dis/ability battle fatigue*. This term builds on Smith's (2004) and Smith et al.'s (2011) conceptualization of racial battle fatigue to consider how occupying multiple social locations impacted students' experiences on campus. Last, counternarratives highlighted the ways in which students in the study resisted majoritarian narratives and oppressive systems on campus. While all dis/abled students encounter structural ableism, and many of the policies and practices discussed here do not serve dis/abled students well, Black students and students of Color with dis/abilities already experienced marginalization by other institutional and marginalizing structures. Students resisted majoritarian narratives that they were less worthy or deserving and found alternatives to meeting their access needs outside of institutionally-sanctioned pathways.

Student Perceptions of Dis/ability

While the academic literature has focused primarily on stigma surrounding and disclosure of dis/ability (Barnard-Brak et al., 2010; Frymier and Wanzer, 2003; Wright & Meyer, 2017), students' counternarratives revealed complex and nuanced reasons as to why they were hesitant or reluctant to identify as dis/abled. Annamma et al. (2013), building on the work of David Connor, argue dis/abled BIPOC "are often positioned such that they are likely (and even encouraged) to reject identifying as disabled as something that is inherently negative and shameful" (p. 8). For example, Rodrigo, a Korean student at a public university and veteran of the marines, did not want to be labeled or perceived as dis/abled. Rodrigo had become multiply-dis/abled from his service. He stated:

I don't want to be labeled as disabled. I don't want anybody to see me as disabled, you know? That's why I do my best to just-just not cause a scene, I do my best to just go to school and leave. If I have headache so be it, it's my problem... Honestly, I don't like doing because when I do it I'm exposing myself, "Hey, I do need extra help. I am different and I can't do it on my own." You know? And that's- that's the exact thing that I'm trying to avoid... I don't want people to think that. You know, it's a prideful thing. Um, I just don't want people to think I'm disabled or that I'm handicap or whatever, so I don't really express it. I don't really talk about it. I don't. I don't tell anybody about it.

By rejecting dis/ability as a label, Rodrigo negated "stereotype threat," which refers to situations in which marginalized people are at risk of conforming to a stereotype or stereotypes (Steele & Aronson, 1995). Rodrigo's decision to not talk about or tell other people about his dis/ability insulated him from perceptions of helplessness and being othered. Rodrigo wanted to be perceived as independent and capable ("I can't do it on my own") and he perceived dis/ability as incompatible with this image. Stereotype threat emerged in other parts of Rodrigo's counternarrative as well. He shared a situation in which he felt judged buying a fifty-pound bag of rice from the grocery store:

And as I'm walking around I see, I start noticing people look at me. They're like, "Oh, wow. Let's see what he buys." Like, "Oh, of course he's going to buy a big bag of rice. He's Asian. Of course." And, you know, like, I started seeing that and I started sweating a little bit. So, I put the bag of rice down and I ended up buying four packs of bread instead.

Rodrigo navigated stereotypes threat in relation to his dis/ability and his racial identity on and off campus. Another participant, Micah, shared how these stereotypes were compounded. Micah was a non-binary Indian student who attended a private, predominately white institution. They had severe chronic allergies and illness and Tourette's syndrome. Micah explained how the model minority stereotype minimized and erased their experiences. The model minority stereotype "emphasize[s] the role of Asian

culture and Asian families in the success of Asian Americans” and was “used to exemplify the achievement ideology” (Lee, 2009, p. 7). Micah explained:

So, like, going back to my childhood, that was kind of like, I didn't know what was going on. So, I just assumed it was a normal thing that other people in the world experienced. This is what my parents told me, too. Like, “Oh, I'm sure some other kid out there has those problems.” And then I also felt the experience of like, “You have to keep going because there's other people that have it worse than you.” And so that was kind of like, kind of like, you know, the model minority idea of like, you just have these higher expectations just because you're the “respectable minority person.”

While Micah often missed school, they were still held to higher standards and expected to excel. Navigating expectations of being a model minority as well as respectability politics was stressful for Micah. They explained:

Like, I have a different form of stress. I validate [my parents'] stress, I know that they were stressed out to study and everything, they worked hard, but like... the amount of stuff I had to go through to even seem respectable, and even like know what I knew to help people. It was really difficult. And I didn't really acknowledge it for many years. Yeah, I always thought to myself later on I wish people knew what I went through. I wish people knew in general.

Micah's narrative revealed the ways in which they navigated multiple, and sometimes, conflicting, forms of marginalization. This led to Micah feeling isolated for several years.

Many participants felt a sense of “imposter syndrome” identifying as dis/abled. While imposter syndrome usually refers to “the feeling that, regardless of your accomplishments, you're still about to be unmasked as a fraud” (Bahn, 2014, para. 1), many participants experienced a similar sensation of being ‘unmasked’ in terms of faking their dis/ability. This fostered a sense that students did not belong or could not identify as being dis/abled within their institutions. Baudelaire, a deaf Mexican-American student at a large, public university explained:

Uh... I don't know [if I would say I'm disabled]. I don't know. 'Cause people are really trying to get that - really trying to change the meaning of word. Trying to make it more disabled – like *really* disabled if that makes sense... which I don't feel comfortable - I don't feel comfortable - um - calling myself disabled as in I fear I might get someone mad and say, “No, you're not disabled. I'm disabled or this person is disabled.”

While Baudelaire was registered for services, he still felt uncomfortable claiming dis/ability identity for himself.

Andrea, who identified as biracial and attended a public university, was not registered with the Disability Resource Center, but used counseling services on campus.

She shared:

I think for me, like, it's very hard for people to sort of believe that I struggle because I do, present very social and in this obnoxious way. Like, I guess I exhibit or I've been told that I exhibit like an air of confidence and strength that is not common for people with my diagnosis. So, it creates a lot of like imposter syndrome within myself.

This sense of imposter syndrome made it difficult for students to feel comfortable identifying as dis/abled. For Andrea, she did not present in ways that were expected of people who have her diagnosis. Expectations surrounding how students with mental health dis/abilities should present fostered a sense of imposter syndrome surrounding the legitimacy of her experience navigating campus as a student with depression and anxiety. Moreover, registering with Disability Resource Center did not necessarily lead to validating students' experiences.

Many participants shared they felt unworthy and undeserving of accommodations. They often compared their lived experiences with dis/ability to students with physical dis/abilities – who they perceived to be worthier of institutional support. Andrea explained, “I think most of us – most people classify disability as a, first and foremost, physical

disability.” Within Disability Studies and disability rights discourses, physical dis/ability is centered in scholarship and movement-building whereas intellectual and other stigmatized dis/abilities are more readily deployed to discredit and dehumanize marginalized groups (Pickens, 2019). This makes it difficult for BIPoC to categorize their experiences within traditional disability rights discourses which has historically centered whiteness and dehumanized BIPoC (Ben-Moshe, 2020; Puar, 2017). Micah shared:

And like when we think normative and normatively about disability, it's more so like, “Oh, I'm crippled. Like I have like a wheelchair with crutches.” You know, like, because I don't have that it's like I just never used, that was what was, I was told that's what disabled looks like, but like no one ever told me like, “Oh, I can, I'm still disabled regardless.”

Perceptions that people with physical dis/abilities were more deserving or more obvious beneficiaries of institutional support was also discussed in students' counternarratives. Susana was a Filipina student at large, public university with depression and anxiety. While Susana had struggled with mental health throughout her life, she did not seek support until community college and did not receive a formal diagnosis until transferring to her four-year college. Even with formal documentation and registration with her campus' Disability Resource Center, Susana still worked through feelings of deservingness and worthiness of support. She reflected:

I feel like I'm less deserving, right? And I had to kinda confront those ideas. Like, why would you feel like someone with more physical disability be more worthy? Or like, it totally makes sense that they go to the [Disability Resource Center]. Like, that's bad in and of itself... stuff. So, it's like, coming to my own thoughts about whether I belong or I deserve accommodations was its own thing.

Institutional Barriers to Access

Participants encountered several institutional barriers on campus. These barriers included difficulty registering for services and obtaining support. Registering for services presented not only financial, but also time, burdens. Moreover, the institution's power to define dis/ability reinforced rigid and static perceptions of dis/ability within an ability-dis/ability binary and perpetuated a hierarchy of dis/ability in which medical documentation institutionally 'legitimized' certain lived experiences of dis/ability while further marginalizing and disenfranchising others. In essence, the institution has the *power* to define a "student with a dis/ability" and what accommodations they deserve. While these barriers were not necessarily unique to dis/abled Black and students of Color, their experiences navigating these systems were compounded by the multiple forms of marginalization they already encountered within the institution. This included negative perceptions regarding students' self-advocacy efforts. While the literature often highlights self-advocacy as an important navigational tool for students with dis/abilities (Barnard-Brak et al., 2010; Karpicz, 2020; Terras et al., 2015), participants in the study encountered hostility and dismissiveness when they advocated for their access and support needs.

To register for services, students had to obtain medical documentation. Decades of research has documented the persistence and pervasiveness of medical racism, barriers in obtaining services and healthcare, and racial disparities in access to doctors and medical services (Ben-Moshe & Magaña, 2014; Feagin & Bennefield, 2014; Magaña et al., 2012). Some participants in the study often recounted having their medical documentation rejected by their campus' Disability Resource Center. Rodrigo was encouraged to register for

services by the dean following a negative interaction with a professor which escalated to the director of Disability Resource Center at his institution. While Rodrigo was told by the director that he qualified, he still needed to obtain and submit formal medical documentation. Rodrigo had previously obtained medical documentation from the veterans' hospital (VA) which he submitted to his campuses' Disability Resource Center.

He recounted:

So, I-I it wasn't enough that I submit my VA documentation form. They wanted doctors' letters, so I mean I don't know if you have any veterans in your family but if you do you're gonna know that the VA hospital is not a very friendly place. It's not, it's-it's a very time-consuming place, you're not gonna get any work done there. You're not gonna get an appointment, you're not gonna get anything done. So, trying to get a letter from the doctor was not going to work and then so it was a week-long battle of me talking to the director like, "Look, man. You don't know what the VA is like. Just accept this damn letter as proof that I have headaches – that I have sleep problems." And then, finally, you know, she was like, "Ok, I'll accept it."

While Rodrigo had submitted medical documentation, his campus rejected his documentation. Acquiring letters would have required Rodrigo to schedule appointments to the VA hospital – a lengthy and difficult process.

Marisol, a biracial student who attended a large, public university, had her medical documentation rejected by the Disability Resource Center multiple times. Despite having multiple dis/abilities which evolved from childhood cancer, she had difficulty obtaining acceptable documentation to register. She shared:

So, I made an appointment and that was with one of the advisors, the intake advisors, and just when I went to check in she was very rude, the girl at the front, but when meeting with him, I brought all my paperwork and to him it was like not sufficient in his book like, "Well, this is not much of a disability." I'm like, well, how – I mean to me I felt like, "Who the hell are you going to tell me what a disability is or not because you work here?" Um... I was really discouraged to even go back and get any further documentation cause my doctor's like – I haven't seen

my primary doctor in like forever. They know my history. They know what I've dealt with. Um, so I'm like, "Do I have to walk on a walker? I mean, what is classified as a disability? Do you guys only do physical disabilities?" – which I have one, but may not be, you know, obvious to you know to the naked eye... Um, he was very discreet in what he was willing to tell me and I felt like it was just cat and mouse game like... Like, if I tell you too much you're gonna go – kinda like create something that doesn't make sense.

Marisol uses "cat and mouse" as a metaphor for her experience with Disability Resource Center. Rather than the intake advisor being direct about what constitutes a dis/ability, Marisol describes him as being discreet which she interpreted as an unwillingness to share necessary information. Not only was the advisor ambiguous about criteria to register, he was also dismissive of her lived experiences with dis/ability. In response, Marisol rejects this interpretation of her lived experiences and the positioning of staff in Disability Resource Center as being knowledgeable because of their work on campus. In other words, she asserts herself as a knowledge-holder. She continues:

So, I was, I went right back up again and he's like, "Well I'm only going to give it to you for a month and a half. You need to come back again and do another orientation, um, another interview, for – with the documentation," which really pissed me off cause I'm like, "Now I have to go make another appointment with my doctor." She wanted me to go see a therapist for depression because my documentation said I had chronic depression. Um, and I said, "I just find it ridiculous that I'm not gonna drive' cause I live in [a different county]. I'm not driving all the way to [campus] to see any of your guys' therapists at all." Um, I don't hear much of the services anyways. I felt like I was just put in like in this loophole like, "You gotta be this to do that, you gotta do that to do this" and I'm like, "Are you kidding me? What more do I need?" I mean the stamp thing was [a] certified stamp, the whole nine yards. So, I came back and got more documentation and then the next advisor tells me, "Well, this has to be like we have to show the terms that this is chronic." So, now I had to go to my neurologist, which I have a specified neurologist for and have her write something now, in addition to what my primary doctor wrote, saying about the cataclysmic anxiety attacks, epileptic seizures, um, and finally they said, "Okay, that was permanent." And I'm like... I couldn't believe it took one full semester or one full quarter to get accommodations because you guys are putting me through a freaking ringer.

Marisol provides multiple types of documentation which are rejected by the advisors at the Disability Resource Center. She describes these barriers as encountering “loopholes” (e.g. documentation does not indicate her dis/abilities are chronic or permanent) which disqualified her from registering for services. When I asked Marisol what she thought the issue was, she stated:

‘Cause I feel like people take it- I mean one again I feel like I-I- I hate to pull the race card out but I pull it out because I feel like sometimes it's necessary. I feel like we're so, uh, profiled at- I'm half-Black half-Mexican, you know, and I just feel like sometimes we're just viewed completely different in whatever resources aren't allocated as they should be. My dollar is just as good as your dollar. I don't care what color you are. You know you can't sit here and judge me based on what I say in my disability and think I'm just an illiterate you know biracial person or ‘illiterate Mexican’ when you know my mom has a degree, and like all other than myself and my little sister are the only ones, they all have PhD degrees.

Marisol emphasized being profiled, or racialized, as ‘illiterate’ constrained her ability to obtain accommodations. Research has documented that Black students and students of Color navigate racist stereotypes including perceptions of academic or intellectual inferiority and incapability, beneficiaries of affirmative action, criminality, documentation status, and so on (Fries-Britt & Turner, 2001; Feagin et al., 1996; Harper & Hurtado, 2007; Pérez Huber, 2010). Marisol’s counternarrative revealed how racialized perceptions of ability positioned her as intellectually inferior.

Tiffany, a Black female student at a large, public university who had a traumatic brain injury and speech impediment, had a similar experience to Marisol. The Disability Resource Center rejected Tiffany’s medical documentation because her doctor had indicated she was not severely dis/abled. When I asked her if she had considered why this happened, she stated:

I think it's because like [the Disability Resource Center] thought I was cheating like I didn't deserve to be given the extra amount of time, or, you know? Like, 'cause you look at me and you don't think I'm - nothing's wrong unless you see me walking or my hear me talking - hear me talking you might think but just at face value like just looking at me you don't think that I'm disabled so they think like she's, you know, getting over on disability, you know?

Tiffany emphasized how she was perceived by Disability Resource Center staff as cheating or undeserving of accommodations. She echoed this in other parts of her interview as well: “Like if I wrote fast, if I could move fast, I would not need y'all, I promise. Like I'm not trying to get a free ride, you know?” In these excerpts, Tiffany's use of ‘getting over on’ and ‘free ride’ are not race-neutral. Both of these phrases are racially coded language. Within higher education, BIPOC often contend with affirmative action master narratives which position them as unqualified or as being admitted on the basis of race rather than academic merit (Vue et al., 2017).

Racialized perceptions regarding merit made it difficult for students in the study to self-advocate or disclose their dis/abilities without being perceived as having ulterior motives. Kennedy, an African American student with cognitive processing disorder at a private, Christian college, shared an experience she had with a professor on campus. While Kennedy had been in special education during elementary and middle school, she had advocated to be placed in mainstream classes for high school and had not received services since. After doing poorly on an exam, Kennedy reached out to her professor and disclosed that she had a learning dis/ability. In the academic literature, self-disclosure of dis/ability is considered an effective self-advocacy strategy (Barnard-Brak et al., 2010; Karpicz, 2020; Terras et al., 2015). However, many participants experienced resistance and hostility from

faculty and staff when they disclosed or advocated for their access needs. Kennedy recounted:

Well, it was just like right off the back where she was like, “So, do you have a learning disability? Is that diagnosed?” And I'm like, Yeah, like I had a whole IEP when I was in elementary school did the whole like school psychologists with the tests and everything like, I didn't make that up like I don't think anyone would ever come into your office hours to make something like that up. Um, so, yeah. don't know if she... Her personality is really hard to read. I think from her standpoint it was maybe like, she was thinking that I was trying to find a cover as to why I did so bad or trying to find a cover for, like, oh, maybe I wanted to retake the test or something like that. And that was definitely not the case. I went in there so I could understand, like, so how do I move forward to do better on your tests next time? And I think instantly, she just thought like, I'm just trying to make something up. And just to like, benefit me or I guess like pity myself. So, then she can like grade me easier, which was definitely not the case. I strictly went in there so I could know like, what to do better. But that's kind of what I thought because I was also thinking the same thing. And the only thing that I can conclude is maybe that she thought I wanted extra time or pity or anything like that.

Dis/ability Battle Fatigue

Many students discussed their interactions on campus with faculty and staff as “battles” or “fights.” As discussed throughout the findings, dis/abled Black students and students of Color often had to navigate perceptions that they concocted their dis/ability in order to “game the system.” Even the process of requesting accommodations or sharing their dis/ability (often referred to as ‘disclosing disability’) with faculty could be exhausting. These experiences led to students experiencing burnout. Elsewhere, the term “racial battle fatigue” has been used to describe the “emotional, psychological, and physiological distress” that results from experiences with racism (Smith et al., 2011, p. 64). I extend this term to consider how navigating and intersecting and marginalizing systems resulted in dis/ability battle fatigue. While white dis/abled students also have to navigate ableism, dis/abled Black students and students of Color navigate other existing institutional

barriers which compound their experiences with ableism. For students in the study, this resulted in feelings of exhaustion, frustration, and distress and led to some students not using dis/ability-related supports or rejecting services altogether.

Some students discussed the process of navigating accommodations as being exhausting or tiring. Baudelaire, who was registered but had not used accommodations through the Disability Resource Center, found the process “exhausting.” When I asked him if he was comfortable requesting accommodations, he explained:

Um... comfortable, but kind of - uh - exhausting because I have to say the same lines over and over and they usually respond with the same questions and it's really exhausting. Well, it obviously doesn't happen continuously but having that habit of having to constantly do that. It's like... I usually try not to tell them unless I really need to 'cause - uhh - 'cause often times they'll sort of respond with go to [the center] for accommodations and what not and... standard protocol with the - with the - the respon[se].

Participants shared that faculty often redirected them to the Disability Resource Center. Even when students went through the Disability Resource Center on their campus, this process could still lead to exhaustion. Students also shared that accommodations were difficult to use which discouraged some students from using them at all. Rodrigo shared the process with me:

Bro, so what happens is at the beginning of the semester you have to go to the [Disability Resource Center] website and then you have to click on the classes that you want accommodations in so it defeats the whole purpose of being disabled because you have to manually go in and say, “I want disabilities services for this class.” It should be automatic. It should be automatic every semester but every semester you have to go in and select which classes you want disabilities in and when you click which classes you want disabilities in you have to click which accommodations you want in that class. Such as you want front seat, you want note taker, you want extra test time. It's like, why can't you just make it automatic and assume you need everything, you know what I'm saying? Yeah and so, if you don't do that you don't get disability accommodations for the rest of the semester. If you do it too late you don't get it. You don't get anything. And on top of that every

exam that you have you have to schedule at the [Disability Resource Center] lab so you have to go back in the website and schedule two weeks in advance that you're gonna have an exam. And then and then now when you do that the professor ends up getting an email that you rescheduled something and then they send the [Disability Resource Center] lab a copy of the exam and now the [Disability Resource Center] you know they'll take the exam and they'll put it in a folder and then you'll - you'll go over there and you'll sign in and then you take the exam and then and then you know what kind of defeats the whole purpose of it, they give you the exam back and have you walk it over to the professor and give it to the professor in class and in an envelope that says [Disability Resource Center].

Rodrigo's counternarrative reveals how the accommodation process was often lengthy and difficult. Rather than being able to request accommodations automatically, the Disability Resource Center required Rodrigo to request accommodations each term for *each class* manually. This practice is common on college campuses. Rodrigo continues:

So now you have to walk into class after the exam is over, go up to the instructor and hand them an envelope with you know those yellow orange envelopes with the letters [D-R-C] on it. In front of the whole class, you know I see students do this all the time. I know exactly who is getting [Disability Resource Center] accommodations in class because I see it every time there is an exam. Defeats the whole purpose of it. I mean it doesn't defeat the whole purpose, but it kind of - it kind of um, makes people who have low self-confidence or who really despise humiliation do something like that and this society everybody is judgmental and, you know, like nobody wants to be judged. Like, that's my thing. I just want to be off the radar. That's why I go to school and I just come back. I don't engage. I don't talk about anything. The less I'm known out there, the less they talk about me. So, you know so that's-that's absolutely beautiful. I don't like creating scenes or being known. I don't want to be known about anything. I just want to disappear from everything. That's essentially what I just want.

Not only was the accommodation process arduous, but Rodrigo also felt that it discouraged students with low self-confidence from using the Disability Resource Center because it exposed them to judgement or humiliation. While Disability Resource Centers guarantee confidentiality to students, some of the procedures made them highly visible which, as Rodrigo explained, "defeated the purpose" of confidentiality. As Marisol explained,

Um, there's no nothing discreet about that program whatsoever. Or there's no way to – there's no confidentiality of the students that need the assistance because the professors put you on blast of the students like, “Hey John Smith over here needs notes to be taken. Can you- Who wants to volunteer to take cl-, uh, notes?” And I actually dropped a class for that reason ‘cause [the professor] totally put me on blast, so I was like, “Screw this, I’m outta here – I can’t do it.”

Marisol describes how this process often made students vulnerable to being “outed” which was antithetical to confidentiality. Being “put on blast” made students with dis/abilities highly visible in the classroom, and sometimes discouraged students from using accommodations in the future.

Faculty often redirected students advocating for their needs to their campus’ Disability Resource Center. Even when faculty did informally accommodate students, they often did so in a way that shamed students access needs. Alex shared:

Yeah, exactly. Yeah, so during like my sophomore year, like in one of my, like, my linguistics classes, I told like, my professor that, you know, “Hey, like, you know, I’m just having like a really difficult time right now, like, is it possible that I’ll be able to get an extension on my midterm assignment?” And then she was like, “Oh, like, you know, of course, I just need to like – you just need to like, provide me like a letter saying that you’re like, receiving treatment or whatever, the, you know, whatever place that you’re receiving treatment from.” And so, yeah. So, like I was like, “Okay, fair enough.” So, then I like turned in my assignment and I turned in like my paper with like the note and then I think she like said to me, “Okay, well,” she was like, “You know, Alex, next time if you feel like you’re going to – if you like need an extension, like try to like, let me know ahead of time.” ‘Cause I like literally let her know, I think like, like a day before, like the paper was due-... And I’m just like, that’s not how it works, but okay. Like, I can’t, I literally can’t let you know ahead of time, you know, it’d be ideal if I could, but I can’t predict how I’m going to be feeling like one day to the next. So, yeah. That again, left like a bad taste in my mouth just because I’m like, okay, you clearly don’t understand how like, you know, mental health works. because, you know, some days I just might feel really shitty and it’s like, you know, I can’t like let you know ahead of time. I think you just need to kind of like work with me and just like, don’t ask questions, don’t probe, just be like, okay, just like, you know, just when is like a good time for you to like turn into this. I feel like if she left it at that, then it would’ve been like, fine, but, yeah, her making that comment just rubbed me the wrong way.

Alex's counternarrative reveals the ways in which faculty can be disconnected from the realities of dis/abled students who are often unable to predict when they will need an extension, miss class, or other accommodations. While advocacy is generally perceived as an important quality for undergraduates, and dis/abled students in particular, students in the study often recounted negative experiences when they reached out to faculty or staff directly.

For other students, interactions with staff on campus led to frustration, and in some cases, breakdowns. Marisol shared her experience registering with the Disability Resource Center which was lengthy and overwhelming. She explained:

I felt like they didn't believe me. Honestly. I think that's what it was. And I told my friends because she was gonna do it too and she's like, "If they're putting you through that shit, I'm not doing it" and... I sat and cried to my professors because I felt so overwhelmed with everything going on. I just felt like it was my first quarter there, you know, and it's not that I'm such a cry baby, but I was just like I've never felt this much of anxiety going to school because everything was coming like this (snaps fingers). I mean, I'm used to semester not a quarter system. I'm having a hard time, you know, keeping up, I'm not used to a lecture hall 300 students and that's how it was for some of my classes. So, not having a note taker and trying to write everything down my hand is, like, my hand is in so much pain obviously. So, I finally was like, "Well, hell. I have no services. Could you guys put me on a so-called temporary service?" and I finally went to the disability lady and I said, "Look, I just broke down crying" and I think at that moment she's like "Okay, I see you're overwhelmed, just get me this so I can put you on permanent disability." And she put me on permanent disability. And I'm like, "This is crazy." So, I had to go back to my professors. Two of them let me take my exams like a couple days later 'cause I just I broke down. I couldn't even talk. I broke down, like, "Look, this is just too much for me and if you guys can't accommodate I totally understand. I'm out of here." 'Cause I just-I felt like I had no voice like, "Who's gonna help me out here?" like I'm struggling. I-I mean I don't want the red carpet treatment but I'm looking for somebody to help me out so I don't quit, I mean I've come this far.

Marisol had transferred from a two-year institution and, at the time of study, aspired to eventually attend law school. Transferring from a two-year to a four-year college is a

significant transition. Without accommodations, this process was even more overwhelming for Marisol. Despite providing multiple forms of medical documentation, the resource center would not allow Marisol to register for services. Only when Marisol became visibly overwhelmed did the Disability Resource Center believe her dis/abilities had the effect she said they had.

Tiffany also had difficulty with staff at the Disability Resource Center. She frequently described her encounters as having to “fight” them about her dis/ability. Like Marisol, Tiffany had provided documentation but was denied services initially. She explained:

Yeah. Most like - well, I feel like now between me and my, uh, what do you call? My counselor. I feel like now she's a little bit more passive. Our-our interactions are a little bit more um nice, but I felt like at first, I-I was like having - not fight with her - but almost like because I'm like, "I'm really disabled, like, do you guys want to see my original um hospital documentation?" Like, I'm really disabled like, you know? Like, I'm not acting like I'm disabled. I even asked to speak with um a supervisor or you know someone who is the head of the department and I left a message, she never called me back. I spoke with someone else, I think his name is called Adam, so I was doing a lot of interactions with him at the beginning of this [term], but it was just like almost like not rude but like that whole interaction from the front desk receptionist to him it was just like bad vibes like it was like I was in trouble all the time and I was like, I don't want to deal with that. I'm grown. Why am I putting myself through this, you know?

Tiffany's counternarrative demonstrates the emotional and psychological distress of navigating a hostile campus climate. This was compounded by the difficulty of navigating coursework. She explains:

Just uhh it all [laughs] like all of it like the memorization, the speed, the writing. This whole thing has been very hard like school was hard especially for me. I felt like I have everything against me as far as like my mental disabilities and my physical disabilities. I feel like I have every reason to stop and not go to school like writing, reading- well, reading is OK but if I read a lot it's like kinda sketchy cuz I have a speech impediment, so yeah. This whole thing is exhausting.

Student Resilience and Resistance

Students engaged in acts of resistance that were “less public, less overt, and not readily observable” (Solórzano & Villalpando, 1998, p. 218). The establishment of Disability Resource Centers on college campuses is based on a legal rights model which views university-sanctioned accommodations as the only legitimate process pathway for accessibility. Other pathways, such as reaching out directly to faculty are discredited – even when these other tactics yielded better results for students. In response to institutional barriers and an inaccessible campus, students developed navigational tools such as the use of informal and unsanctioned accommodations.

Many students recounted going outside of the Disability Resource Center and directly to professors to ask for support. This tactic gave some students agency in determining how much they wanted to disclose to professors, access to confidentiality, and the ability to ask for specific supports not offered by the Disability Resource Center. Susana recounted a positive experience she had reaching out to a professor directly for an extension:

So, just with this professor, just with her, when I took her class the first time and I was behind on assignments, you know, she was very open and accepting about trying to still work through my depression and anxiety. And she opened up about how she's had to work through depression herself... And so, she really empathized with me in telling me I'm not alone. She was like, do you want me to walk with you to [the counseling center]? I can walk with you... She was like well, we can extend it to this date and we'll work from there. She even had like, little anxiety tools in her desk. A little fun box of stuff. it was like here you can play with this while we talk.

While not all students had positive interactions when they reached out to faculty directly, and they were sometimes redirected back to the resource center, requesting unsanctioned

accommodations was a strategy that worked well for some students. Rodrigo had only used the Disability Resource Center four times before he stopped using them entirely. He shared an experience he had emailing a professor to ask for support directly:

Um, so I had one instructor... and I emailed him in the beginning and I-I told him like, "Hey look um, I'm going to be straight with you, and if you want, I'll bring all the documentations to your class. To your office. Um, but down and dirty, I had bad experiences with the [Disability Resource Center]. I don't want to use them. I get headaches and you know so on and so forth. Please, you know, like I skip class it's not because I'm doing it on purpose cause I-I don't feel well or whatever. I'm really interested in the math program. Why would I skip learning about math?" And then, I told him that and he's like, "You know what, I'm really sorry you're going through all these things, but email me if you feel something wrong. Email me if you want to um, if you feel more comfortable the exam in my office after class." You know, things like that and-and doing that, it actually made me feel a lot better about because just the professor I mean he decided to do he decided to treat me confidentially as a disabled student and it really helped because I would go into his office and I would take the exam and you know students would still come into the office and ask questions or whatever and [he] would just would just be like, "Hey um, I know you like-like you're taking an exam and if the noise is too distracting I can have you step over here. Go into [the other professor's] office and I'm sure he won't mind but you can take the exam in there. And like-like he didn't say like, "Hey guys, keep it down I have a disabled student taking an exam." He didn't say anything like that he was just like, "Hey I know you're taking an exam. like like-like, you know, like if its distracting please let me know" and I think that really helped a lot versus, you know, that one student uh, professor when [the other professor] was like, "Hey [student], can you please move? He's got a hearing problem. I need him to sit up front." Like, come on, man...

For Rodrigo, reaching out directly to allowed him to access what he needed: the ability to miss class and take exams in a quiet place. In addition to headaches, Rodrigo also had insomnia. The Disability Resource Center did not have an accommodation to excuse class. Rodrigo explained, "They didn't accommodate that. They even said we don't accommodate insomnia." Reaching out to the professor allowed Rodrigo to identify what would best support him the classroom and meet needs not accommodated for by the institution. It also allowed Rodrigo to maintain confidentiality which was important to him.

Growing up, Micah had a very limited diet because of their severe food allergies. College provided them with opportunities to socialize and eat out with friends which could present certain challenges because of their dis/abilities. Following an incident in which they went into anaphylactic shock on campus and were hospitalized, Micah created a card which had their food allergies listed on them. They used the card at restaurants because the process of listing their allergies could be “socially draining,” particularly in situations where they might not encounter that person again. The card gave Micah autonomy. Micah explained, “But like... Just having all this listed out, not only validates- it's very validating to have it listed out, show that this is pretty much the cumulation of my twenty years of living.” While Micah often expressed that they “had no control over [their] body,” the card allowed them to position themselves as having experiential knowledge and being a knowledge-holder.

Participants also discussed resilience in their ability to persist in higher education despite institutional barriers. Tiffany identified being tough and resilient as strengths. Rather than her resilience being individualized, she located it within her family as generational. She explained:

Just I feel like a tough exterior, a tough personality. You know, I can do this, you know? Being able to be resilient, you know? I feel that that's a major strength that is probably my only strength like my resiliency and the fact that I'm so determined definitely a good - a good attribute or that I would say that I had, yeah... From where I was raised and, you know, my m- I would- I wouldn't strongly say that it's a genetic trait that you have but I would say that genetically like my mom, my grandma, yeah... My mom, who gave me away, she was actually given away too. So, it was actually like a generational - and like, my grandma, who gave my mom away, she actually faces mental um issues like schizophrenia and stuff, like, we don't even know where she's at because she's like, you know.... going through her thing, but, like, it is a generational strength that I think I have, you know? That is still backing me up here.

While Tiffany grew up with another relative, she recognized her strength as coming from both her biological mother and grandmother. This generational strength as well as her spiritualism were a part of Tiffany's resilience.

Other participants also referenced their spirituality. Bea explained how spirituality allowed her to be in touch with herself and shaped her perceptions of diabetes. Bea, like other participants in the study, aspired to help others. She shared:

So, just being very thankful, remaining optimistic and when things get hard to not damn or be like, "Why me?" Just to kind of be like, "You know what, God, it's in your hands. You give your toughest battles to those that can handle it." And I'm also very well aware we are not all cut with the same scissor and that's okay. Some of us have tougher cuts than others and that's okay. So, just spiritually being very in touch with myself, with my family, with my blessings, with my *raza*, like, my community, it's very important to me. Being Latina is very important to me. Empowering others is very important to me. Being an ally to a vulnerable population is very important to me. Whether that vulnerable population be students with special disabilities or people system impacted or, like, wherever I can kind of empower someone's life, that's very important to me or, like, make someone's life better, that's very important to me. I think my diabetes is just something I have to monitor in order for I to be there to help people.

Bea explains how her identity as Latina, her spirituality, and being an ally to marginalized people, allowed her to persist.

In their counternarratives, students also reimagined accessibility within their institutions. Alex recognized compassion as an important element in removing social barriers on campus. He shared,

I would say, the main thing that I would want to tell them, like, you know, professors and let's just say staff members and things like that is that, just be open. Like whenever a student like approaches you with like a concern or anything, I think, don't be dismissive of it. I think, you know, we're now getting to the point where students are starting to learn that, like, you know, coming to others for help is okay. And I think we want to continue that trend. We want to continue that cycle where we all like lean on each other, not just in these like pre-made dynamics of

like student to professor, like student to administrator, student to student. Like, I think I would want to emphasize that if we are able to like connect to each other on like a person to person basis and I think truly like, you know, we can be more compassionate. We can be more like, you know, understanding of why, you know, people need different things in order to be successful. And I think if you can, if we like attach to those other social labels, like, “Oh, I'm a professor,” then it's like sometimes you might not take it upon yourself to really make that accommodation because they're like, “Oh, my main emphasis is this research, not like trying to like baby these students who need like different things.” I think, you know, if you see this person as like a friend or as like someone you have like a relationship with who's like struggling, I feel like of course you'd go out of your way to like try to help them. So, I would encourage people to remove like those social barriers and just see each other as like individuals and I think that way it'll help them be more empathetic and compassionate whenever someone needs help in any shape or form.

Discussion

While the number of dis/abled students in higher education has increased over the past several decades (Snyder & Dillow, 2019) this has not led to systemic change within institutions. As Ben-Moshe (2020) explains:

Demands for inclusion of people with disabilities in employment or education do not critique or change the system of exploitative racial capitalism or the settler ableist system of education but only expand it to fit more people... which increase[s] the scope of harm. (p. 10)

Higher education has primarily focused on reformative measures such as the establishment of Disability Resource Centers to meet the needs of an increasing number of dis/abled students on college campuses. Rather than challenging ableism, these policies and practices reinforce the status quo and exacerbate existing inequalities. Moreover, without intersectional analysis, we fail to examine and understand how institutions further harm those who are multiply-marginalized.

Students' navigated several institutional barriers on campus including difficulty registering for Disability Resource Centers and using accommodations. Requiring students

to register to receive support is an oppressive practice which privileges some experiences of dis/ability while excluding others. Institutional definitions of dis/ability are not apolitical as “no language regarding disability is neutral” (Pickens, 2019, p. 8). The counternarratives of Dis/abled Black students and students of Color reveal how dis/ability identity is not objective; participants were often subjected to subjective interpretations of what constituted a legitimate (i.e. recognized) dis/ability. This process of legitimization reinforced a false hierarchy which delegitimized and discredited the lived experiences of students unable to obtain or who had rejected institutional recognition.

While these practices harm all dis/abled students, multiply-marginalized students experienced other forms of institutional harm which compounded their experiences with ableism. As discussed previously, medical documentation is not a race neutral practice. Within higher education, access has focused on infrastructure and classroom accommodations without serious consideration of who has access to healthcare or who can safely identify as dis/abled. Students in the study also had to navigate racialized perceptions as to why they were using accommodations. Students, however, developed alternative navigational tools to navigate racist and ableist structures.

Without an intersectional analysis of dis/ability in higher education, we will continue to reproduce inequality and further disenfranchise those ‘on the margins’ (hooks, 1989). Specifically, discussions of dis/abled students will continue to center unmarked whiteness and invisibilize the experiences of multiply-marginalized students. To deconstruct racism and ableism, the experiential knowledge of dis/abled BPOC must be centered. We must shift our understandings of dis/ability to allow for nuance and recognize

the ways in which whiteness are privileged in institutional understandings of dis/abled realities. The experiential knowledge of dis/abled BPOC is essential to creating equitable and liberatory spaces for all dis/abled students.

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Chapter Three:
Racist Ableism in Higher Education

Introduction

Othering of individuals and communities on the basis of ableism has a long history in the United States. Previous theorizing and research on ableism – oppression on the basis of dis/ability at the individual and systemic level – has focused on the experiences of dis/abled people and communities (Baynton, 2017). More recent scholarship considers the ways in which dis/ability has oppressed other marginalized groups, including Black, Indigenous, and people of Color (BIPoC) (Annamma et al., 2013; Annamma et al., 2015; Baynton, 2017; Schalk, 2018). State and federal governments have long used ableism as justification for restrictions and bans on immigration, the removal of reproductive and other rights, and incarceration and institutionalization (Annamma, 2017; Baynton, 2017; Pickens, 2019). This legislation utilizes ableist beliefs, e.g. intellectual and/or biological inferiority, to target and (re)perpetuate harm and violence against BIPoC communities. These policies and practices, however, do not exist in a vacuum, and are propagated by discourses which link ability and whiteness. Pérez Huber (2011) defines discourses as “the institutionalized ways we perceive, understand, and make sense of the world around us” (p. 382). Discourses concerning race and ability reinforce the relationship between hegemonic whiteness and ability through the pathologization of BIPoC communities (Annamma et al., 2015; Baynton, 2017). In this chapter, I seek to understand the particular ways in which race and dis/ability intersect. I use the term *racist ableism* to theorize how racism and ableism have been operationalized over time as a key function of white

supremacy. White supremacy is understood as an overarching ideology deployed individually and institutionally to protect and privilege white people and whiteness at the expense of Black, Indigenous, and people of Color (Bonilla-Silva, 2001). While I focus on how racist ableist discourses have become institutionalized broadly, I am interested in how higher education institutionalizes discourses regarding race and ability and the impact they have on the day-to-day lives of dis/abled Black students and students of Color in the form of racist ableist microaggressions. I discuss how regardless of students' particular dis/ability labels (e.g. traumatic brain injury, chronic food allergies), their experiences were largely based upon racist ableist discourses which: (1) reinforced negative stereotypes and assumptions regarding intelligence, capability, laziness, and deviance; (2) complicated BIPOC students' lived experiences with dis/ability by attributing difference to racial differences; and (3) often made it difficult for students to request dis/ability-related support from faculty and staff on campus.

Overview of the Study

Extending Critical Race Theory and Dis/ability Critical Race Theory, I theorize about the ways in which racism and ableism are intertwined in higher education. I build on Perez Huber et al.'s (2008) framework of racist nativism to consider how higher education racializes discourses of ability and dis/ability, like those of nativism and xenophobia, and consider how these discourses shape the experiences of dis/abled Black students and students of Color on college campuses. I argue that these discourses are institutionalized as 'legitimate' knowledge in higher education and perpetuated through racist ableist microaggressions which position Black students and students of Color with and without

the lived experience of dis/ability as intellectually and academically inferior, lazy, and deviant.

Higher education has been pivotal in legitimizing and institutionalizing eugenic and other racist ableist discourses (Dolmage, 2017). While the role of colleges and universities is well-documented, research on dis/abled BIPoC does not contextualize this history nor its impact on policies and practices on campuses today. I center the counternarratives of ten dis/abled Black students and students of Color. Specifically, I build on racial microaggressions research, and extend racist nativism, to consider the types of racist ableist microaggressions students encounter in higher education. I argue that racist ableism permeates discourses which link race and ability, and that these discourses shape the daily lives of students in the study. Specifically, I consider how discourses of *intelligence and capability* and *laziness and deviancy* manifest as racist ableist microaggressions on college campuses.

Theoretical Frameworks

In the following section, I introduce Critical Race Theory, Dis/ability Critical Race Theory, and racist nativism before discussing how they influenced my framing of racist ableism. Critical race theory (CRT) emerged from the critical legal studies (CLS) movement of the late 1970s and early 1980s (Crenshaw et al., 1995). While foundational to the development of critical race scholarship, CLS was critiqued by scholars for its narrow analytic lens which did not thoroughly engage issues of racial domination nor discuss transformation of oppressive systems (Crenshaw et al., 1995; Delgado & Stefancic, 2017). CRT emerged in response to these limitations, and built on liberal civil rights

scholarship, to challenge ‘color-evasive’ ideologies which upheld institutionalized racism and white supremacy (Crenshaw et al., 1995). Color-evasiveness, a conceptual term which expands upon ‘colorblind racism,’ “acknowledges that to avoid talking about race is a way to willfully ignore the experiences of people of color, and makes the goal of erasure more fully discernible” (Annamma et al., 2017, p. 156). CRT scholars center race and racism in analysis, and its impact on Black, Indigenous, and people of Color (Crenshaw et al., 1995; Delgado & Stefancic, 2017; Matsuda et al., 1993). In the 1990s, CRT scholarship was extended into the field of education (Ladson-Billings & Tate, 1995).

Subini Annamma, David Connor, and Beth Ferri developed Dis/ability Critical Race Theory (DisCrit) as a branch of CRT and as a theoretical and conceptual framework which allow researchers to consider the relationship between race and dis/ability as socially constructed categories (Annamma et al., 2013). DisCrit traces its epistemological foundation through a genealogy of scholarly and other bodies of work outside academia by both scholars and people of Color and/or with dis/abilities – including those with the lived experiences of dis/ability, but who may have not identified as dis/abled (Annamma et al., 2013).

DisCrit bridges scholarship from Disability Studies and Critical Race Studies to examine the ways in which racism and ableism work together (Annamma et al., 2013). Within this framework, people who occupy multiple spaces of marginalization are centered, and their counternarratives are highlighted (Annamma et al., 2013). DisCrit acknowledges how racism and ableism have shifted temporally in both historical and legal contexts and the impact these constructions continue to have today (Annamma et al., 2013).

It also recognizes the ways in which marginalized people and communities have resisted systems of oppression (Annamma et al., 2013). While racism and ableism are centered in analysis, DisCrit recognizes the ways in which they are interlocked with other systems of oppression (Annamma et al., 2013). Building on Harris' (1993) framework, whiteness and ability are recognized as forms of property which protect the rights of white and able-bodied people (Annamma et al., 2013). This maintains ideologies of white and able-bodied supremacy (Annamma et al., 2013).

Last, I build on Pérez Huber et al.'s (2008) framework of *racist nativism*, defined as:

the assigning of values to real or imagined differences, in order to justify the superiority of the native, who is perceived to be white, over that of the non-native, who is perceived to be People and Immigrants of Color, and thereby defend the right of whites, or the natives, to dominance. (p. 43)

Racist nativism extends CRT and Latino Critical Race Theory (LatCrit) to examine the interconnectedness of race and immigration status (Pérez Huber et al., 2008; Pérez Huber, 2011). LatCrit, another branch of CRT, is a “lens through which to analyze Latinos’ multidimensional identities and can address the intersecting issues of racism, sexism, heterosexism, classism, and other forms of oppression of Latinos more appropriately than CRT” (Villalpando, 2004, p. 43). Racist nativist discourses construct and institutionalize stereotypical beliefs regarding citizenship which reinforce standard English hegemony and dominance (Pérez Huber, 2011). Pérez Huber’s foundational work on this topic was crucial in conceptualizing racist ableism which allowed me to consider the ways perceptions of race and ability marginalize and subordinate Black and students of color.

Together, these frameworks were useful for examining how discourses of race and ability are pervasive. First, these frameworks allowed me to analyze dis/abled Black and students' of Color identities through an intersectional and multidimensional lens. Second, understanding their experiences as multidimensional, I was able to identify how their experiences with structures, policies, and practices were compounded by the multiple and intersecting forms of institutional oppression they navigated. Third, I was able to identify racist ableist discourses, such as racialized perceptions of intelligence, and the impact these discourses had on students' everyday lives.

Racist Ableism

Racist ableism bridges CRT, DisCrit and racist nativism, to describe how particular forms of ableism, informed by racist attitudes and beliefs, oppress and dehumanize Black, Indigenous and People of Color (BIPoC) based on actual or perceived (or, inversely, lack of perceived) dis/ability, thereby reinforcing the relationship between whiteness and ability.² This study considers dis/ability, like race, as “socially constructed by people’s thoughts, words, and physical manifestations (such as the built environment)... [so that] ways of defining human experiences... take on cultural and historical meaning” (Ben-Moshe & Magaña, 2014, p. 106). Following DisCrit, I use dis/ability with a slash to highlight the fluidity of dis/abled identities and disrupt binaries of ability and disability (Annamma et al., 2013). Similar to racist nativism, racist ableism is based on perceptions of dis/ability rather than lived experience or an individual’s particular diagnostic label(s).

² This is a working definition which emerged during conversation with Dr. Rita Kohli following my oral exam and in later in-person and email correspondence.

Racist Ableist Discourses

Racist ableism, as a theoretical and conceptual framework, allow us to consider: (1) the specific ways in which ableism becomes racialized through discourse and name them; and (2) how constructs of “ability” (white) and “dis/ability” (BIPOC) have been used to exclude, dehumanize, and oppress BIPOC, while defending “Whiteness and Ability as forms of property” (Annamma et al., 2015, p. 24). As Baynton (2017) explains, “[a]rguments for racial inequality and immigration restrictions invoked supposed tendencies to feeble-mindedness, mental illness, deafness, blindness, and other disabilities in particular races and ethnic groups” (p. 28). In other words, the construct of dis/ability has been leveraged by the dominant group in power (i.e. white people) to further marginalize and disenfranchise BIPOC.

Educational research has identified how racist and ableist discourses manifest through structures, policies, and practices which segregate students on the basis of perceived ability (Artiles, 2011; Artiles, 2013; Annamma, 2016; Annamma, 2017). Artiles (2013) refers to this as “the racialization of ability” which is the “disproportional diagnoses of disability in students of color” (p. 330). Following *Brown v. Board of Education*, “the first allegations of the use of special classes to continue covert forms of racial segregation” were documented (Blanchett et al., 2014). The use of IQ tests, language assessments, and other discriminatory testing acts as color-evasive mechanisms in rationalizing segregation and removal of Black, Indigenous, and students of Color from mainstream classrooms and their placement into specialized classrooms (Artiles, 2013; Blanchett et al., 2014). Overrepresentation of Black and Latinx students in “subjective” or “soft” dis/ability labels,

such as emotional and behavioral dis/abilities, and their disproportional placement into segregated special education settings continue to be issues (Artiles, 2011; Artiles, 2013; Artiles et al., 2005; Annamma, 2016; Annamma, 2017; Oakes, 2005; Oswald et al., 1999). While much is known about these processes in the literature focusing on K-12, less is known about these discourses in higher education and their impact on dis/abled Black, Indigenous, and students of Color on college campuses.

Colleges and universities have not only perpetuated racist ableist discourses, but they have also played a role in constructing and legitimizing them. This history is important if we are to understand how campuses continue to embody these discourses and logics, and how they shape the educational experiences of Black, Indigenous, and students of Color today. As tenet five of DisCrit encourages us to do, we must consider “legal, ideological, and historical aspects of dis/ability and race and how both have been used separately and together to deny the rights of certain citizens” in the maintenance of white and able-bodied supremacy (Annamma et al., 2013, p. 22). Scientific and medical knowledge production on college and university campuses legitimated discourses of intellectual and biological inferiority as well as eugenic discourses (Dolmage, 2017). While the government upheld policies such as forced sterilization, colleges and universities legitimized and institutionalized rhetoric of “racial betterment” (which relied on racist ableist discourses) through research studies, lectures, and the offering of courses on eugenics (Hamer et al., 2014). In particular, Harvard legitimized the eugenics movement in the twentieth century which led to tens of thousands of people being sterilized in the United States (Cohen, 2016).

Last, scholars have argued that dis/ability, and ‘debility’ exists in higher rates in Black, Indigenous, and communities of Color, not due to innate dis/ability, but as a function of white supremacy which debilitates marginalized people and communities while denying them access to services such as healthcare and housing (Puar, 2017). Washington (2006), Puar (2017), Ben-Moshe (2020), and other scholars have identified environmental racism and ‘sacrifice zones,’ institutionalization, and incarceration as factors in higher rates of debilitation and dis/ability within Black, Indigenous, and communities of Color. Understanding that BIPoC are disproportionately dis/abled because of systemic oppression, and as a function of white supremacy, is crucial to disrupting majoritarian narratives linking race to ability.

Racial, Ableist, and Racist Ableist Microaggressions

There is a growing body of literature documenting how racial microaggressions negatively impact campus climate for BIPoC (Allen et al., 2013; Smith et al., 2007; Yosso et al., 2009). Racial microaggressions, a conceptual framework coined by Chester Pierce, “are a form of systemic, everyday racism used to keep those at the racial margins in their place” (Pérez Huber & Solórzano, 2015). While Pierce et al.’s (1978) framework originally focused on the experiences of Black people, it has since been extended to consider the experiences of Indigenous people and people of Color particularly in the field of education (Pérez Huber & Solórzano, 2015). Racial microaggressions often perpetuate and reinforce stereotypes that BIPoC are violent, lazy, and unintelligent and cause distress for the person experiencing them which can lead to racialized burnout, or “racial battle fatigue” (Smith, 2004).

Pérez Huber and Solórzano (2015) and others have also conceptualized racial microaggressions as “layered” (p. 298). The term layered is utilized to denote the intersectional nature of many racial microaggressions (Pérez Huber & Solórzano, 2015). Intersectionality, a conceptual and theoretical framework coined by Kimberlé Crenshaw, is widely used by scholars to describe the ways in which “power relations of race, class, and gender... are not discrete and mutually exclusive entities, but rather build on each other and work together, and that, while often invisible, these intersecting power relations affect all aspects of the social world” (Collins & Bilge, 2016, p. 4). Within racial microaggressions literature, researchers examine race as it intersects with other marginalized identity markers such as gender or class. For example, Smith et al.’s (2007) study on racial microaggressions and the experiences of African American male college students examines race as it intersects with gender. Specifically, Smith et al. (2007) focus on the intersections of antiblack racism and Black misandry. In Pérez Huber’s (2011) study on racist nativism, she considers the intersections between race and perceived immigration status.

While racial microaggressions literature has highlighted the necessity of intersectional analysis, dis/ability and ableism continue to be largely overlooked and invisibilized. This is not to imply that perceptions of race and ability are not discussed, but rather, they are not engaged with as forms of ableism or racialized ableism. Moreover, analyses of these microaggressions often perpetuate ableism by rejecting the relationship between race and dis/ability while leaving beliefs that dis/ability is something to be distanced from intact. For example, Solórzano et al. (2002) in their study of undergraduate

students of color identified racialized perceptions of intelligence and capability. In the following excerpt, they explain:

Many students stated that they want and need to succeed at UC-Berkeley specifically because they want to ‘prove wrong’ the ideas, statistics, statements and attitudes that say People of Color are less intelligent or less capable than others. (p. 42)

Particularly when focusing on students’ resistance to racial microaggressions, researchers highlight how students pushed back on perceptions that BIPoC were less intelligent or capable than white people. These analyses often do not consider dis/ability or ableism while simultaneously reinforcing intellectual differences as deficit by not analyzing why these differences are a powerful tool for stigmatizing other marginalized groups.

A DisCrit analysis allows us to consider how racism and ableism not only intersect, but are interconnected (Annamma et al., 2015). In a study on the experiences of African American males with dis/abilities at a Historically Black College and University (HBCU), Banks and Hughes (2013) share an excerpt of a counternarrative from a participant with cerebral palsy:

Corey, whose disability was cerebral palsy, displayed a heightened awareness of the ways narratives surrounding multiple marginalized identities link resulting in oppression. For example, he explained that a substantial number of people on the college campus assume that he has been shot. He believed this assumption “comes with its own stereotypes” related preconceived notion that his peers hold about his gender, ethnic, disability, and socioeconomic status. He explained, “They are shocked when they find out that I’ve been this way my whole life.” (p. 373)

While Banks and Hughes (2013) refer to this incident as stereotype resulting from “intra-cultural prejudice,” DisCrit and racist ableism allow us to see how Corey experienced racist ableist microaggressions. Building on Pérez Huber and Solórzano (2015) model, *racist ableist microaggressions* examines how discourses which link race and ability materialize

in everyday forms such as statements, conscious or unconscious, or images depicting Black, Indigenous, and people of Color as inferior. In this chapter, I focus on how racist ableist microaggressions impact the experiences of Black students and students of Color who have the lived experience of dis/ability. I found that students encountered two types of racist ableist microaggressions: (1) perceptions of intelligence and capability; and (2) perceptions of laziness and deviance.

Methods

The dissertation project from which this chapter emerges focused on the following research questions: (1) What are the experiences of dis/abled Black students and students of Color attending four-year colleges and universities? (2) How well are current programs, policies, and practices on college campuses serving dis/abled Black students and students of Color? and; (3) To what extent do dis/abled Black students of Color resist dominant ideologies and discourses regarding race and dis/ability? In this chapter, I theorize about the ways in which race and dis/ability intersect. Specifically, I bridge CRT, DisCrit, and racist nativism to consider the ways in which discourses of race and ability shaped the experiences of dis/abled Black students and students of Color on four-year college campuses. I argue that students encountered racist ableist microaggressions based on racist and ableist perceptions of *intelligence and capability and laziness and deviancy*.

I utilized Critical Race Methodology (CRM) to analyze the qualitative questionnaire data and the counternarratives of participants. CRM “represent[s] a challenge to the existing modes of scholarship” by “nam[ing] racist injuries and identif[y]ing their origins” (Solórzano & Yosso, 2002, p. 27). Solórzano and Yosso (2002), building on CRT

scholarship, identify tenets that inform both CRT and CRM: (1) center race and racism and the ways in which racism intersect with other systems of oppression; (2) reject research paradigms which purport to be objective or neutral; (3) commitment to racial equity and justice; (4) highlight the embodied knowledges of marginalized people; and (5) use interdisciplinary knowledge. These tenets were expanded to consider the interconnectedness of race and dis/ability in the study.

CRT and DisCrit utilize storytelling and first-person accounts such as counternarratives to challenge traditional methodologies and center the epistemologies of marginalized and multiply-marginalized people (Fernández, 2002; Matsuda, 1995). Counternarratives provide “a means of exposing and critiquing normalized dialogues that perpetuate racial stereotypes” (DeCuir & Dixson, 2004, p. 27) and “produce knowledge that dispels the myths and ideologies obscuring the practices of domination” (Cammarota, 2014, p. 81). Within educational research, counternarratives have been used to critique dominant, or majoritarian, discourses which perpetuate racial inequality within schools (Solórzano & Yosso, 2002). These discourses position Black, Indigenous, and students of Color as academically or intellectually inferior, lazy, behavior “problems,” and criminal (Allen et al., 2013; Kohli et al., 2017). As Kohli et al. (2017) explain, deficit thinking and other discourses which subordinate students of Color allow for “systemic mechanisms of racism to be ignored as explanations for racial inequality and [be] replaced by individual-based rationales” (p. 189). In terms of racist ableism, shifting blame to innate biological or intellectual differences masks how structural racism perpetuates inequity.

Participants

Participants were recruited through a combination of snowball and purposeful sampling. I created and shared a recruitment email with organizations, professors, and teaching assistants. I asked them to circulate it amongst students and forward it to other people (i.e. professors or departments) who would potentially share the email with students in their class, department, or organization. I contacted Disability Resource Centers as well as cultural centers. I also created flyers which were shared on campus community boards. This approach allowed me to identify participants who met my criteria, students who: (1) identified as Black, Indigenous, or a Student of Color; (2) identified as dis/abled; and (3) had completed at least one semester or quarter at their current four-year institution.

While there is a body of literature that has examined the experiences of students with dis/abilities on campus, the majority of these studies focus on students who are registered with their campus' Disability Resource Center. These centers frequently require that students provide medical documentation to register for services which is not accessible to all students, particularly low income and/or Black, Indigenous, and students of Color due to persisting racial inequity in healthcare including access to healthcare, quality doctors, and racist diagnostic criteria (Feagin & Bennefield, 2014). For this reason, participants did not have to be registered with their campuses' Disability Resource Center to participate in the study.

Data Collection

Data were collected in two ways: a) through a qualitative questionnaire on *SurveyMonkey*; and (b) two 60-90-minute informal, in-depth interviews with participants. The questionnaire (see Appendix A) contained a combination of demographic questions

(e.g. How do you describe your racial/ethnic background to others?), campus climate questions (e.g. How would you describe your interactions with peers on campus?), and whether they were interested in meeting for in-person or virtual interviews. The questionnaire allowed me to obtain valuable data on the experiences of participants who might have otherwise not met for an in-person or virtual interview and learn more about interview participants. As a method, qualitative surveying allowed me to develop description “breadth” of students’ experiences (Becker, 1996, p. 65). Becker (1996) defines breadth as “trying to find out something about every topic the research touches on” (p. 65). Interviews, particularly in the form of narratives, allowed me to gain breadth as well as depth of participants’ experiences as multiply-marginalized students within the context of their life history. Seidman (2006) explains, “at the root of in-depth interviewing is an interest in understanding the lived experiences of other people and the meaning they make of that experience” (p. 9). For this reason, I focused not only on students experiences at their current four-year colleges, but also their experiences in K-12 schools.

My interview structure was influenced by Seidman’s (2006) three-step interview series, which I modified from three to two individual interviews with each participant. Seidman’s (2006) series stresses the importance of context, or that “people’s behavior becomes meaningful when placed in the context of their lives and the lives of those around them” (p. 16-17). In the first interview, I focused on students’ experiences leading up to attending their four-year college including their K-12 experiences and community college (if they attended). The second interview focused on their experiences at their current campus. The interview guide is located in Appendix B.

In total, twenty-five people filled out the survey and twenty-three were eligible to participate in the study. Of the twenty-three survey respondents that filled out the survey, fourteen indicated that they were interested in participating in the interview portion of the study. All respondents were contacted, and ten met with me for interviews (Table 2). With the exception of two participants, I met with all other interview participants twice. I met with one participant three times (per their request) and another participant only once. All participants opted to meet for in-person interviews except one (we met virtually).

Interview participants were between nineteen and thirty-four years of age. Participant identified across a range of racial/ethnic identities: two participants identified as Black or African American, two participants identified as Korean, two participants identified as biracial (Black-Mexican and Black-Guatemalan), one participant identified as Indian, one participant identified as Latina (Mexican-Guatemalan), one participant identified as Filipina, and one participant identified as Mexican-American. Participants also identified across dis/ability labels (e.g. Traumatic Brain Injury, Major Depressive Disorder, Type 1 Diabetes, chronic allergies/illness) and many had more than one dis/ability. The majority of participants had attended K-12 in California schools. Seven participants attended public universities or colleges, two attended a private, Predominately White Institution (PWI), and one participant attended a private, Christian college. While six participants had registered with their campus' Disability Resource Center, not all participants utilized accommodations offered to them; four participants did not register for services. Many participants identified as having more than one dis/ability.

Table 2: Research Participants

Participant	Age	Dis/ability	Race/Ethnicity	University/ College	Registered with DRC?
Tiffany	27	Traumatic Brain Injury	Black or African American	Public	Yes
Baudelaire	21	half deaf or deaf	Mexican American	Public	Yes
Susana	23	Major Depressive Disorder; General Anxiety Disorder	Filipina	Public	Yes
Bea	21	Type 1 Diabetic	Latina; Mexican- Guatemalan	Public	No
Alex	21	depression; anxiety	Asian; Asian-American Korean	Private	No
Micah	20	chronic allergies/ illness; Tourette's Syndrome	Indian	Private	Yes
Rodrigo	34	head trauma; PTSD; tinnitus; hearing impaired	Korean	Public	Yes
Marisol	34	physical and mental	Afro-Latina (Black-Mexican)	Public	Yes
Kennedy	19	cognitive processing disorder	African American.	Private, Christian	No
Andrea	29	General Anxiety; Depression; Adjustment Disorder	Biracial - Guatemalan/ Black or African American	Public	No

Data Analysis

I followed Harding's (2013) four-step process for thematic analysis. Thematic analysis is an accessible and flexible method which allowed me to identify patterns and themes in my data (Braun & Clarke, 2012). After reading transcripts thoroughly, I identified initial categories. Next, I coded transcripts using *a priori* codes and emergent codes (Creswell & Poth, 2016). The *a priori* codes drew on my conceptual frameworks. I compiled a preliminary codebook which I uploaded to *Dedoose* software. Third, I continued to review and revise the preliminary codebook. Rather than analyzing data linearly, I analyzed data in a "loop" and returned to the first three steps multiple times (Bassett, 2010, p. 504). Last, I identified themes and findings which were selected based on: (1) commonalities, differences, and relationships; and (2) their relevance to my research study. While interviews constituted my primary source of data, I also coded qualitative questionnaire responses to triangulate my findings from the interview data.

Racist ableism provides a framework to challenge discourses which link race and ability. When we only focus on racial analysis, we fail to acknowledge how racism and ableism are interdependent and interconnected (Annamma et al., 2015). This leaves ableism intact as a powerful tool of subordination which positions people who identify as or have the lived experience of dis/ability as less than or othered. A racist ableist analysis which highlights the narratives of dis/abled Black students and students of Color allowed me to begin to unpack the ways in which college campuses racialize dis/ability and the impact racialized ableism has on students' experiences.

Credibility and Trustworthiness

To ensure the validity of my research methods, I used triangulation, member checking, and a methodological journal. The qualitative questionnaire served as a secondary source of data, and triangulated my findings from the interview. Triangulation refers to the “process of using multiple perceptions to clarify meaning, verifying the repeatability of an observation or interpretation” (Stake, 2005, p. 454). Second, I gave participants the opportunity to review their transcripts. Member-checking acts as “a quality control process by which a researcher seeks to improve the accuracy, credibility and validity of what has been recorded during a research interview” (Harper & Cole, 2012, p. 1). Last, I kept a methodological journal which helped me “step back” and “take a fresh analytic look” as well offer a place to record thoughts, feelings, or views and reflect back on them (Charmaz, 2014, p. 167). Each of these allowed me to establish trustworthiness and credibility of my findings.

Findings

Black students and other students of color recounted how racist, stereotypical beliefs minimized and invalidated their lived experiences of dis/ability. Rather than encountering ableism in terms of deficit beliefs about dis/ability as “less than,” students’ counternarratives reveal the ways in which their experiences with ableism were racialized and nuanced. Because dis/ability is stigmatized, implicit and explicit beliefs that Black students and students of Color were intellectually and academically inferior, lazy, and deviant reinforced ableist beliefs that dis/ability was subordinate to able-bodied (white) experiences. Racialized perceptions of innate dis/ability delegitimized and invalidated

students' lived experiences with dis/ability and created additional barriers to receiving institutional support on campus. In the following sections, I focus on racist ableist discourses of *intelligence and capability* and *laziness and deviancy*.

Perceptions of Intelligence and Capability

Within a racist ableist framework and analysis, racist ableist microaggressions are based on perceptions of race and ability. Racist ableist discourses, such as perceptions of Black students and students of Color as academically or intellectually inferior, shaped students' experiences navigating faculty, staff, and peer interactions. As one questionnaire respondent explained, "A lot of white students think they're better or smart just because they have had access to more resources, and are quick to say that a person of color's failure is their own fault, while they blame the failures of white people on outside, uncontrollable factors." Another participant, Bea, a Latina student with Type 1 Diabetes, shared in her questionnaire response: "I have encountered people [on campus that] perceive me as 'ghetto,' violent, uneducated, and incapable of articulating a scholarly argument." Students' counternarratives revealed how faculty, staff, and peers' racialized perceptions of academic capability and intelligence positioned them as deficit on the basis of *perceived* ability.

Tiffany was a Black student at a public university who identified as having a Traumatic Brain Injury (TBI). She became dis/abled as an adult after being in a car accident. She also identified as having unclear speech, or a speech impediment, as a result of her TBI and use of retainers. While Tiffany enrolled in honors and advanced placement classes in high school and was a STEM (Science, Technology, Engineering, and

Mathematics) major at her four-year college, she had difficulty interacting with peers and forming study groups which she attributed to racialized perceptions of her speech. This led to Tiffany feeling isolated and alienated during group activities. While discussing Tiffany's continuing difficulties in interacting with peers prior to and during college, she shared the following experiences:

But, yeah, yep, they would perceive me as “ghetto” and they would think that I'm this... you know ‘ghetto’ person who doesn't know how to act or conduct herself, you know? So, they don't wanna be bothered with me and then there's other students who they-they're just like “She's normal, you know? She's not ghetto. She's - you know.” And they, you know, interact with me but... and, and like, how I would feel that, you know, we-would-be-doing, we would be doing like group activities, and they wouldn't wanna, you know, be involved with me or talk to me... I-I'm pausing a lot because this is just happen, it still happens, you know? It's not just high school, it still happens, you know? Like... the way that I talk, you know, back then it was the way that I talk because like I have like slang, but now that's the way that I talk because like not because of my um retainers – because my speech isn't that clear – so they don't wanna like have a conversation with me. They don't wanna converse with me because they feel like... you know?

In this excerpt, Tiffany described experiences of being culturally alienated in high school. She explains that her peers perceived her and her speech as “ghetto.” Research on speakers of non-standard varieties of English, such as African American Vernacular English (AAVE), have found that they experience stigmatization and pathologization within schools (Champion et al., 2012). Research on teacher and preservice teacher attitudes and beliefs toward AAVE speakers has found that teachers view AAVE negatively including lowered expectations and perceptions that AAVE speakers are less intelligent than speakers of standard English (Cecil, 1988; Champion et al., 2012). In other words, speakers of AAVE experienced racist ableist microaggressions based on racialized perceptions of intelligence.

In another excerpt, Tiffany even describes herself as “bilingual.” She explains, “Well... in high school, it was... I don't know. I don't wanna say it was super hard for me that you know being bilingual [laughs] it's not really speaking another language, but it's... almost speaking another language.” The research literature would consider Tiffany's language use as “code-switching” (Myers, 2020); while often framed as a deficit, is a form of linguistic capital (Yosso, 2005). Within Yosso's (2005) community cultural wealth model, linguistic capital refers to “the intellectual and social skills attained through communication experiences in more than one language and/or style” which “reflects the idea that Students of Color arrive at school with multiple language and communication skills” (p. 78). These experiences with exclusion by peers continued into college after Tiffany became dis/abled. When I asked Tiffany if she thought her experience with exclusion related to perceptions of her speech as “ghetto” or her speech impediment, she explained,

It's like -equa- it's like both parts, you know? Like um... some people say I don't really have a speech impediment like right now but I know I do. I know some of my words are not clear. I know that I slur. And I have retainers in so it's like it's like, “*For real, guys?*” So, I'll have like these things, not necessarily going against me, but not going for me, you know? Um... so like we'll be in like a group setting and then this just happened a few hours ago, we're in a group, and like we're like talking about, the questions, you know? And, it's- I wouldn't say they ignored me, but... they would not really – they act like they didn't hear me. That is ignoring but...Um... either (a) they really don't understand me or (b) they don't want to understand me. Either (a) they don't understand me or (b) they don't want to understand me like they don't want to hear me. Like, not that they don't understand what I'm saying, but they've already built up this- I keep pausing because I feel like I'm getting super philosophical poetic- But um they've already built up this like ext-barrier, so they're-they don't see me, they don't hear me, you know?

Tiffany recounted an experience that had happened the day of our interview in which other students ignored her during a group activity. Her peers did so because they did not understand her or did not *want to* understand her. She refers to the latter as a “barrier,” or preconceived, deficit perceptions that her peers have “built up.” When I asked Tiffany whether the barrier was related to her speech, she elaborated: “My speech, who I am Black girl, you know?” As she explains, antiblack and deficit perceptions of her speech created these barriers. I argue, within a racist ableism framework, that Tiffany experienced racist ableist microaggressions from her peers when they ignored her based on racialized assumptions regarding the origins of her speech *as well as racialized perceptions of her speech as in indicator of ability*. These racist and antiblack perceptions of Tiffany’s speech positioned her as subordinate based on deficit notions which linked race to intelligence and ability.

Perceptions of students as intellectually or academically less capable had institutional consequences. Another student, Marisol, shared her experience with the Disability Resource Center. Marisol identified as biracial Black-Mexican and had physical and mental dis/abilities that had developed from childhood cancer. While interacting with the Disability Resource Center, Marisol recounted several issues with having her medical documentation accepted. Marisol recounted: “I brought all my paperwork and to [the advisor] it was like not sufficient in his book like, ‘Well, this is not much of a disability.’” While Marisol was a transfer student and had received services at her previous institution, her four-year institution did not grant her permanent accommodations until the end of her first term. The microaggression occurred when they not only rejected her documentation,

but questioned the legitimacy of her lived experience. Marisol pushed back, “You know you can't sit here and judge me based on what I say is my disability and think I'm just an illiterate, you know, biracial person or illiterate Mexican.” A survey respondent, recalled encountering similar stereotypes on their campus: “ADHD people are dumb. As Mexican[sic] people think we have no disabilities that we just work but are not smart.”

Asian and Pacific Islander students also encountered perceptions which linked race to ability, but positioned them differently from Black students and other students of Color in the study. One questionnaire respondent, who identified as Asian American and female, explained, “[I have encountered] stereotypes and misconceptions regarding my Asian background includ[ing] the common ones, such as being good at school, and/or math, being submissive or quiet, and having strict overbearing parents.” I argue that these perceptions are also forms of racist ableist microaggressions which obscure and invalidate the experiences of dis/abled Asian and Pacific Islander students. For the latter respondent, perceptions were also gendered (i.e. “submissive”).

Rodrigo, a Korean student and Marine veteran, identified as having a traumatic brain injury, deafness, and debilitating headaches. Rodrigo explained how, as an Asian student, he was subjected to higher expectations based on perceived ability.

It really feels like my expectations are set higher because I'm Asian and I must know math. Look at the stereotypes of like Asians like you know that that one meme with that old Asian guy like like um, uh, you get I don't know there there's always puns you know something about like oh you got a B. Why not an A or like like um, yeah I don't know like I can't think one off the top of why head but there's always these expectations that Asians are supposed to excel in education.

Racist ableist discourses perpetuate stereotypes that Asian students as intellectually capable, or *hyper-capable*. This reinforces perceptions that Asian students are ‘model

minorities,' which perpetuate antiblack and racist ableist stereotypes about Black students and other students of Color as intellectually and academically inferior (Lee, 1994; Lee, 2005). The model minority myth refers to the stereotype that "Asian Americans are successful in school because they work hard and come from cultures that believe in the value of education" (Lee, 1994, p. 413). In her study on the experiences of Asian American high school students, Lee (1994) found that the model minority stereotype was harmful to both high-achieving and low-achieving Asian students who experienced anxiety, depression, and feelings of embarrassment.

Another student, Micah, experienced erasure because they³ were perceived as academically capable. Born in India, they had moved to the United States as an infant. They had chronic food allergies/illness and Tourette's Syndrome. In this excerpt, Micah recounted how the model minority stereotype and respectability politics invalidated their lived experiences with dis/ability. They shared:

The East Asian and also South Asian, Asian in general, model minority stereotype is very, very true for me growing up my entire life. I had teachers who, because I was Indian, assumed that I was good at science, and that I was smart, specifically.... And like, my allergies, again, so, not only something my parents reinforced that, like they were already reducing them. "Everybody has problems." My teachers did that too. "You just have some problems, you'll get over it, just keep doing what you're doing," you know?

Susana shared how these perceptions obscured the struggles of Asian and Pacific Islander students on campus. Susana identified as Filipina student and attended a large,

³ For the study, Micah chose "they/them pronouns," but they also use other pronouns. As they explained, "I identify as nonbinary in general. I started co-opting what my boss uses, my boss uses all respectful pronouns. They're also nonbinary as well. And so, that basically means I'm okay with she/her, I'm okay with he/him, it doesn't really matter to me. I used to use they/them a lot, though."

public university. She was not formally diagnosed with depression and anxiety until attending her current four-year. When discussing how the model minority stereotype, Susana explained how awareness of mental health in the APA community could “dispel” stereotypes about APA students:

And so, um, as far as the model minority kind of thing, it kind of helps dispel that a little bit more. That, you know, we're not perfect. Maybe some of us are academically, like, perform really well. But you know what? even if they're performing academically well, you know, their emotional intelligence might not be there. They might not have had the tool- they might do really well with books, but they don't really have a really great sense of mental wellness and mental wellbeing. You know? Or, a lot of us in general probably don't have a very good, you know, understanding of ourselves and our minds.

Perceptions of Laziness and Deviancy

Students' counternarratives also revealed how racialized perceptions of laziness and deviancy minimized or erased their experiences with dis/ability. Solórzano (1997) explains that “laziness” is a common racial stereotype directed toward students of Color which justifies low educational expectations, removal of students from mainstream classrooms into separate classrooms or schools, and other institutional consequences. While laziness has also been identified as a stereotype for dis/abled people (Shapiro & Margolis, 1988; May & Stone, 2010), I argue that these perceptions were racialized for students in the study.

Andrea, a biracial Black-Guatemalan student with generalized anxiety, depression, and adjustment disorder, recalled her experiences in K-12 prior to receiving a formal diagnosis. Andrea had difficulty turning in assignments on time or completed because of her anxiety. She explained how her teachers perceived Black students struggling was often attributed to laziness. She recounted:

I remember I had one teacher, specifically one science teacher... And she just would pick on me like no one's fucking business and this is in the seventh grade. And I had a I had another teacher in the fourth grade... where she would pick on me like incessantly, incessantly because I just didn't get it. And she's like, well, like, "You only do –" and with the – both of them it's it was this narrative of, "You only do the work that you enjoy, like, you're lazy with everything else." So, it was it was like really it was really difficult to kind of in one in one space here like your writing is really good and then hearing like, "You're fucking like lazy and like look dumb."

Andrea explained how she was not only positioned as "lazy" and "dumb" based on racialized perceptions by her science teacher, but also bullied regularly by her in the classroom. She continues:

And it's like, well, there are reasons why I wasn't completing assignments and I didn't want to like the anxiety is there every time I don't turn something in or turn it halfway. Or you see like one problem that's on the page that I have tried to work out. But like, you say that I gave up because I'm lazy – like no, I just I don't understand it. So yeah, a lot of it was automatically defaulted as laziness, which I think has a racial prejudice to it like yeah, I sense a tinge of racism there. Like Black people, Black students are lazy. So, there's that. I'm just gonna say that. I'm gonna say it's racist.

As Andrea explains, "laziness" was the default explanation for when Black students did not do well in school. She experienced racist ableist microaggression based on perceptions of laziness which positioned her as less capable than her peers. While Andrea's excerpt focuses on her experiences prior to college, students' counternarratives revealed how these perceptions persisted into college. One survey respondent also echoed this sentiment when she shared that she encountered stereotypes on campus "that African American[s] are lazy."

Marisol also described being perceived as lazy by faculty on campus which made it difficult for her to access dis/ability-related support. She explained:

I feel like either I give this perception that maybe I am just lazy or maybe I just don't have a disability cause it's not visible to the naked eye or I-I I'm just taking advantage of the system and that's the part that really just drives me nuts cause it's like, if you guys only realized what I do deal with, or what I do struggle with, then you would kind of see it from a different perspective. And it's not like I don't ask for help. If I didn't ask for help and I was always quiet, then even then I still don't feel that's a fair reason but needless to say I feel like it's still just judgement all the time.

In this excerpt, Marisol identifies her dis/ability as invisible. This is important to note because many students in the study identified as having an invisible dis/ability or not looking dis/abled. Because racist ableist discourses are based on *perceptions*, and not a student's specific lived experience with dis/ability, students' experiences with faculty were based on racialized perceptions of ability (i.e. laziness). This minimized students' struggles with access.

Kennedy, an African American student with a learning disability, attended a private, Christian college. Kennedy recounted an experience she had with her professor after failing an exam. While Kennedy had been a special education program until eighth grade, she had opted out when she started high school and had not requested any support for her dis/ability while attending college. During office hours, she shared that she had a learning disability with her professor which was met with resistance:

I think from her standpoint... it was maybe like, she was thinking that I was trying to find a cover as to why I did so bad or trying to find a cover for, like, oh, maybe I wanted to retake the test or something like that. And that was definitely not the case. I went in there so I could understand, like, so how do I move forward to do better on your tests next time? And I think instantly, she just thought like, I'm just trying to make something up. And just to like, benefit me or I guess like pity myself.

Students often navigated perceptions that they were trying to gain an unfair advantage when seeking dis/ability-related support. Tiffany shared an experience she had while

navigating securing testing accommodations. Tiffany had previously interacted with a staff named Adam in the Disability Resource Center. She saw Adam leave the center and approached him to ask for support. She recounted how staff asked Adam if he was “OK”:

... one time, actually, [I] walked in on [Adam] walking out [the resource center] and I don't know if he was going to the bathroom or something, but I was just like, “I need to talk to you so I can figure out- figure out how I'm going to get this accommodation because the test is such and such a date and we're close to the deadline” and like everybody in the office were more concerned with like, “Are you OK, Adam?” I know that's me being - it sounds like I'm being inconsiderate 'cause I know he's disabled as well, but it's like how do I get my accommodations without being overbearing, you know? I know that it matters that he - like - that they have to protect him but I don't know. It's just weird like I'm not a beast. I'm just asking for my story heard. I was already talking to him so I don't know.”

Rather than recognizing Tiffany's act as advocacy, the Disability Resource Center staff positioned her as dangerous. The racist ableist microaggression occurred when staff asked Adam if he was okay (i.e. safe) interacting with Tiffany. By positioning Tiffany as hostile, the staff perpetuated the stereotype of the “angry Black woman” (Walley-Jean, 2009). According to Walley-Jean (2009), this stereotype “seeks to restrain [Black women's] expression of anger by negatively labeling it” (p. 71). Tiffany's use of “beast” is indicative of how the experience dehumanized her and delegitimized her experience.

Discussion

In this chapter, I theorized about the ways in which racist ableism manifests in the college experiences of dis/abled Black students and students of Color. I demonstrate how faculty, staff, and other students perpetuated discourses of racist ableism on campus in the form of racist ableist microaggressions which discredited and delegitimized the needs of students in the study. Specifically, I discussed how discourses of *intelligence and capability* and *laziness and deviance* manifested as racist ableist microaggressions.

Understanding these microaggressions through the lens of race *or* dis/ability alone fails to acknowledge the complexity and nuance of students' lived realities on campus. Framing racist ableism as part of DisCrit allowed me to “to complicate notions of race and ability by recognizing the ways in which they are intertwined” (Annamma et al., 2015, p. 29). A racist ableist analysis allows us to understand how these discourses subordinate Black students and students of Color and challenge color-evasive discourses in higher education.

Racist ableism provides one lens that allows us to begin to make sense of the ways in which race and ability intersect. Students' counternarratives revealed how racialized perceptions of ability and capability, as well as laziness and deviance, shaped their experiences navigating campus as dis/abled students. It is important to emphasize that students encountered racist ableism based on *perceptions of ability or capability* rather than their actual dis/ability labels. By this, I mean that students were not encountering ableist attitudes and beliefs about dis/ability in terms of specific diagnostic labels and stereotypes associated with them, but that they encountered racist beliefs about the capabilities and abilities of Black people and people of Color. This is an especially important consideration for students who *are not visibly dis/abled* and, thus, are experiencing racist ableist microaggressions solely based on racialized perceptions of ability. Whereas white students also experience ableism on campus, perceptions of their racial identity do not usually cast them in a negative light.

Audre Lorde (1982) reminds us that “there is no such thing as a single-issue struggle because we do not live single-issue lives” (p. 138). Intersectional analyses of microaggressions are of paramount importance if we are to meet the needs of an

increasingly diverse student body on college campuses. Understanding the ways that institutionalized racist ableist discourses manifest in the day-to-day lives of dis/abled Black students and students of Color allow us to disrupt and dismantle them.

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Chapter 4: Carceral Ableism in Higher Education

Introduction

In 2018, several students filed a class action complaint against Stanford for its failure to accommodate students experiencing mental health crises on campus (Anderson, 2019). The complaint stated that the institution “maintains antiquated policies, practices, and procedures related to mental health that violate antidiscrimination laws” and:

Further perpetuating mental health stigma and additional harm, Stanford requires students wishing to return to the University to write statements accepting blame for their disability-related behavior and to submit to invasive examination of their medical records and evaluations by university doctors who second-guess the students’ treating doctors. Stanford also mandates costly and time-consuming treatment plans in addition to those recommended by the students’ doctors. (Mental & Wellness Coalition et al. v. Stanford, 2018, p. 1-2)

While the lawsuit was settled when Stanford “eas[ed] its policies on involuntary leaves of absences,” this was far from an isolated issue (Fisher, 2019, para. 12). Over the past decade, a number of news outlets have published articles on colleges and universities’ withdrawal and readmissions policies and the impact these policies have on students labeled with “mental illness” or who experience crises on college campuses (Anderson, 2019; Giambrone, 2015; Stannard, 2019). Yale, Brown, Princeton, the University of Pennsylvania, and the University of California are some of the other institutions that have received criticism on the impact of their policies on students’ mental health (Anderson, 2019; Giambrone, 2015; Stannard, 2019).

The involvement of campus police in response to mental health crises, particularly the use of force, has also come under closer scrutiny. In 2017, campus police shot and killed a non-binary and intersex student at Georgia Tech who was experiencing a mental

health crisis (Baurer-Wolf, 2017; Gawronski, 2019). In 2018, campus police at Harvard tackled and beat a Black student “in obvious distress” and in “an extreme condition” (Faust, 2018; Reis, 2018). The same year, campus police at the University of Chicago shot a student of Color who was experiencing a manic episode (Hernandez, 2018). These series of events demonstrate how higher education is not only woefully ill-equipped to address the needs of dis/abled students, but that institutional responses can result violent and lethal consequences. These institutional responses further disenfranchise already marginalized and multiply-marginalized students on college campuses.

While scholars have increasingly interrogated the construct of dis/ability as an oppressive tool to dehumanize Black, Indigenous, and people of Color, they have also begun to examine the ways in which the Prison-Industrial Complex (PIC) segregates and criminalizes people labeled as dis/abled (Annamma, 2016; Annamma, 2017). The PIC is “a complex interlocking web of institutions that extends outward beyond any one jail or prison into the larger political economy” (Smith & Hattery, 2010, p. 388). As Puar (2017) explains, “Disability thus coheres a long-standing avenue for policing, surveilling, and securitizing deviant bodies from slavery through the prison-industrial complex. These differing yet contiguous forms of enclosure are processes of debilitation in the most literal and stark terms” (p. 81). While previous research on the PIC has focused on K-12, particularly in regard to discussing dis/abled Black, Indigenous, and students of Color, higher education also embodies the carceral state and its logics.

Carceral logics are “presuppositions that frame marginalized communities as threats to the social order rather than adopting a systemic analysis of the structural barriers

experienced by such communities” (Bergen & Abji, 2019, p. 35). As discussed above, colleges and universities, particularly police and campus police, perceived dis/abled students as liabilities and dangerous. Rather than being the *result of* covert or overt racist and ableist policies, I argue that these experiences are *a function of* the “carceral racial state” (Ben-Moshe, 2020, p. 9). In this chapter, I argue that institutions of higher education police, surveil and criminalize dis/ability. I identify particular practices, such as requiring students to register for services or using campus police in crisis response, embody carceral logics and carceral control. In particular, I focus on how institutional policies and practices reproduce *carceral ableism* and *carceral sanism*.

Race, Dis/ability, and Carcerality

Over the past decade, the relationship between policing, incarceration, and dis/ability has received more attention. According to a report by the U.S. Department of Justice, thirty-two percent of incarcerated people in prison and forty percent of incarcerated people in jail reported having at least one dis/ability (Bronson et al., 2015). In 2015, the *Washington Post* released a national real-time tally of the number of people experiencing mental health crises who were killed by police. In their analysis, the *Post* found that police had shot and killed 124 people experiencing a mental health crisis nationwide (Lowery et al., 2015). In 45 of these cases, the officers were responding to calls for people seeking medical support or after the person failed to receive support (Lowery et al., 2015). In the same year, the Treatment Advocacy Center issued a report on the role of mental illness in fatal police encounters. Fuller et al. (2015) found that people with untreated mental illness

are sixteen times more likely to be killed by police. These trends highlight the ways in which dis/ability is perceived as dangerous and criminalized by the state.

Carceral State and K-12 Education

Scholars have increasingly recognized the construct, or concept, of dis/ability as a mechanism of the carceral state to pathologize and criminalize marginalized and multiply-marginalized people (Annamma, 2016). The carceral state is a system of governance “enacted through a commitment across institutions to maintain order through surveillance, coercion, and punishment” (Annamma, 2016, p. 1211). While prisons, detentions centers, and jails have historically been recognized as sites of confinement and punishment within the carceral state, scholars such as Annamma (2016), Ben Liat-Moshe (2020), and others have analyzed the ways in which other sites, particularly those conceptualized as “neutral,” “care,” or “treatment” embody and (re)perpetuate carceral logics.

Recently, Ben-Moshe (2020) introduced the terms *carceral ableism* and *carceral sanism* to capture the interconnectedness of carceral logics and ableism. Carceral ableism refers to “the praxis and belief that people with disabilities need special or extra protections, in ways that often expand and legitimate their further marginalization and incarceration” (Ben-Moshe, 2020, p. 17). For example, the state, in particular, the education system, has been tasked with creating more inclusive and equitable spaces for dis/abled students. These ‘special or extra protections’ manifest in the creation of special education programs in schools. Rather than creating more equitable spaces, however, they often “target particular identities for removal through racial criminalization” (Annamma, 2016, p. 1212). As Erevelles (2014) explains, “definitions of disability as intransigent pathology are used to

justify segregation along the axes of race and class under the questionable guise of ‘special education’ and rehabilitation” (p. 93). Special education not only functions as a form of segregation, but as a site of policing and surveillance of dis/abled students – especially Black and Latinx students. “Carceral sanism” refers to the “forms of carcerality that contribute to the oppression of mad or ‘mentally ill’ populations under the guise of treatment” (Ben-Moshe, 2020, p. 58). This includes psychiatric hospitals, but also policies and practices that lead to the criminalization of people with mental health or psychiatric dis/abilities because society and the state perceives them as liabilities or dangerous.

A significant body of research has identified issues of overrepresentation and disproportionality in special education placement and the labeling of Black, Indigenous, and Latinx students with “subjective” or “soft” dis/abilities, e.g. emotional disturbance and behavioral dis/abilities (Annamma, 2016; Annamma 2017; Artiles, 2011; Artiles, 2013; Blanchett, 2010; Connor & Ferri, 2005; Ervelles, 2014; Harry & Klingner, 2014). Black boys and youth, in particular, are overrepresented in more stigmatized dis/ability labels, more likely to be referred to special education for behavioral issues, and are at an increased an increased risk of being removed from school and placed into carceral facilities (Artiles, 2011; Meiners, 2007). According to Meiners (2007):

As increasing numbers of youth, frequently African Americans, are educationally disabled, this can function to disqualify these youth, as a classification as special education decreases a student’s possibility of graduation and his or her probability of meaningful employment, and increases his or her probability of incarceration. (p. 39)

In other words, special education placement often exacerbates existing racial inequities in K-12 schools and beyond.

Dis/ability, Carceral Ableism, and Higher Education

Scholars and activists have identified how non-prison institutions such as higher education (re)produce carceral logic and carceral control (Annamma, 2016; Ben-Moshe, 2020). Most recently, several students have organized campaigns demanding their institutions re-evaluate and end their relationship with police (Barajas, 2020; Whitford & Burke, 2020). Northwestern University, Columbia University, and New York University have circulated open letters while several University of California students have held protests on campus (Barajas, 2020; Whitford & Burke, 2020). While the physical presence of police is perhaps the most observable manifestation of carceral logics on college campuses, it is also reproduced in less overt and readily observable ways. For example, while students study off-campus due to COVID-19 restrictions, ProctorU and other third-party online proctoring services have been increasingly recognized as a form of surveillance (Flaherty, 2020). In this chapter, I argue that carceral logics also prevail in Disability Resource Centers and racist ableist policies and practices.

In higher education, carceral logics are observable in the ways in which institutions define and police definitions of dis/ability. As Lester et al. (2013) argue, “universities [are] positioned as the authority on both the presence of a disability and the institutional response to disability” (Lester et al., 2013, p. 56). Not only do Disability Resource Centers determine the presence of a disability, they decide what constitutes a disability on campus. In other words, they function to police definitions of dis/ability in ways that prioritize the institution and not the well-being of students. Moreover, Disability Resource Centers have been constructed as the *only* legitimate avenue for students to acquire accommodations and

modifications. Other tactics such as students reaching out to a professor directly are discouraged; professors are encouraged to redirect such student requests to Disability Resource Centers. This reinforces that these centers, and the institution, are *the authority of dis/ability*, not students, and delegitimizes and discredits students' lived experiences and knowledges.

Requiring students to register for services also acts as a form of regulation and surveillance of dis/abled bodies. The surveillance of people with dis/abilities is not new. For most of the twentieth century, the United States institutionalized tens of thousands of intellectually and psychiatrically dis/abled people (Ben-Moshe, 2020; Chapman et al., 2014). While many state institutions have formally closed, policing and surveillance still persist in nursing homes, group homes and in special education (Ben-Moshe, 2020). Chapman et al. (2014) argue, "People receive rights and inclusion only in exchange for conformity, self-support, silencing dissent, and erasing differences" (p. 13). Within higher education, students must register with the institution as a student with a dis/ability in order to access accommodations. Students who do not or are unable to register are denied rights and excluded from services.

Disability Resource Centers on campus create a binary between people worthy and deserving of support services and people who are not. As Annamma et al. (2015) explain, "Dis/ability status works somewhat differently within higher education [than in K-12]" (p. 7). As discussed previously, decades of research have documented overrepresentation of Black, Indigenous, and students of Color (particularly Latinx students) in special education (Artiles, 2011; Artiles, 2013). Within higher education, these same students are not

overrepresented. For example, Henderson (2001) found that while students labeled with learning dis/abilities have increased over more than a decade, the majority of these students were white and not students of Color. Reid and Knight (2006), citing Henderson, explain, “the decrease in the percentage of other disability categories suggests that minority and poor students identified by disability categories other than LD are decreasing in postsecondary attendance and completion” (p. 20). Their work also highlights the ways in which discourses of individualism and self-determination “may unfairly affect ethnic minority and poor students’ opportunities while *privileging* White and affluent disabled students” (Reid & Knight, 2006, p. 21).

While discourses of merit privilege white students in covert ways, the requirement of medical documentation in order to register for Disability Resource Center services disadvantages and disqualifies BIPoC as well as low income students. First, it does not consider access disparities based on race, class, or other social locations (Ben-Moshe & Magaña, 2014). This includes access to quality medical care and service provisions (Ben-Moshe & Magaña, 2014). Second, it ignores decades of research which have documented medical and structural racism in healthcare (Feagin & Bennefield, 2014). Rather than being race-neutral or objective, this policy privileges white and upper middle-class students who are more likely to have access to quality medical care and do not encounter structural barriers based on race. In this sense, Disability Resource Centers regulate services and act as gatekeepers of access on behalf of the institution. This (re)produces carceral racist logic and carceral ableism by restricting access to resources which often further disenfranchises students with dis/abilities unable to obtain documentation.

The regulation of accommodations is also perpetuated by other university personnel. Studies by Frymier and Wazner (2003), West et al., (2016), and Wolanin and Steele (2004) found that faculty perceived accommodations as unfair advantages, compromising academic rigor, and increasing faculty workload. In 2017, Gail Hornstein, a professor of psychology published an article in *The Chronicle of Higher Education* titled “Why I Dread the Accommodations Talk.” In this advice column, Hornstein (2017) positions herself as an authority:

We as faculty members need to respond appropriately and help students to learn what’s a crisis (and what’s not), and to understand when it is reasonable to ask for the course structure to be changed or for expectations to be modified (and when it’s best to try to cope on one’s own). (para. 15)

While the student in Hornstein’s story registered as a student with a dis/ability at the university, Hornstein still viewed herself and other like-minded faculty, and not her students, as knowledge-holders. When faculty position themselves as gatekeepers, they perpetuate symbolic violence by delegitimizing and dismissing the experiential knowledge and lived experiences of dis/abled students. Symbolic violence refers to the “painful, damaging, mortal wounds inflicted by the wielding of words, symbols, and standards” (Ferguson, 2000, p. 51). Professors do their students symbolic violence when they refuse to grant accommodations, mandated or not, to dis/abled students. This also functions as a form of carceral expansion in which professors and staff, as institutional agents, participate in carceral control and surveillance of dis/abled bodies. Rather than perceiving their actions as restricting the autonomy of students and denying their rights and access to equitable education, however, professors may believe themselves as benevolent and acting in the best interest of students.

Students who identify or are labeled as having ‘mental illness’ or psychiatric dis/abilities are especially vulnerable to pathologization and surveillance in higher education. Belch and Marshak (2006) found that campus personnel and student affairs staff were unequipped to support students with psychiatric dis/abilities and that existing policies, resources, and trainings were often insufficient. In the following section, I discuss two case studies as examples of carceral ableism and sanism on college campuses. The first is #CareForCops, a student campaign organized in response to the shooting and subsequent criminalization of a University of Chicago student. The second case study focuses on “Justice for Sara Doe,” organized by Project Let’s Erase the Stigma (LETS). Project LETS is “a national grassroots organization and movement led by and for folks with lived experience of mental illness/madness, Disability, trauma, & neurodivergence” (Project LETS, 2020, para 1). Both of these events illustrate how campuses embody carceral logics and construct dis/abled bodies and minds as dangerous. I also highlight their cases because of the ways in which students and community members mobilized in response.

#CareForCops

The same year as Stanford’s lawsuit was announced, #CareNotCops formed at the University of Chicago (UC). The UC has “one of the largest private police forces in the country, with a broad jurisdiction that includes more than 65,000 residents on the South Side of Chicago” and “has been routinely criticized for a lack of transparency, and for what critics describe as disproportionately heavy policing that targets South Side residents and black Chicago students” (Fisher, 2019, para. 14). In April of 2018, the university’s private police force responded to a burglary in progress. Police believed a twenty-one-year-old

biracial student, Charles “Soji” Thomas, was experiencing a mental health crisis when he was shot by police in the shoulder (Hernandez, 2018). Camera footage released by the university indicates that at least one cop was aware that Thomas was experiencing a crisis (Hernandez, 2018). Thomas was charged with aggravated assault of a cop and property damage charges (Hernandez, 2018). Following the shooting, UChicago United, a coalition of multicultural student organizations, held a rally and released a list of demands that included UCPD be disarmed (Hernandez, 2018). In June of 2018, University students, alumni and community organizations launched Camp-Out for #CareNotCops. According to Tong et al. (2018), Camp-Out for #CareNotCops is:

built on the principle that police do not keep us safe. Policing, especially private policing, is an inherently violent system, and investing in that system escalates rather than heals intra-community violence. We believe the resources needed to keep communities safe are restorative justice, mental healthcare access, education, employment, housing, access to nutritious food, and art. (para. 3)

The camp-out last nineteen hours in which organizers occupied the University of Chicago Police headquarters. As of February 2020, Thomas remained in jail pending charges (Cruz-Alvarez, 2020; Hernandez, 2018).

Justice for Sara Doe

Two years later, another campaign “Justice for Sara Doe,” was organized in support of a University of Brown student. Sara Doe (a pseudonym) was suspended and charged with a felony following a physical confrontation with Emergency Medical Technicians (EMTs) and Department of Public Safety (DPS) officers (Nishar, 2020). In 2020, Emergency Medical Technicians (EMTs) and police forcibly escorted and tranquilized

“Sara Doe” at an on-campus event following reports she had hit her head (Nishar, 2020).

According to the Project LETS statement on behalf of Sara Doe:

On October 5th, 2019, Sara Doe attended A Night on College Hill at Brown University, an event organized by Brown’s Class Coordinating Board. While there, because Sara was wearing high heels, she slipped and fell on the grass outside. A bystander informed Emergency Medical Services (EMS) detail there that Sara had hit her head on a railing, which she had not. Despite her protests, Sara was made to walk away from the venue toward the ambulance. Upon seeing the ambulance, Sara refused transport and tried to walk away, but was not allowed. Sara tried to barricade herself in the women’s bathroom, but the Emergency Medical Technician (EMT), a man, followed her inside and harassed her to come out. Eventually, other EMTs came inside the restroom to try to get her outside. (Kaufman-Mthimkhulu, 2020, para. 2)

Doe, who had sustained major trauma prior to that incident, explains that she panicked and bit an EMT while trying to free herself (Nishar, 2020). EMTs’ and DPS’ response included tranquilizing, stepping on, and handcuffing Doe (Nishar, 2020). According to the Project LETS (2020) webpage:

As a result, Doe was suspended from Brown. She is expected to finish her last semester without receiving her diploma and re-enroll in the fall so that the suspension can take effect. Furthermore, Doe has been left with a bill for “restitution” that she must pay to the EMT who assaulted her while also dealing with a felony charge. (para. 2)

Project LETS (2020) organized “Justice for Sara Doe” which included a social media campaign (#Justice4SaraDoe), a statement on behalf of Doe, and a petition which demanded that Brown revoke Doe’s suspension and grant her diploma.

Pathologization and Criminalization of ‘Mental Illness’

Institutional agents (police, Emergency Medical Services) identified Charles Thomas and Sara Doe as dangerous. Thomas was perceived as dangerous while Doe, reported to EMS for hitting her head, was constructed as needing ‘treatment’ initially.

When she refused treatment, EMS and campus police pathologized and constrained her, and subjected to her coerced medicalization. Both universities removed Doe and Thomas from campus – Doe through suspension and Thomas through incarceration. As discussed previously, the conceptual term ‘carceral sanism’ describes the carceral logics, often presented as care or treatment, which disenfranchise and marginalize people who identify or are labeled as ‘mentally ill’ (Ben-Moshe, 2020). Both students were forcibly removed from their campus communities to be “remediated, rehabilitated, or distributed into spaces less visible” (Annamma, 2016, p. 1214).

Through their cases, we can identify the ways in which Doe and Thomas experienced criminalization, which “entails the construction of both race (especially blackness) and disability (especially mental difference) as dangerous” (Rodriguez et al., 2020). In both cases, students were perceived by their campus as ‘dangerous’ underpinning the carceral logic which construct mental difference as problematic, deficit and/or criminal.

Building on the scholarship of Gilmore and Ben-Moshe, Rodriguez et al. (2020) explain:

It is not just about those who identify as disabled people of color who are caught up in these systems (although it’s important to recognize the high numbers of disabled people, especially those of color, in carceral systems, including policing). Rather, it’s about understanding anti-black racism as composed of pathologization and dangerousness, which leads to the processes of criminalization, disablement and vulnerabilities to premature death. (p. 541)

Doe’s and Thomas’ cases highlight the criminal pathologization of mental illness which resulted in Thomas being shot and Doe’s coerced medicalization. While Doe’s race is unknown, Thomas’ is socially located at the intersections of race, gender, and dis/ability. Students who occupy multiple spaces of marginalization are especially vulnerable to state violence.

Purpose of Study

The literature on carceral ableism has examined not only prisons, detention centers, and jails, but also psychiatric institutions, institutions for people with intellectual and developmental disabilities, group and residential “homes,” and nursing facilities as sites of confinement (Carey et al., 2014; Ben-Moshe, 2020). In this chapter, I build on previous literature to examine how carceral logics and carceral control are reproduced in colleges and universities. In particular, I focus on the how college campuses police and surveil multiply-marginalized Black students and students of Color with dis/abilities. Using DisCrit as my theoretical and conceptual framework, I seek to understand how higher education policies and practices identify bodies and minds “different from the ideal are identified as problematic” (Annamma, 2016, p. 1214). I argue that colleges and universities embody carceral logics and carceral control which criminally pathologize students who identify as or are labeled with dis/abilities – particularly ‘mental illness.’

Conceptual Framework

I use Dis/ability Critical Race Theory (DisCrit) as a theoretical and conceptual framework to analyze and frame this study. DisCrit allowed for intersectional analysis of students’ experiences navigating carceral logics on college campuses. Intersectionality, a conceptual framework coined by Kimberlé Crenshaw (1989) but which traces its roots through Black feminist thought, is “a widely used concept in contemporary scholarly inquiry, addressing the question of how multiple forms of inequality and identity are interrelated across different contexts and over time, such [as] race gender, class, dis/ability,

and so on” (Annamma et al., 2016, p. 1). In this section, I describe DisCrit and its usefulness for analyzing students’ experiences in the study.

Dis/ability Critical Race Theory

DisCrit, a branch of Critical Race Theory (CRT), builds on Disability Studies and Critical Race Studies scholarship to examine the interconnectedness of racism and ableism in education contexts and beyond (Annamma et al., 2015). While introduced by Subini Annamma, David Connor, and Beth Ferri, it traces its lineage through a truncated genealogy which “exists outside and within the academy, built from the foundational works of activists, artists, and academics” (Annamma et al., 2015, p. 1). DisCrit recognizes race and dis/ability as social constructs rather than biological realities (Annamma et al., 2013). Understanding the ways in which they are socially constructed across contexts as well as how they are interconnected allow scholars to address “entrenched educational inequities from an intersectional lens” (Annamma et al., 2015, p. 3). DisCrit acknowledges the historical and legal contexts of these constructions, and their impact on marginalized and multiply-marginalized people today (Annamma, 2013). It also recognizes the ways in which racism and ableism are interlocked with other systems of oppression (Annamma, 2013). Building on Harris’ (1993) ‘whiteness as property,’ it argues that ability is also a form of property (Annamma, 2013). Ability, like whiteness, is a property right which denies rights to those who are constructed as dis/abled (Annamma, 2013). Last, DisCrit recognizes resistance and highlights the counternarratives of multiply-marginalized people (Annamma et al., 2013).

DisCrit is a useful framework for considering the ways in which carceral logics are embedded into higher education. First, it allowed me recognize how ability and whiteness are forms of property. While in K-12 dis/ability segregates BIPoC students through special education placement, in higher education dis/ability is perceived as conferring particular “benefits” – which in reality are rights all students with dis/abilities have access to under federal legislation – such as access to extended test-taking time. Second, recognizing ability as a form of property, I was able to see the ways in which institutions sought to protect these rights through the policing of definitions of dis/ability which privileged whiteness (e.g. medical documentation). Third, a DisCrit framing allowed me to consider students’ multidimensional identities in relation to their experiences on campus. It allowed me to acknowledge “how experiences with stigma and segregation often vary, based on other identity markers (i.e. gender, language, class) and how this negotiation of multiple stigmatized identities adds complexity” (Annamma et al., 2015, p. 20). For instance, while all students with dis/abilities are subjected to surveillance through the use of cameras to monitor for cheating in test-taking rooms, Black and students of Color encounter dual forms of surveillance due to their social locations as Black or people of Color and as dis/abled people. Fourth, it allowed me to recognize how institutions constructed particular students as deficit, deviant or dangerous. These labels made them vulnerable to removal by the institution. Last, I was able to identify how students resisted pathologization and criminalization by reimagining institutional responses or rejecting the institution.

Methods

This study examined the experiences of Black students and students of Color labeled as or who identified as dis/abled navigating carceral ableism and sanism on college campuses. DisCrit “privilege[es] the voices of marginalized populations, traditionally not acknowledged in the research” (Annamma et al., 2013, p. 11). In the study, I center the counternarratives of students as “a form of academic activism” (Annamma et al., 2013, p. 14).

I used Critical Race Methodology (CRM) to guide my analysis. CRM challenges traditional research methods by centering the narratives of Black, Indigenous, and people of Color. Solórzano and Yosso (2002), building on CRT scholarship, identify tenets that inform both CRT and CRM: (1) center race and racism and the ways in which racism intersect with other systems of oppression; (2) rejects traditional research paradigms which claim objectivity or neutrality; (3) are rooted in racial equity and transformation of oppressive systems; (4) center embodied knowledges of marginalized people; and (5) use interdisciplinary knowledge. These tenets were extended to consider the intersections of race and dis/ability. In particular, I present my data in the form of counternarratives which aligns with CRM as well as DisCrit. In the questionnaire and interview data, participants’ counternarratives not only expose the pervasiveness of carceral logics on campus, but also how participants resisted discourses which pathologized and criminalized dis/ability.

The dissertation project from which this chapter emerges focused on the following research questions: (1) What are the experiences of dis/abled Black students and students of Color attending four-year colleges and universities? (2) How well are current programs,

policies, and practices on college campuses serving dis/abled Black students and students of Color? and; (3) To what extent do dis/abled Black students of Color resist dominant ideologies and discourses regarding race and dis/ability?

Participants

I recruited participants by: (a) emailing a recruitment letter to campus organizations/clubs, cultural centers, and professors which asked them to forward the letter to their students or members; (b) posting a flyer on campus community boards. To be eligible to participate in the study, students had to: (1) identify as Black, Indigenous, or a Student of Color; (2) identify as having a dis/ability (or dis/abilities); and (3) have completed at least one semester or quarter at their current four-year institution. Participants did not have to be registered with their campuses' Disability Resource Center to be eligible to participate in the study.

Twenty-three students between the ages of eighteen and thirty-four participated in the qualitative questionnaire portion of the study. Ten of the survey participants met with me for informal, semi-structured interviews (Table 3). Interview participants ranged in age from nineteen and thirty-four and represented five college and university campuses in California. Participants identified across a range of racial/ethnic identities: two participants identified as Black or African American, two participants identified as Korean, two participants identified as biracial (Black-Mexican and Black-Guatemalan), one participant identified as Indian, one participant identified as Latina (Mexican-Guatemalan), one participant identified as Filipina, and one participant identified as Mexican-American. Participants also identified across dis/ability labels (e.g. Traumatic Brain Injury, Major

Depressive Disorder, Type 1 Diabetes, chronic allergies/illness) and many had more than one dis/ability. The majority of participants had attended K-12 in California schools. Seven participants attended public universities or colleges, two attended a private, Predominately White Institution (PWI), and one participant attended a private, Christian college. While six participants had registered for campus' Disability Resource Center, not all participants utilized accommodations offered to them; four participants did not register for services. Many participants identified as having more than one dis/ability.

Table 3: Research Participants

Participant	Age	Dis/ability	Race/Ethnicity	University/ College	Registered with DRC?
Tiffany	27	Traumatic Brain Injury	Black or African American	Public	Yes
Baudelaire	21	half deaf or deaf	Mexican American	Public	Yes
Susana	23	Major Depressive Disorder; General Anxiety Disorder	Filipina	Public	Yes
Bea	21	Type 1 Diabetic	Latina; Mexican- Guatemalan	Public	No
Alex	21	depression anxiety	Asian; Asian-American Korean	Private	No
Micah	20	chronic allergies/ illness; Tourette's Syndrome	Indian	Private	Yes
Rodrigo	34	head trauma; PTSD; tinnitus; hearing impaired	Korean	Public	Yes
Marisol	34	physical and mental	Afro-Latina (Black-Mexican)	Public	Yes
Kennedy	19	cognitive processing disorder	African American	Private, Christian	No
Andrea	29	General Anxiety; Depression; Adjustment Disorder	Biracial - Guatemalan/ Black or African American	Public	No

Data Collection

I collected data through two methods: a) a qualitative questionnaire on *SurveyMonkey* (Appendix A); and (b) two 60-90-minute informal, in-depth interviews with participants (Appendix B). The qualitative questionnaire allowed me to obtain breadth on students' experiences and triangulate my interviewing findings while interviews provided depth. The questionnaire included questions on: (1) demographics; (2) disability services and campus climate; and (3) interest in participating in an in-person or virtual interview.

I modeled my interview protocol after Seidman's (2006) three-step series. Seidman's (2006) series highlights the importance of context in relation to phenomenological experiences and the meaning that people ascribe to those experiences. Instead of three interviews, I met with the majority of participants twice; one participant met with me three times and another participant met with me only once. The first interview focused on students' experiences in K-12 (and community college, if applicable) which allowed me to better contextualize their experiences at four-year colleges. The second interview focused on their experiences at their college or university. The interview guide is located in Appendix B.

Data Analysis

I audio-recorded interviews with participants' consent and transcribed the interviews. I followed Harding's (2013) four-step process for thematic analysis. Thematic analysis allowed me to identify and organize patterns and themes in an accessible and flexible way (Braun & Clarke, 2012). First, after reading transcripts thoroughly, I identified categories. Next, I began coding alongside transcripts. After coding, I placed these codes

into categories and uploaded a preliminary codebook onto *Dedoose* software where I continued to review and revise the codebook. I revisited the first three steps multiple times as I collected and analyzed data in a “loop” (Bassett, 2010, p. 504). Last, I identified findings and themes based on: (a) commonalities, differences, and relationships; and (2) their relevance to my research study. While interviews constituted my primary source of data, I also coded questionnaire responses using the finalized codebook to triangulate my findings from the interview data.

Credibility and Trustworthiness

To ensure the validity of my research methods, I used triangulation, member checking, and a methodological journal. Triangulation refers to the “process of using multiple perceptions to clarify meaning, verifying the repeatability of an observation or interpretation” (Stake, 2005, p. 454). I coded qualitative questionnaire responses, as a secondary source of data, to check if my findings were similar to the experiences of participants who did not want to meet for interviews. Second, I used member-checking, which refers to “a quality control process by which a researcher seeks to improve the accuracy, credibility and validity of what has been recorded during a research interview” (Harper & Cole, 2012, p. 1). According to Creswell and Poth (2016), “this approach... involves taking data, analyses, interpretations, and conclusions back to the participants so that they can judge the accuracy and credibility of the account” (p. 261). I provided interview participants with the option of reviewing their transcripts. Last, I kept a methodological journal. Methodological journals can also help researchers “step back” and “take a fresh analytic look” as well offer a place to record thoughts, feelings, or views and

reflect back on them (Charmaz, 2014, p. 167). Each of these allowed me to establish trustworthiness and credibility of my findings.

Researcher's Positionality

I began this project informed by own lived experience and embodied knowledge as a Disabled Latina navigating the education system. I also had previously worked as a Direct Support Person for college students with developmental and intellectual dis/abilities. In some ways, my experiential knowledge provided me with an insider perspective. While I share some of the same social locations of participants in the study, our experiences also differ in significant ways. I am light skinned which gives me access to certain forms of privilege in relation to whiteness and white supremacy.

Findings

DisCrit asserts that racism and ableism are not only normalized, but that they are deeply interconnected and work together to uphold ideologies of white supremacy (Annamma et al., 2015). It also recognizes that whiteness and ability are forms of property which keep “marginalized groups economically fettered by not providing access to fully participate in all aspects of society” (Annamma et al., 2015, p. 24). Centering carceral ableism and sanism, I examine how particular institutional policies and practices marginalize and pathologize Black students and students of Color who were labeled or identified as being dis/abled. As Ben-Moshe (2020) argues, “incarceration does not just happen in penal locales,” but is “a logic of state coercion and segregation of difference” (p. 15). First, I argue that colleges and universities policed definitions of dis/abled identity. This is evidenced in particular practices and policies which focused on regulating and

restricting access. Second, I argue the accommodation system was focused on carceral control and surveillance of dis/abled bodies rather than accessibility. Third, I argue that dis/abled students, particularly Korean men in the study experiencing mental health crises or distress, were pathologized and criminalized on campus. Last, I highlight the ways in which students in the study resisted pathologizing and criminalizing discourses.

Policing of Disabled Identity

Disability Resource Centers in the study function to regulate and restrict access to services through the policing of dis/abled identity. While these centers are often positioned as a resource on campus for students with dis/abilities to utilize (and it is for certain students), students' counternarratives revealed the ways in which these services policed narrow definitions of dis/ability and regulated and restricted access to dis/ability-related support. In other words, these centers conferred rights (quite literally under federal legislation) only to students who it considered worthy and deserving.

All five campuses required students to provide medical documentation to register for disability support services. This privileged students with dis/abilities “thought to be discernable, rather than cognitive and intellectual disabilities, chronic pain conditions like fibromyalgia or migraines, and depression” and often created access barriers for Black, Indigenous and students of Color (Puar, 2017, p. xix). Decades of research has documented the persistence and pervasiveness of medical racism, barriers in obtaining services and healthcare, and racial disparities in access to doctors and medical services (Ben-Moshe & Magaña, 2014; Feagin & Bennefield, 2014; Magaña et al., 2012). One survey participant, a Black female student who had severe migraines, explained how she did not have access

to doctors who believed her which prevented her from obtaining medical documentation to register for services:

No, I am not registered [with the Disability Resource Center], but [I] tried to more recently. However, since I do not have enough doctors taking my condition seriously, I did not have all of the documentation to prove that my migraines actually have the effect that I say they have. I met a doctor who believed me and diagnosed me. I was sent to a neurologist who also believes me. However, I still need further testing to determine what I am dealing with and get registered.

Requiring medical documentation not only exacerbates existing systemic inequalities, it also functions as a form of policing by regulating and restricting who has access to dis/ability-related support services. Disability Resource Centers in the study often functioned as gatekeepers of access. Rather than providing opportunities for *all* student with dis/abilities, it only provided these opportunities for students who were able to obtain particular forms of documentation. Students who “lack[ed] a ‘proper’ read (read: medically acceptable, doctor-provided, and insurer-approved) diagnosis for their symptoms” were not afforded the same access to dis/ability-related support (Kafer, 2013, p. 12).

Disability Resource Centers policed students with dis/abilities in other ways as well. Some students shared how they had provided medical documentation, but it was rejected for not meeting particular criteria. Marisol, who identified as Black and Mexican and had physical and mental dis/abilities that evolved from having childhood cancer, had her medical documentation rejected twice. First, Marisol’s documentation was rejected because her dis/abilities were not deemed sufficient to qualify for support from her institution. She recounted,

So, I made an appointment and that was with one of the advisors, the intake advisors, and just when I went to check in she was very rude, the girl at the front, but when meeting with [the intake advisor], I brought all my paperwork and to him.

It was, like, not sufficient in his book like, “Well, this is not much of a disability.” I’m like, “Well, how - I mean to me I felt like – who the hell are you going to tell me what a disability is or not because you work here?”

The second time Marisol’s documentation was rejected because it did not show that her dis/abilities were chronic. Considering that Marisol had multiple diagnosed dis/abilities, her experience illustrates the ways in which dis/ability is socially constructed differently across spaces (i.e. medical institutions and higher education) and these different constructions have institutional consequences. The institutional response to Marisol’s documentation, rejection, also illustrates how Disability Resource Centers regulated and restricted access.

Rodrigo, a Korean student and veteran of the Marines, had been encouraged to enroll with his campus’ Disability Resource Center office by the director following a negative interaction with a professor. He also had his documentation rejected. He recounted his interactions with the department chair and the director of the Disability Resource Center:

I mean, I even had one instructor call me out on my headaches and I was just like, “Damn, OK.” I didn’t know it was going to come down to this, but I go to the chair and I go, “Look, this is what I have and you need to like give me an individual program. You need to tell your instructors to give me waivers for certain days when I don’t come to class or whatever.” Um, and then so-so he, so the chair... he called up his good ole friend which was the director of the [Disability Resource Center] and she just said, you know, “Come in and-and we’ll take care of you,” but, like, when she said we’ll take care of you, she didn’t do a damn thing. I-I went in and I still had to apply like any other student. I thought they were gonna help me out by walking me through the application, but the-the hard part about that was when I was applying for the [services]. They required documentation of what disability you have. So, I-I it wasn’t enough that I submit my VA documentation form. They wanted doctors’ letters...

Rodrigo's narrative reveals how the office did not "take care of" him and rejected the medical documentation he provided because it did not specify what his dis/abilities he had. Policies such as medical documentation undermine institutional goals of creating a more equitable and inclusive campus for students with dis/abilities. Students' counternarratives reveal how resource centers were more concerned with policing definitions of legitimacy than providing access to *all* dis/abled students. These resource centers functioned as gatekeepers and regulated who had access to accommodations.

Carceral Accommodations

College and universities must comply with federal laws and regulations regarding dis/ability discrimination and access. Within higher education, Disability Resource Centers ensure compliance and regulate the distribution of dis/ability-related resources. While the purpose of these services is to ensure that students with dis/abilities are provided equal access to education, existing policies and practices undermined this. Students' narratives reveal how the accommodation process was focused on carceral control rather than meeting the access needs of students.

Students discussed how the accommodation process was difficult to use and did not reflect the realities of their lived experiences. Disability Resource Centers emphasized following instructions (which were often complicated) and penalized students who did not follow instructions (i.e. not providing the accommodation). The penalization, or punishment, of students who did not follow instructions demonstrates how carceral control, and not equity, was the focus of the accommodation system. For instance, Tiffany recounted an interaction she had with Disability Resource Center staff while scheduling

test-taking accommodations. She was unable to schedule accommodations ten days in advance (her institution's policy) because it was the beginning of the term. When she went to the Disability Resource Center for support, she encountered hostility from staff. She explained,

First of all, like, how it goes, how it's supposed to go, I'm supposed to um go through the portal and schedule the test ten days before the test, but the test was given the first week, so, like, that wasn't possible. And I'm like, "I understand that. Why can't you guys understand that?" And then, like, I would go to the front desk lady, the receptionist, and I would try to talk to her and ask her if I could be seen and she would be like "No, you have to make an appointment," but I'm looking in their office and I'm seeing them sitting there. I know they're probably doing paperwork, but this, but I'm asking for a brief five minutes and I just feel like she wasn't being - I don't want her to be my best friend or be nice to me in any way, but be professional and I just feel like she was being rude and short-worded with me. She was just, "No, no. You can't. You can email them." Like, it was just like, for real? Why are you being like this? I'm not in trouble. I'm here 'cause I need help and you're here to give me help and not give me drama, you know?

Tiffany's encounter reveals how the existing policy made it difficult for her to use her accommodations. It also penalized students for things that may not be in their control such as a professor scheduling an exam at the beginning of the term. Tiffany also explains how she felt like she was in trouble while she was asking for support from the resource center – underpinning the punitive nature of the interaction.

Rodrigo identified several issues with scheduling accommodations through the resource center. These included the redundancy of the system as well as the ways in which students were penalized:

Bro, so what happens is at the beginning of the semester you have to go to the [Disability Resource Center] website and then you have to click on the classes that you want accommodations in, so it defeats the whole purpose of being disabled because you have to manually go in and say, "I want disabilities services for this class." It should be automatic. It should be automatic every semester but every semester you have to go in and select which classes you want disabilities in and

when you click which classes you want disabilities in, you have to click which accommodations you want in that class. Such as you want front seat, you want notetaker, you want extra test time. It's like why can't you just make it automatic and assume you need everything you know what I'm saying? Yeah and so, if you don't do that, you don't get disability accommodations for the rest of the semester. If you do it too late, you don't get it. You don't get anything.

Rodrigo's counternarrative reveals not only how the system was redundant, but also the ways in which the system penalized students by withholding accommodations if they did not follow instructions or did not complete the form before the deadline. It is important to note that other studies have also documented ineffectiveness of the accommodation process as a barrier for students with dis/abilities (Lyman et al., 2016; Marshak et al., 2010).

Disability Resource Centers focused on carceral control through the regulation and surveillance of resources which undermined providing equitable access. Research on students with dis/abilities has documented that faculty hold perceptions of accommodations as having an unfair advantage or cheating (Denhart, 2008; Frymier & Wazner, 2003). Students in the study explained how they (or other students who used accommodations) were labeled as "cheaters" or "gaming the system." For example, Tiffany, in her questionnaire response about using accommodations on campus shared her concerns requesting to be excused from an exam:

I recently had a vehicle accident, so I had to ask to be excused from test taking. Because of the level of difficulty of these courses, I was very hesitant. I didn't want to thought of as a "cheater who was looking for an easy way out." Nevertheless, I have been given accommodations that will grant me the time needed.

Alex, a Korean student who identified as having depression and anxiety, offered support of this theme. Alex explained why he did not register for services on campus because of teacher perceptions:

I know that like a lot of professors aren't very, like, open to like – or they feel like having to provide these accommodations is a burden on them because it's like, “Oh, like, you know, why is it like, fair for you to get extra time or like get extra time and be in like a separate room?”

The perception of accommodations as cheating, and students who use accommodations as cheaters, reveals how particular discourses criminalize difference. These perceptions were then used to restrict the autonomy of students. Susana, a Filipina student who identified as having depression and anxiety, recounted an experience she had in the testing office. The testing office was where students who had been approved for test-taking accommodations could take exams in a distraction-free environment. Susana requested to bring her stress ball into testing room and was denied. She explained,

Because I remember going in... for one of my midterms, I asked just the faculty there in the testing office, “Hey, could I have my stress ball?” And they're like, “Well, unless it says on your accommodations you won't be allowed to have it.” And I thought it was weird because in the lecture hall, I could just bring it out during an exam and have it. They just look at it and it's fine. I don't have to have any paperwork to show that I can have a stress ball. But, in that setting it's like, well, it has to be on your accommodations. So, I actually had to make an appointment to have a stress ball.

Susana reflects that she would have been allowed to have a stress ball if she had taken the exam in her lecture hall, but was unable to bring it into the testing room unless she filled out paperwork and made an appointment to have it approved. She continued,

[The Disability Resource Center staff] wanted to make sure that, you know, it wasn't... Any part of it had answers in it or anything like that. Because sometimes, I think, the director told me that some people need to wear hats because of surgery or something. And they wanted to make sure that their hat didn't have any notes or anything like that, right. And so, it was just more of making sure that, you know, there's no... It's just more of like, accountability. Bringing in stuff, making sure it doesn't have answers.

While Susana reflects on this as a form of accountability, the presumption that students would use devices such as stress balls or hats to cheat reveals the carceral logics at play. Disability Resource Centers did not merely provide accommodations, but also to surveilled students using those accommodations.

Criminalization of Dis/abled Students

Black students and students of Color belong to groups that are historically criminalized within racist discourses which has resulted in the hyper-surveillance and policing (Davis, 2003; Haley, 2013; Haley, 2016; Escobar, 2016). Researchers have documented that these discourses negatively affect the experiences of Black students and students of Color on college campuses who report experiencing increased surveillance (McCabe, 2009; McCormack, 1995; Smith et al., 2007; Solórzano et al., 2000). Students who occupy multiple marginalized identities are especially susceptible to pathologization and criminalization (Annamma, 2016).

One student reflected on how testing rooms in their Disability Resource Center physically resembled jail cells. While on a tour of the Disability Resource Center, Marisol visited one of these rooms. She shared,

Um, even when I went to go you know I went to go see like their testing room she kind of gave me a tour of their area. It looked like a jail cell honestly because there's, like, there's like a monitor... I just felt like I was in a federal penitentiary taking an exam. I'm like, "Okay, well, I mean, I have more anxiety [with] you guys watching me. On not only on one camera, but there is a camera on every angle from me and you have a monitor upfront?" To me, I thought it was just like too much.

This sense of feeling watched can be especially harmful, and even symbolically violent, for Black students and students of Color who encounter other forms of racialized surveillance on campus. As Marisol discusses, being "watched" can have physiological

effects on students and cause an additional layer of distress. Surveillance of students with dis/abilities also happened outside of the resource center.

Two students in the study had encounters with campus police. Rodrigo had been detained by campus police three times. While this occurred at his community college, I discuss it here because it shaped his experiences at his four-year college. In his first encounter, Rodrigo had become upset during a class debate about whether the U.S. actions were justified during Desert Storm. Rodrigo described himself as “really pro-military at that point,” so when another student made disparaging comments about the military, he became “infuriated” and threw a chair toward the student. Rodrigo explained what occurred after:

And, and the instructor... was Vietnamese and her father was in the Vietnam War and so, she understood what military trauma is, was, and so, so she empathized with me, and, but at the same time she had to enforce the policy of the school. And so, she pulled me to the side and she said um, “I’m gonna need you to step out of the class, I’m all for veterans, I support everything, but what you just did is against school policy. And as much as I’m for supporting you, I, I, have to stand up for this or I’m going to lose my job. I am going to have to call campus police.” And I was just like, “Okay, whatever.” And so, they called campus police. Campus police came over and they took me into their little, their little hut. It was a small kiosk and they called it their “Holding Cell” and I went in there and they just sat me there and then the lady, she was actually a veteran too, the lady was just like “Oh, you’re a veteran, what branch?” I said, “The Marines” and she goes, “Oh, I was in the army.” Um – and she was like, “Yeah, my husband’s in the Marines and he’s, he’s all messed up from the war and everything and so I understand where you’re coming from, but you can’t be doing that anymore” and then she told me, uh – “This is your warning and I am just going to have you sit here and cool off for a couple hours.” And then, so they let me sit there, cool off, and then um, she asked me if I’m okay and then I was like “Yeah, I’m fine” and she’s like “OK, this is your warning” uh “it’s not gonna go on your record, but if you do it again, we will charge you and we will hand you over to [the city’s] P.D.” and then so uh, I was about to get suspended, put on probation, but luckily none of that happened...

While Rodrigo's professor recognized that he may be experiencing military *trauma*, she still called campus police to respond because that was the policy at the college. The sergeant also recognized that service in the Marines could cause a person distress, but still responded by detaining Rodrigo in a room known as the "Holding Cell."

In the second encounter outside the classroom, a fellow student called Rodrigo "messed up," which Rodrigo described as triggering. He recounted what happened:

And then, like, coming from war, I'm not gonna lie to you. I still do it now, uh I still do it every day actually uh, I carry a knife with me, why? Because I've been traumatized, I'm terrified, you know, like I don't know if we engaged with somebody in Iraq and their family is over here trying to get revenge on us. I don't know this but I have to assume the worse and hope for the best so I carry a knife around for protection. I don't go around antagonizing anybody or anything, but when that kid said, "I was messed up and needed help," it really triggered me cause, how you came unprepared, and you talk shit to me? Like, OK. So, I pulled out my knife and flipped it open, and I was like, "Do you want to start to something because you are being hostile towards me and I will neutralize the hostility," and then and then he started running away and he called campus police on me again.

Rodrigo was suspended for a term, not allowed to attend school full-time, and the incident was recorded on his record. In his last interaction with police, Rodrigo was high during class and the professor called campus police. Rodrigo explained that he began smoking weed after his squad leader died during combat. He recounted the encounter with police:

And uh, it wasn't the same sergeant, but it was actually the director, I don't know. He was in a suit and tie and he was in charge of the campus police... and then he was like, "Are you high?" and I was just like, "Yeah, I think I am" and then they interrogated me and then they put me in holding and they were like, "Sober up." And then I sobered up and then I explained the story to them again and then they were like, "OK, you are done here." Like, "You, um, you need to stop, you need to stop. One more you are not gonna be able to attend school anymore."

In all three encounters, which varied in terms of the events leading up to them, the institutional response was to criminalize his actions. While the professor in the first

encounter and the sergeant recognized that Rodrigo may be struggling with trauma from the military, the institutional response was to remove him temporarily, and then permanently if it happened again. In other words, Rodrigo's "military trauma" was pathologized and criminalized, and he was labeled as dangerous. The institution perpetuated further violence through racial criminal pathologization – "the inseparability of racial criminalization from pathologization, especially sanism" (Rodriguez et al., 2020, p. 5).

The second student who had encounters with campus police was Alex. Leading up to his encounter with police, Alex was feeling anxious and sent a text message to a friend about wanting to harm and kill himself. He had previously struggled with suicidal ideation and had prior suicide attempts. Alex explained how his friends went to his dorm room to check in on him. When they realized Alex was not there (he had gone to the dining room), they contacted campus police and notified them that Alex was experiencing a mental health crisis. Alex explained,

And then like, as I'm making my way to the dining hall though, I get like a call from like [campus police], like a [campus] officer and, and they're just like, "Hi, like, can you like stay where you are? Like, we want to like talk to you." And I was just, like, "Fine, like, I guess." I mean, it's like [campus police], like, what am I going to do? Like I can't run away from them, you know? So then, like a [campus police], like car, like pulls up to me and then they're just like talking to me about like, you know, my mental health symptoms and everything. And then I guess, I guess like there were also like the crisis intervention center people were also like on the phone with [campus police] while they're having like this conversation with me because I think they needed like some pointers about how to like, assess like my mental health state and whatever. Then like, I only learned this like, after, like when I was like having like my chat with my mentor after I got after like my 5150 was over.

Alex was placed in the back of the campus police vehicle and involuntarily escorted to the hospital. When he arrived at the hospital, they had taken all of his personal items. Alex was

required to attend therapy sessions in order to be considered for release. After being released, Alex explained that he felt resentful toward his friends for reporting him. He shared,

Yeah, so I still remember like, after I, after I was- yeah, after I got back to campus and like my mentor wanted to check up on me, I told him like straight up, like, "I'm very resentful of the fact that you did that. Cause like, you know, now I have like this medical bill," like, you know, again, like with the low-income factor, I was like, "Now I have like this \$700 bill. Like, how am I supposed to pay this?" And I'm like, you know, whatever. Like, I mean, it's not like I couldn't pay it like right off the bat. Like I definitely had, like, I had the privilege of having like a savings account with like a like, you know, that could cover like, that emergency medical expense. But I was still very resentful, like, you know, like, because of you I have to like, you know, go through this terrible experience.

Alex explained how coerced medicalization was a terrible experience and caused him financial distress. After his release, the institution "strongly encouraged" him to attend therapy on campus. The therapist he was assigned to was not familiar with the needs of Asian American students which resulted in Alex experiencing further distress.

Resistance

Students' counternarratives reveal the ways in which they were pathologized and criminalized on campus. Some students, however, shared critiques of how the campus could respond better to their needs while other students recognized how the campus was limited in their ability to respond or rejected the institution altogether. These students resisted dominant narratives which located their experiences as internal, and placed the burden on students. Students in the study identified the ways in which institutions failed them.

Alex recognized the ways in which the campus responded poorly to his situation, and did not want other students to have a similar experience. He felt that campus could do more to support students prior to being in crisis. He explained:

I mean, to be frank, I feel like they, I mean, I feel like [the campus] also should be, you know, helping people who, you know, preventing people from getting to that point, really like doing more like preventative, like therapy than like more like reactive, you know, therapy after the fact... because I'm like, you know, I wouldn't want other people to go through like the same thing that I did, you know, so hopefully they can get that preventative treatment, through like the student health center. So, yeah.

Alex identified a lack of access to preventative therapy. While Alex's institution had therapy for students, he described it as "short-term," with a cap on the number of sessions students could attend. As Alex explains, the institution only had structures in place to respond reactively to mental health crises. These responses could cause additional distress as what happened with Alex.

After Rodrigo's encounters with police, he distanced himself from both his two-year and four-year college. He recognized how institutions failed to respond to his needs. He explained,

Um, I-I was just like, "You know what? I'm just gonna go to school and I'm just gonna finish it." And I was kind of, I kind of change everything to the point where I decided I'm no longer gonna socialize with anybody. I'm no longer gonna, you know, actively join clubs or anything, I'm not gonna do. All I'm gonna do is go to school and leave school. Go to school, leave school. That's it, I'm not gonna do anything else. and 'til this day that I still do it, I still do just that. I have no friends on campus. I don't know any of the professors. I don't care. I'm just going to school. And I just want to pass. Get my degree and leave and so, that method has proven to work 'cause I haven't had any incidents or anything. Uh, for now.

Institutional responses often place the burden on students to change rather than recognizing the ways in which they fail to meet the needs of students with dis/abilities on campus.

Rodrigo rejected institutional space by severing relationships with professors and not participating in campus life.

Other students had critiques of Disability Resource Centers. Marisol described her center as “completely backwards.” She explained:

I mean, I just wish there was a whole other way for some of these programs, I mean especially the disability program to be, you know, at least, I mean, noted in this orientation, like, the mandatory orientation. Some of these programs could be talked about because, I mean, I would say I’m a prime example as to what happened. There is no support system, unfortunately. I mean yeah, they have this vision that you get here and you’re supposed to learn – already how to walk, which is true to some degree, but that’s not for everybody. So, I think my experience would’ve been a little bit different had it not been for this- you know, right now, I’m still not getting notes for some of my classes and I’ve already asked for notes two times. And I’m already halfway through the quarter. So that right there is like, who do you hold accountable? I’ve done my part, where is the school doing their part? So, that’s all.

Marisol recognized that the burden of access was placed on students with dis/abilities, and it was difficult to hold the institution accountable. Rather than acting as a “support system” for students with dis/abilities, Disability Resource Centers focused on carceral control.

Discussion

As a neoliberal institution, higher education embodies carceral logic and carceral control. As Adams and Erevelles (2016) argue, schools “are not just conduits to the prison system, but also agents of the same carceral racist logic, even in the absence of imprisonment” (p. 137). In other words, prisons and other sites of confinement are not the only places and spaces where carceral logics exist. As students’ counternarratives show, higher education also acts as agents of carceral racist logic.

Within a DisCrit framework, we can see how students with dis/abilities in the study encountered particular forms of policing and surveillance on campus through

pathologization and criminalization of difference. Rather than centering equity and justice, Disability Resource Centers were focused on policing and surveillance of dis/abled “bodominds” (Schalk, 2018). This reinforced carceral ableism and sanism by creating systems which (re)produced carceral logic and carceral control under the guise of “extra protections” for students (Ben-Moshe, 2020, p. 17). These “protections,” however, restricted students’ autonomy and legitimized their further marginalization on campus.

Technologies of resources monitored and surveilled students, purportedly to prevent students from cheating. This, in turn, reinforces faculty perceptions that some students use accommodations to cheat and labels students with dis/abilities as deviant. Moreover, multiply-marginalized Black, Indigenous, and students of Color are especially vulnerable in systems focused on “carceral responses and corrections” such as “non-consensual medicalization” (Rodriguez et al., 2020, p. 10). These students encounter dual forms of surveillance as members of Black and communities of Color who historically experience high rates of policing and incarceration and as people with dis/abilities (Davis, 2003; Haley, 2013; Haley, 2016; Escobar, 2016). Both Rodrigo’s and Alex’s counternarratives reveal how pathologization of difference can put students of Color at higher risk of coming into contact with campus police.

In order to create equity and justice-oriented campuses, we must identify the ways in which campus practices and procedures perpetuate carceral logics. While these discourses hurt all students, they cause particular harm to multiply-marginalized Black, Indigenous, and students of Color. Colleges and universities must commit to anti-corrective and anti-punishment policies and practices.

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Chapter 5:

Conclusion

In this dissertation, I highlighted the counternarratives of Black students and students of Color at four-year colleges and universities. Dis/ability Critical Race Theory (DisCrit), as both my conceptual and theoretical framework, allowed me to capture the complexities, nuances, and richness of students' stories. DisCrit "privilege[s] voices of marginalized populations, traditionally not acknowledged within research" (Annamma et al., 2015, p. 19). By highlighting the voices of multiply-marginalized Black students and students of Color, I sought to understand how they navigated and resisted educational injustices and inequity. Through their counternarratives, I identified existing structures and policies which did not serve multiply-marginalized Black and students of Color well. I also found that Disability Resource Centers and college campuses embodied carceral logics which pathologized and criminalized students in the study. My dissertation findings indicate the need for intersectional framing not only in research, but in practice as well.

Key Findings

I organized my dissertation into three empirical data papers: "Counternarratives of Dis/abled Students of Color at Four-Year Colleges and Universities" (Chapter 2), "Racist Ableism in Higher Education" (Chapter 3), and "Carceral Ableism in Higher Education" (Chapter 4). These chapters can also be thought of as moving through research, theory, and practice. Each, though standalone, centered students' accounts of their multidimensional experiences on college campuses. Across these chapters, I examined how particular

structures, policies, and practices in institutions of higher education impacted students' day-to-day experiences, and how they perpetuated structural racism and/or ableism.

In my first data chapter, I found that multiple and intersecting forms of oppression compounded students' experiences with ableism. I showed that existing policies and practices of higher education institutions did not challenge structural ableism, further marginalizing and disenfranchising students experiencing multiple forms of marginalization, and reinforcing structural racism through race-evasive policies. Students in the study did not feel their experiences aligned with institutional definitions of dis/ability and shared how they experienced stereotype threat and imposter syndrome when identifying as a student with a dis/ability (Bahn, 2014; Steele & Aronson, 1995). Students' counternarratives revealed how institutional definitions of dis/ability were not objective, and that the ways in which campuses defined dis/ability legitimized or delegitimized students' lived experiences (e.g. medical documentation). Navigating oppressive racist and ableist structures and policies led to frustration and burnout in the form of dis/ability battle fatigue which builds on Smith (2004) and Smith et al.'s (2011) conceptualization of racial battle fatigue. Students in the study, however, developed navigational tools outside of Disability Resource Centers such as reaching to professors directly which better supported their access needs.

In my second chapter, I build on Perez Huber's (2009) framework of racist nativism to consider how higher education perpetuates racialized discourses of ability and dis/ability. These manifest as racist ableist microaggressions which position Black students and students of Color with and without the lived experience of dis/ability as intellectually

and academically inferior, lazy, and deviant. I build on CRT, DisCrit, and racist nativism to introduce the conceptual framework of “racist ableism” to theorize these intersections of race and ability. I use racist ableism to describe how particular forms of ableism, informed by racist attitudes and beliefs, oppress and dehumanize Black, Indigenous and people of Color based on actual or perceived (or, inversely, lack of perceived) dis/ability, thereby reinforcing the relationship between whiteness and ability. I argue that students encountered racist beliefs about the capabilities and abilities of Black people and people of Color which complicated and compounded their experiences accessing dis/ability-related supports. In other words, students were not encountering stereotypes about ability based on diagnostic labels, but, rather, they encountered racist stereotypes about ability in general which circulated not only in their four-year institutions, but elsewhere as well. Recognizing the ways in which ableism was based on not only ability, but also race and ability is crucial to disrupting racist ableism.

In my last empirical chapter, I extend DisCrit to demonstrate how colleges and universities act as sites of carceral logics which reproduce carceral ableism. Colleges and universities, particularly Disability Resource Centers, position themselves as authorities of dis/ability which discredits and delegitimizes the experiential and embodied knowledges of Black, Indigenous, and People of Color. Building on scholarship by Subini Annamma and Liat-Moshe, I demonstrate how institutions of higher education police, surveil, and criminalize dis/ability. Institutional practices, such as requiring students to register for services or using campus police in crisis response, reflect carceral logics. I identified how

institutional policies and practices reproduce carceral ableism and carceral sanism and pathologize and criminalize students on campus.

Implications

Dis/ability Critical Race Theory (DisCrit) allowed for my intersectional, interdisciplinary, and critical analysis of students' experiences in higher education. It provided me with a framework to disrupt binaries between able-bodied and dis/abled, and the impact they have on the experiences of students in the study whose experiences did not align within 'traditional' (re: white) understandings of dis/ability (Annamma et al., 2015). This allowed me to identify how Disability Resource Centers constructed dis/ability as located within individuals rather than recognizing the ways in which historical and legal aspects have shaped institutional definitions of dis/ability (Annamma et al., 2013). In this section, I address implications for research, policy, and practice in higher education.

Labels of Inclusion and Exclusion

All of the students in the study identified (to an extent) as having the lived experience of dis/ability, but not all students registered for or used services on campus. Their counternarratives revealed a politics of inclusion/exclusion which legitimized certain lived experiences (those who had institutional recognition) while delegitimizing others. This created a false binary between students who had institutional recognition and students who did not. Existing policies and practices only served students who had registered with their campus' Disability Resource Center. This meant that these centers did not serve *all* students who identified as or had been labeled as dis/abled. This is an important distinction

if we are to understand how these services work, and the ways in which they further marginalize and disenfranchise students who are not registered for services.

Across all five campuses, students had to provide medical documentation to register with their Disability Resource Center. This policy is problematic for several reasons. First, it ignores a large body of research which has documented medical racism and structural barriers to accessing healthcare and medical doctors for Black, Indigenous, and people of Color (Feagin & Bennefield, 2014). As Puar (2017) explains, “Access is theorized not only in terms of infrastructure, work, social services, and public space but also in terms of access to health itself” (p. 20). In other words, this policy was not race-neutral, and exacerbated existing inequities for Black students and students of Color in the study.

Second, requiring medical documentation as ‘proof’ not only delegitimizes certain lived experiences, it also positions doctors and other medical professionals as authorities on dis/ability and not students. This reinforced perceptions that people with dis/abilities are not knowledge-holders and limited the potential for dis/ability to be recognized as a particular lived experience. Recognizing dis/ability as lived experience allows students’ experiential knowledge to be recognized as a resource from which faculty, staff, and peers on campus could learn from. At the same time, “it is important to highlight the tension between the desire to untangle disability from medicalization and diagnostic categories and reclaim it as an identity and culture – and the ability (and sometimes desire) to become a subject under medical gaze” (Ben-Moshe, 2020, p. 29). Requiring documentation not only positioned medical professionals as authorities on dis/ability, but also Disability Resource Centers. Even when students in the study obtained medical documentation, they did not

always qualify for services. This revealed that there was subjectivity in the interpretation of what was or was not considered a dis/ability within institutional terms. As discussed in chapter four, the policing of definitions of dis/ability acted as a form of carceral control. This also privileged constructions of dis/ability rooted in hegemonic whiteness.

Last, as was the case with some students in the study, students may not feel comfortable identifying as dis/abled, so they do not seek out support even when they recognized particular services may be helpful. As Puar (2017) explains, “In working poor and working-class communities of color, disabilities and debilities are not non-normative, even if the capacitizing use of the category disabled may be tenuous and the reign of ableism is a constitutive facet” (p. 16). Similarly, Mingus (2011) observes, “Over and over I meet disabled women of color who do not identify as disabled, even though they have the lived reality of being disabled. And this is for many complicated reasons around race, ability, gender, access, etc. it can be very dangerous to identify as disabled when your survival depends on you denying it can be very dangerous to identify as disabled when your survival depends on you denying it” (para. 17). Students in the study, for many reasons, did not feel comfortable identifying as students with dis/abilities.

This suggests, on one level, that requiring medical documentation is not an objective or race-neutral policy. It excludes students who do not have access to documentation (who are more likely to be Black, Indigenous, or people of Color and/or low-income). One implication is to revise this policy so that any student, regardless of documentation, can register for support. On another level, we can begin to understand how racism and ableism are invisibilized and institutionalized in structures, policies and

practices in higher education, and that the medical documentation policy is part of a much larger issue. Future studies should further examine the role of Disability Resource Centers. In particular, these studies should explore race-evasive and race-conscious policies and practices. This includes exploring the perspectives, attitudes and beliefs of Disability Resource Center directors and staff on issues of race and dis/ability as they intersect with other social locations. Continuing to admit these students without existing structures in place to support their success or policies which do not consider their multidimensional identities will only perpetuate racialized inequity on college campuses.

Multidimensional Analysis and Experiential Knowledges

The second tenet of DisCrit “values multidimensional identities and troubles singular notions of identity such as race or dis/ability or class or gender or sexuality, and so on” (Annamma et al., 2013, p. 11). Students in the study revealed the ways in which race and dis/ability intersected, and the ways in which racism and ableism impacted their everyday experiences on college campuses. My conceptual framework allowed me to disrupt majoritarian narratives which distorted the experiences of students in the study. Solórzano and Yosso (2002) explain that “majoritarian methods purport to be neutral and objective yet implicitly make assumptions according to stereotypes” (p. 29). While they focus on racial analysis, this also has important implications for dis/ability (especially as it intersects with race). As Delgado and Stefancic (2017) explain, “If race is not real or objective, but constructed, racism and prejudice should be capable of deconstruction” (p. 51). Similarly, dis/ability, while often treated as a biological reality, it is also constructed. Many scholars and activists in these fields have advanced a social constructionist paradigm,

sometimes referred to as the social model of dis/ability, instead (Donoghue, 2003). Within this model, it states “that society has created disability by choosing not to remove structural constraints that would enable more people to participate and gain access to social resources” (Donoghue, 2003, p. 204). A DisCrit framing allowed me to recognize the ways in which race and dis/ability were socially constructed, and to acknowledge the ways in which students’ experiences with the constructs of race and dis/ability shaped their day-to-day lives. Future studies should examine other intersections, such as gender or class, and the ways in which they intersect with race and ability.

DisCrit also allowed me to center the counternarratives of students in the study. While counternarratives serve several important functions in research, they also attest to the need for experiential knowledge to inform policy and practice in higher education (Fernández, 2002). Centering the experiential knowledge of students allowed me see similarities in their experiences as well as the ways in which their experiences differed. For instance, many Black and biracial students discussed more overt forms of racism than other students in the study. In chapter four, the two students who had police encounters both identified as Korean and male, and were in distress at the time of these events. It is important for research studies to further explore how particular racialized groups experience the intersections of racism and ableism differently.

Last, many students in the study offered critiques of existing structures, policies and practices. Sharing students’ stories and centering their experiential knowledge is crucial to disrupting and dismantling racist and ableist structures on college campuses. As Tiffany, one of the students from the study, explains:

Um... I-I want, you know, people to know like [sighs] I don't know - my story I guess you could say. Like I feel like I don't know - looking at me - like would you assume the things that I said or the story? I don't know. I just feel like a lot of people don't know, you know? I don't know... an opportunity to share my story and for there to be a better - a better way - like - I feel like we are never gonna improve - you know, help - if no one knows the struggle that there are... Yeah, I mean, it's gonna be virtually impossible to eliminate things I went through for other people to not go through... the fact is, there's always gonna be some kind of struggle, but I want it to be less of a struggle because they know how to deal with it, you know? The know how to navigate through college, you know?

While Villalpando (2004) focuses on about support services for Latino students, their work has important implications for Black students and students of color with dis/abilities, and reimagining support services for these students:

Support services that build on... experiential knowledge... [to] ensure that they reflect an understanding that these students have often experienced varying levels of racism, discrimination, and other forms of oppression, instead of assuming that these experiences do not exist or are unimportant to their academic success. Support services and their providers must also recognize agency, vitality and strength... students have demonstrated just to get to college, let alone to persist, excel, and graduate from an alienating educational system. (Villalpando, 2004, p. 46)

Students' experiential knowledge provides a "resource stemming directly from their lived experiences" and is "an asset, a form of community memory, a source of empowerment and strength, and not as a deficit" (Villalpando, 2004, p. 46). These implications are especially important for Disability Resource Centers that continue to view students with dis/abilities through single-identity initiatives and through the medical model of dis/ability. This model, which views dis/ability as "a deficiency that restricts one's ability to perform normal life activities," is prevalent in the ways in the university and college approaches accommodations (Donaghue, 2003, p. 204). Such views do not recognize the experiential knowledge of people with dis/abilities as valid and legitimate. This has also important for faculty and staff who I found also position themselves as gatekeepers. Recognizing that

Black students and students of Color bring experiential knowledge into the classroom and the larger campus community, as both racially marginalized people and people with dis/abilities, requires a paradigm shift in the ways we view knowledge and the embodiment of it.

Racist Ableism

In this study, I also found that Black students and students of Color experience multiple and intersecting forms of oppression. The framework of racist ableism allows scholars to theorize at the intersections of race and ability and expands on traditional conceptualizations of ableism within higher education. Racist ableism allows us to understand how ableism is based on racialized perceptions of dis/ability rather than a person's diagnostic label. In other words, students were not experiencing ableism on the basis of dis/ability (alone), but on perceptions of race and ability together. This distinction is crucial if we are going to re-evaluate existing structures and policies within colleges and universities.

Higher education continues to treat policy and practice as single-initiative and single-identity. The experiences of students in the study attest to the need for intersectional frameworks which better capture their multidimensional experiences. Many students in the study were dissatisfied with their interactions with faculty and staff on campus around their access needs. Moreover, my findings indicate that Disability Resource Center staff perpetuate racial bias. Disability Resource Centers need to re-evaluate their existing policies and practices, and develop tools for working with multiply-marginalized students.

Last, this work has important implications not only for higher education, but also in K-12 contexts. Future research should examine how racist ableism manifests in teacher-student interactions in K-12 educational contexts, and its impact on students who are multiply-marginalized. It should also identify how racist ableism manifests at the structural level as I focused primarily on individual interactions.

Limitations

My study had several limitations. First, I focus on a small number of students attending colleges and universities in California. While their counternarratives point to areas where higher education can improve, I recognize the limitations of a small sample size. Future studies on multiply-marginalized students will allow us to obtain more breadth and depth on student experiences. Second, while I sought out to interview Native students, I did not have any Indigenous participants volunteer to participate in either portion of the study. For this reason, I do not address the particular ways in which racist ableism and other oppressive structures are impacting these students in higher education. Third, I did not interview faculty or staff at the institutions. I chose to focus on students since their voices are silenced in the literature and other studies have centered the perceptions of faculty and staff. Future research on the experiences of multiply-marginalized students with dis/abilities should address these gaps.

Conclusion

This dissertation contributes to a growing body of literature on the experiences of multiply-marginalized Black, Indigenous, and students of Color in higher education. The centering of experiential knowledge of multiply-marginalized students is crucial if we are

to address the needs of increasingly diverse student bodies. This work has important implications for faculty, staff, and policymakers. Within higher education, we must re-evaluate our role in perpetuating racist ableism, and seek to combat it. This will allow us to begin to dis/rupt and dis/mantle racist ableism in higher education.

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Appendix A:
Qualitative Questionnaire

1. What is your disability/disabilities? How do you describe the nature of your disability (or disabilities)?
2. When were you first diagnosed with a dis/ability (or dis/abilities) or (if you were diagnosed at a young age) when did you first become aware of your diagnosis?
3. What is your age?
4. How do you describe your gender identity?
5. How do you describe your racial/ethnic background to others?
6. What four-year college do you currently attend and when did you start (term/year)?
 - a. Were you a first-time college student?
 - b. If no, where did you attend before?
 - c. Why did you decide to enroll at your current institution?
 - d. Did you have any concerns about starting college?
7. Are you registered with your institution's disability services office? If yes, did you register upon entering college or at a later time? If you are not registered, please explain why.
 - a. If you are registered with a disability services office, do you currently or have you used accommodations or services in the past? If so, what are those accommodations? If you do not use accommodation or services,

why not? If you previously used accommodations or services, but stopped, please describe why.

- b. If you are registered with a disability services office, have the accommodations or services you received been helpful? If yes, in what ways have they been helpful? If no, in what ways have they not been helpful?
8. How comfortable do you feel requesting accommodations or modifications from professors (note: you do not need to be registered with a disability services office to answer this question)?
 - a. Have you ever experienced a situation where you were hesitant to request an accommodation or service? If yes, please describe that experience.
 - b. Have you ever been denied an accommodation or service? If yes, please describe that experience.
 - c. While you are not required to disclose the nature of your disability to receive accommodations or modifications for courses, have you chosen to share the nature of your disability with a professor or teaching assistant? What factors led you to disclosing your disability?
9. How would you describe your interactions with peers on campus? How do you feel your peers perceive you? What could peers do to make you feel more welcomed or comfortable on campus?

10. How would you describe your interactions with professors and teaching assistants on campus? How do you feel your professors perceive you? What could faculty and staff do to make you feel more welcomed or comfortable on campus?
11. While attending college, have you had a faculty member that shared the same racial/ethnic background and/or a disability? Do you feel having a faculty member with the same racial/ethnic background or a disability would make an impact on your experience?
12. How often do you interact with peers that also have disabilities? Where do these interactions take place (classrooms, events, clubs/organizations)? How often do you interact with peers without disabilities? Where do these interactions take place (classrooms, events, clubs/organizations)?
13. How often do you interact with peers that share the same racial/ethnic background as you? Where do these interactions take place (classrooms, events, clubs/organizations)? How often do you interact with peers that do not share the same racial/ethnic background as you? Where do these interactions take place (classrooms, events, clubs/organizations)?
14. Which aspects of your identity are most important to you? What aspects of your identity give you strength to persist in college?
15. What aspects of your identity (or how others perceive them) have been most challenging during college?

16. What are some stereotypes or misconceptions have you encountered regarding your racial/ethnic background, disability, and/or other aspects of your identity on campus?
17. Have you pushed back or challenged misconceptions or stereotypes regarding the nature of your disability or disability in general with professors, teaching assistants, other staff, and/or peers on campus?
18. Have you pushed back or challenged misconceptions or stereotypes regarding your race/ethnicity or race/ethnicity in general with professors, teaching assistants, other staff, and/or peers on campus?
19. Would you be interested in a follow-up interview either in-person or over the phone or an audio/video platform (such as Zoom)? If yes, please provide your name and email address. If no, please leave this section blank.

Appendix B:
Interview Guide

A. Life History (Interview One)

Introduction:

Hello, my name is Danielle. Thank you so much for agreeing to participate in the first of two interviews with me today. I will be asking you questions about your background and experience leading up to school. I am interested in learning more about you and your experience prior to beginning [college name(s)]. This will give me insight for our next interview where we will discuss more about your experience in college.

Procedures:

Before beginning the interview, I would like to review the informed consent form sent to you via email for review. I want to remind you that your participation in the study is voluntary. You have the right to withdraw from the study at any time and for any reason. When we finish both interviews, I will send you a copy of the transcripts for you to review. Upon reviewing, you have the right to request specific statements be withheld. Your name and any other identifying information will be assigned pseudonyms to ensure compliance with confidentiality and to protect your privacy as a participant. With your permission, I will audio-record our interview with an audio-recorder. Audio-recording allows me to more accurately capture your own words. If you prefer not to be recorded, I will take notes instead.

Before we begin, do you have any questions about what we have discussed so far?

Thank you again for agreeing to participate. Let's begin.

Semi-Structured Interview Guide:

A. Interview One: Life History (Interview One)

1. Tell me about your family or guardians.
 - a. What are your parents' or guardians' occupations?
2. What schools did you attend when you were growing up? What was your elementary experience like? Middle school? High school?
 - a. Tell me about your favorite teacher (or teachers). What were they like?
 - b. How would you describe your interactions with teachers overall?
 - c. What were your interactions with your peers like?
3. When were you first diagnosed as having a disability (or disabilities)?
 - a. How did your family respond to your diagnosis?
4. What was your outlook toward school when you started?
 - a. How has your outlook shifted or changed over time from elementary to middle to high school?
 - b. If you were diagnosed with a disability in K-12, what accommodations or supports did you receive in school?
 - c. Tell me about your experience during IEP meetings.
5. How comfortable do you feel sharing the nature of your dis/ability(/ies) with new people? Friends? Teachers?
6. Did any aspects of your identity (or how others perceive them) present barriers for you in K-12 school?

7. Were any aspects of your identity sources of strength for you in K-12 school?
8. When did you first consider attending a college or university?
 - a. Who or what was your biggest source of motivation when it came to applying for college?
 - b. Did you have particular concerns about college when you were applying?
9. Walk me through your process of applying to college.
 - a. Were you accepted to your first choice?
 - b. Did you attend your first choice? Why or why not?
10. Do you have any questions regarding the interview or anything else you would like to add before we wrap up?

B. Details of the Experience (Interview Two)

1. What initially drew you to applying to the institution you attended?
 - a. How has the institution lived up to or not lived up to your initial expectations?
2. What is your major? What factors led you to choosing that major?
3. What aspects of your identity have best prepared you for college?
 - a. What aspects have been most challenging?
4. Where have you found support in college?
5. What does being a college student mean to you?
 - a. What does it mean to those around you such as your family or friends?

6. Did you register with the disability services office? Tell me about that. If you have not registered with them, what has prevented or discouraged you from doing so?
7. Whether you are registered with the disability services office or not, how comfortable do you feel speaking to professors or teaching assistants regarding the nature of your disability?
 - a. How do/would you describe your disability to professors or teaching assistants?
 - b. How comfortable do you feel requesting accommodations or modifications?
8. How would you describe your interactions with faculty members or other staff such as Teaching Assistants? How do you feel faculty or staff perceive you?
 - a. How have faculty or staff contributed to or detracted from your success in college?
 - b. Do you feel comfortable informing professors or teaching assistants of your disability?
 - c. How often do/did you request accommodations, modifications, or other adjustments in your classes or discussion sections?
 - d. What do you wish professors knew about you and your learning needs so that you could work more effectively?
9. Tell me about your interactions with administrators such as the disability services office staff, financial aid representatives, librarians, etc.

10. How would you describe your interactions with peers in classrooms or other settings?
- a. How do you feel other students perceive you?
 - b. What do you wish other students knew about you and your learning strengths and weaknesses so that you could work effectively in specific scenarios such as group work?
 - c. What are some of your strengths?
11. Now, I'd like you to tell me some of the challenges you face day-to-day at the university.
12. Do you have any questions regarding the interview or anything else you would like to add before we wrap up?