

# How Students with Disabilities Cope with Bullying, Stereotypes, Low Expectations and Discouragement

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## Abstract

Using data from a multi-institutional grounded theory study, this paper details the thoughts, feelings, and behaviors that 59 U.S. college students with disabilities used to cope with ableist stressors in postsecondary learning environments. Specifically, this manuscript highlights the varied coping strategies students adopted as they responded to the following stressors: (a) bullying; (b) labels, assumptions, and stereotypes; and (c) low expectations and discouragement. The paper concludes with recommendations for practice.

*Keywords: coping, bullying, stereotypes, ableism, grounded theory*

## Students with Disabilities on Contemporary College Campuses

The number of students with disabilities enrolling in postsecondary degree programs has increased dramatically in the past two decades (National Center for Education Statistics [NCES], 2017). On campus, students with disabilities encounter unwelcoming learning environments characterized by pervasive ableism, disability-related stigma, and inadequate access to supports (Cawthon & Cole, 2010; Evans et al., 2017; Kattari et al., 2018; Olney & Brockleman, 2003; Saia, 2022; Trunk et al., 2020). In the introduction to a special issue on ableism, Bogart and Dunn (2019) defined “Ableism [a]s stereotyping, prejudice, discrimination, and social oppression toward people with disabilities” (p. 651). As a result of varied manifestations of ableism, students with disabilities find themselves forced to confront numerous obstacles to postsecondary success (Francis et al., 2019; Kattari et al., 2018; Kimball et al., 2016a). Unfortunately, the empirical literature concerning how students with disabilities adapt to and cope with obstacles in postsecondary education is relatively narrow, which complicates the adoption of evidence-based practices intended to support students with disabilities as they navigate unwelcoming learning environments (Kimball et al., 2016b).

In this manuscript, we seek to expand the knowledge base regarding the thoughts, feelings, and behaviors students with disabilities use to cope with ableist stressors in postsecondary learning environments. Drawing upon data from a multi-institutional qualitative study about the collegiate experiences of 59 students with disabilities, this paper highlights the varied coping strategies college students adopted as they responded to the following ableist stressors: (a) bullying; (b) labels, assumptions, and stereotypes; and (c) low expectations and discouragement.

## Literature Review

### Postsecondary Experiences of Students with Disabilities

Students with disabilities now attend postsecondary institutions at rates higher than at any other time in history (NCES, 2016). Literature also suggests that ableism, disability stigma, and inhospitable postsecondary learning environments contribute to decisions by many students with disabilities not to pursue disability accommodations in the postsecondary learning environment (Cawthon & Cole, 2010; Marshak et al., 2010). As a result, students with disabilities face unique challenges in their transitions to postsecondary education. That problem is further

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exacerbated by a dearth of high-quality empirical evidence about effective practice (Kimball et al., 2016c) and by widespread, well-documented confusion over how to effectively support students with disabilities (Cawthon & Cole, 2010; Kimball et al., 2016b; Prevatt et al., 2005). Part of the challenge that postsecondary institutions face in adequately supporting students with disabilities is that disability is itself a complex and not well understood construct (Evans et al., 2017; Friedensen & Kimball, 2017). That is, disability is simultaneously the product of underlying variability in the physiological or cognitive realities of an individual person and environments that render these variations more or less influential in a person's experiences of that environment. As a result, scholars themselves do not agree on how best to describe disability (cf. Evans et al., 2017; Friedensen & Kimball, 2017; Shakespeare, 2012) or even how to accommodate students with disabilities in postsecondary learning environments (AHEAD, 2012; Heyward, 2011). The net effect of this ambiguity is that students with disabilities face considerable stressors as they navigate disability stigma and inhospitable postsecondary learning environments.

### **Ableism and Disability Stigma in the Postsecondary Learning Environment**

Scholars working within critical disability studies describe the pervasive assumption of able-bodiedness as an oppressive ideology that uniquely affects those with disabilities (Charlton, 2006; Davis, 2006). Davis (2006) explained that historically, "People with disabilities have been isolated, incarcerated, observed, written about, operated on, instructed, implanted, regulated, treated, institutionalized, and controlled to a degree probably unequal to that experienced by any other minority group" (p. xv). Pervasive contemporary ableism impacts everyone, including college students. Fox et al. (2022) found that college students with disabilities reported higher financial, social, and emotional costs than students without disabilities, which led to correspondingly lower experiences of belonging, engagement, and support. In another study of college students with invisible disabilities, Kattari et al. (2018) documented student experiences with various manifestations of ableism including the policing of their bodies, internalized ableism, and their subsequent desire for disability justice.

Disability-based oppression is so pervasive that people with disabilities receive constant messaging about what they supposedly cannot do or achieve (Charlton, 2006). This deficit-laden messaging is often perpetrated by families, peers, and educators. For example, studies have shown that parents, teach-

ers, romantic partners, and strangers harbor negative perceptions of what is possible for people with disabilities (e.g., Alston & Hampton, 2000; Kama, 2004). These ableist borne stigmas have real consequences in the lives of college students with disabilities. One study found that almost a third of college students with psychiatric disabilities reported isolation, an inability to make friends, and encounters with discrimination (Megivern et al., 2003). In another study of 230 college students, Adams and Proctor (2010) found that students with disabilities scored lower on measures of social adjustment to college than their peers without disabilities. In a qualitative study about belonging, Vaccaro et al. (2015) found that college students with disabilities only felt they belonged in college when they were treated like a "normal or legitimate college student" (p. 684). Students with invisible disabilities must consistently deal with ableist microaggressions (Kattari et al., 2018; Miller & Smith, 2021) and they express mental exhaustion in taking on this emotional work (Kattari et al., 2018). Ableist college campuses can lead to what college students with disabilities in one study referred to as a constant fight against cycles of disempowerment on campus (Francis et al., 2019).

The cumulative burden of pervasive ableism and disability stigma can lead to grave academic and mental health consequences. Results from a recent national survey showed that compared to their non-disabled counterparts ( $N = 86,966$ ), students with disabilities ( $N = 6,382$ ) reported significantly higher prevalence rates of mental health challenges and were more likely to use mental health services (Aguilar & Lipson, 2021). The experiences with various manifestations of ableism contribute to decreased satisfaction with overall postsecondary experience (Fleming et al., 2017) and likely suppressed graduation rates as well (Kimball et al., 2016c). Those students who remain enrolled in postsecondary institutions find themselves forced to cope with ableism and the effects of pervasive stigma.

### **Coping**

In the psychology literature, the thoughts, feelings, and behaviors that assist individuals in navigating various life stressors are referred to as coping. Why is it important to understand coping? Skinner et al. (2003) explained:

How people deal with stress can reduce or amplify the effects of adverse life events and conditions, not just on emotional distress and short-term functioning, but also long-term, on the development of physical and mental health...[In essence] researchers maintain that coping matters. (p. 216)

The process of coping includes lower and higher order processes which can help assist individuals as they adapt to challenging life experiences (Skinner et al., 2003). Psychologists suggest that coping happens in two phases, primary appraisal and secondary appraisal (Folkman & Lazarus, 1988; Lazarus, 2000; Lazarus & Folkman, 1984; Lazarus & Launier, 1978). In the primary appraisal stage, people assess situations and their potential threats (Folkman & Lazarus, 1988). During the secondary appraisal stage, people identify and select particular resources they can use to cope with the event, issue, or situation (Lazarus & Folkman, 1984; Lazarus & Launier, 1978).

People make meaning of everyday stressors in very different ways. In essence, no two people have the exact same understanding of, or response to, a stressor. In fact, an incident or issue that might be a stressor for one person might not even register as a concern for another. As such, the meaning that different individuals assign to a particular situation can influence the coping strategy (or strategies) they adopt. The psychology literature on coping has documented countless strategies that individuals frequently employ. In an attempt to document the variety of coping strategies, Skinner et al. (2003) documented hundreds of ways individuals cope. Just a few of those coping strategies included: giving up, seeking assistance, avoidance, relaxation, confrontation, logical analysis, disengagement, perseverance, stoicism, altering plans, humor, and compliance. They went on to suggest that this multitude of possible coping strategies were best understood if arranged into core families (or categories) of coping. Those coping families/categories included: problem solving, information seeking, helplessness, escape, self-reliance, support seeking, delegation, isolation, accommodation, negotiation, submission, and opposition. An alternative approach to classifying coping strategies is based on the underlying psychological processes. For instance, Carver and Connor-Smith (2010) suggested there were four coping domains pervasive throughout the psychology literature. Those domains are problem versus emotion-focused coping, engagement versus disengagement, proactive coping, and accommodative/meaning-focused coping (Carver & Connor-Smith, 2010). Coping strategies can also be thought of as employing positive, negative, and neutral behaviors, but coping strategies themselves are not inherently adaptive or maladaptive. Instead, they can be maladaptive and/or adaptive depending on the person and situation (Carver & Connor-Smith, 2010). For instance, avoidance can be maladaptive when used as a response to a faculty member not providing appropriate disability accommodations, but adaptive

when dealing with a bully on campus. Skinner et al. (2003) suggested three attributes that should be considered to determine if a coping strategy is adaptive or maladaptive. First, one must consider the long-term developmental consequences of a particular coping strategy. The second consideration is the intensity of an experience, as subjectively understood by a person. Third is a consideration of an individual's overall skill set. In short, the effectiveness of a coping strategy can only be determined by considering individual strengths, short-term outcomes, long-term effects, and situational context.

### **Coping in College Students with Disabilities**

Although there is an abundance of literature about the phenomenon of coping, there is far less research about the ways college students with disabilities cope with the stressors described in the literature. Some studies focus on disability-related stressors and coping strategies that yielded less than positive educational or mental health outcomes. In a study about anxiety and coping among 257 college students, Mahmoud et al. (2015) found overly negative thinking led to maladaptive coping and increased anxiety. Findings from a different study of students with severe psychiatric disabilities suggested resilience could be essential for students with disabilities coping with the complexities of college learning and degree completion (Hartley, 2010). However, Hartley (2010) also noted that a number of risk factors decreased resilience and caused college students with psychiatric disabilities to leave the institution before completing their degrees. Those factors included: temporary cognitive impairment (e.g., periods of depression), pervasive social stigma (e.g., disability misperceived as lack of effort or aptitude), low academic self-confidence (e.g., internalized social stigma), and difficult peer relationships (e.g., lack of trust in others).

Other research has approached coping via a strengths-based paradigm. Vaccaro et al. (2019) documented how 59 college students with disabilities utilized creative coping strategies, drew upon past successes to develop successful coping patterns, and exhibited resilience when navigating collegiate learning environments. In another study of college students diagnosed with depression, Aselton (2012) identified main sources of stress as unclear career plans, the financial cost of college, and stressful interpersonal relationships with roommates. Students in Aselton's study reported using a variety of coping strategies, including talk therapy, physical activity, deep-breathing, journaling, marijuana use, music, and soliciting advice from others. In a study of 13 college students with disabilities enrolled in Chinese universities, Li et

al. (2021) documented how students coped with exclusion using positive solution strategies and self-adjustment strategies more often than using avoidance. In another study with 240 participants about the factors that contributed to academic performance, Becker and Chapin (2021) found that “54% of the students gave themselves credit for their own success in college. The reasons provided for success [were that] they studied, were determined, focused, and organized” (p. 88). Although they did not use the term coping, students certainly attributed various coping tactics to their success.

The third category of research has compared coping among students with and without disabilities. Hall et al. (2002) found students with disabilities exhibited higher resiliency and a need to achieve than students without disabilities. Moreover, students with disabilities also exhibited high goal-directed approaches and strong problem-solving skills (Hall et al., 2002). In a different study, Lukomski (2007) found that deaf students reported having significantly fewer difficulties in coping compared to hearing students.

In sum, the literature shows that college students with disabilities encounter a variety of stressors on campus which often require them to cope. However, there is limited literature, especially rich qualitative evidence, about the ways college students with diverse disabilities cope with collegiate stressors. The present study aims to address that gap.

### Research Design

This study is based upon findings from a constructivist grounded theory (Charmaz, 2014) study completed with 59 college students with disabilities at four universities. As noted by Charmaz (2014), “grounded theory methods consist of systematic, yet flexible guidelines for collecting and analyzing qualitative data” (p. 1). One overarching focus of the study was to understand how students developed a sense of purpose during college. A goal of constructivist grounded theory methods is to generate a theory. In a prior publication (see Vaccaro et al., 2018), we published a theoretical model representing the development of purpose for college students with disabilities. That model offered macro-level theoretical information about student meaning making and navigations through systems of oppression (including ableism) via the purpose development process. The present study builds upon the generalized nature of that theory and delves more deeply into micro-level emergent data illuminating the common forms of ableism our students experienced and the myriad strategies they employed to cope.

Constructivists believe that researchers should “stress social contexts, interaction, sharing viewpoints, and interpretive understandings. . .[and] view knowing and learning as embedded in social life” (Charmaz, 2014, p. 14). This insight is critical for our work because the experiences of college students with disabilities cannot be understood without understanding the contexts of pervasive ableism, including (but not limited to) social stigma, bullying, and inhospitable campus climates. As such, one focus of our study was to document the challenges students experienced. We also inquired about the coping strategies participants used to respond to these varied stressors.

For this project, we adopted a constructivist perspective on grounded theory (Charmaz, 2014). An assumption undergirding constructivism is that both the world and people’s perceptions of it are directly shaped by their actions. As a result, researchers seek to produce co-constructed meanings—rather than discover truth—through rigorous processes of data collection, analysis, and interpretations. We describe these grounded theory processes (e.g., theoretical sampling, constant comparative analysis, initial coding, focused coding, theoretical coding) in the forthcoming sections. Using these tools, we illuminated student-centered notions of three forms of ableism and the variety of coping strategies they used to respond to (a) bullying; (b) labels, assumptions, and stereotypes; and (c) low expectations and discouragement.

### Participants

During our recruitment phase, we contacted directors of disability services at eight postsecondary institutions in the northeastern United States. Due to the confidential nature of disability status, we asked disability services personnel to forward our study invitation to students with whom they worked. Five directors of disability services responded to our inquiry, and all agreed to share our study invitation with their students. At one of the five institutions that sent out our recruitment email, no participants volunteered, but we were able to recruit participants at the remaining four institutions. The final study sample was composed of 59 student volunteers from three public universities and one private predominately White university. The institutions included one small private religiously affiliated institution, one mid-sized state comprehensive university, and two mid-sized public research universities in the United States.

The resulting sample was composed of mostly traditional age (18-22 years) college students. Approximately half of all participants lived off campus while the other half lived in campus residence halls. Forty-five self-identified as cisgender women, 12 as cis-



gender men and two as transgender or gender-queer. Forty-five students identified as heterosexual, three as lesbian, one as bisexual, two as queer, two as questioning, and six students indicated that they preferred not to disclose their sexuality. The self-reported race/ethnicities of our participants reflected the historically White institutions from which they were drawn. A majority ( $n = 49$ ) reported being White. Other racial identities included: biracial or multiracial ( $n = 5$ ), Asian American or Pacific Islander ( $n = 2$ ), Latinx ( $n = 2$ ), and Black ( $n = 1$ ).

We asked all study participants to describe their disability in their own words instead of asking them to choose from a list of diagnoses or functional impairments. While most participants still used diagnostic terms, a few created their own descriptors such as “periods of depression and/or mania, anxiety and memory issues, and no use of right arm.” We honor their self-identifications in this manuscript by using their terminology throughout the paper. However, we also organized students’ terms into more formal disability categories recognized by NCES to determine the extent to which our sample reflected nation-wide student disability data (NCES, 2022; Raue & Lewis, 2011). Self-identifications of our participants closely mirrored the national statistics for the college-going population of students with disabilities (NCES, 2022; Raue & Lewis, 2011). In our study, student disabilities could be categorized as follows: a specific learning disability 23 (39%), Attention Deficit Hyperactivity Disorder (ADHD) 16 (27%), mental health diagnosis 14 (24%), physical disability 9 (15%), Autism Spectrum Disorders 3 (5%), deafness 2 (3%), blindness 2 (3%), a traumatic brain injury 2 (3%), or “other” health impairment 4 (7%). These percentages do not add to 100% because 42% of our sample self-identified as having more than one disability which is a frequent phenomenon in the literature (NCES, 2022; Raue & Lewis, 2011).

We used intensive semi-structured individual interviews. The simultaneous methodological rigor and adaptability of semi-structured interviews makes them well-suited for constructivist grounded theory (Charmaz, 2014). Using semi-structured interview protocols offers researchers the opportunity to vary phrasing and sequencing of questions so that the interview feels like a conversation (Charmaz, 2014). The interview protocol was crafted broadly to elicit responses regarding a variety of collegiate experiences including meaning-making, goal development, vocational/career interests, major and career-related decision-making, life goals, hopes, challenges, and supports. The questions about challenges and supports yielded much of the rich coping data shared in this

manuscript. We audio-recorded the interviews, transcribed them verbatim, and reviewed all transcripts for accuracy before subjecting them to grounded theory constant comparative analysis (CCA; Charmaz, 2014). We used three levels of grounded theory coding, including initial, focused, and theoretical (Charmaz, 2014). Consistent with CCA, we moved back and forth between collection, analysis, and writing throughout the duration of the study and revisited previously coded transcripts frequently to address emergent categories and to check our prior understandings of the data.

Around interview 25, we began to hear consistent patterned responses and achieved saturation soon thereafter (Jones et al., 2014, 2022). However, we used theoretical sampling and interviewed all 59 volunteers to document the nuance in emergent categories as we moved through the CCA process. Theoretical sampling is a strategy to “maximise opportunities to discover variations among concepts and to densify categories in terms of their properties and dimensions” (Strauss & Corbin, 1998, p. 201). To refine our emergent categories even further, we conducted follow up interviews. Although all 59 participants were invited, 34 volunteered to be re-interviewed. This response rate was a result of several factors including students leaving their institutions, changing their contact information, not responding to the invitation, or telling us they did not have time for a second interview.

We utilized a number of qualitative research strategies to achieve trustworthiness and credibility (Jones et al., 2014, 2022). First, we employed analytic triangulation between the research team members. Second, we used extensive discrepant case analysis to ensure that any emergent themes were representative of all (or most) participants. Third, we member checked with participants in person and in writing. Fourth, we invited peer reviews from disability scholars and practitioners to determine how well our analysis and conclusions matched the perspectives of experts. Fifth, we strove to achieve relational competence via extensive research team conversations about positionality and reflexivity. We reflected upon and discussed myriad ways our social identities, positionality, power relationships, and pre-understandings shaped both the process and products of our study (Charmaz, 2014; Jones et al., 2014, 2022). We are a team of scholars who identify as people with and without disabilities. Our team has interdisciplinary expertise; two members have a counseling and psychology background, one is in K-12 special education, and the others study higher education and disability. An important aspect of our positionality includes explicating how the re-

search team viewed disability. As noted in the literature review, the term disability carries with it a deficit connotation (Charlton, 2006), yet our team uses a strength-based lens to study students with disabilities. Although ableism may create roadblocks, we contend that it does not prevent students from persevering and achieving success.

### Limitations

As with any study, there are a few limitations. First, our sample was largely White. However, the sample reflected the populations of the U.S. campuses where we collected data as well as the national demographics of college-going students with disabilities who are also mostly white (NCES, 2016). The forms of ableism (bullying, stereotypes, low expectations, discouragement) and coping strategies uncovered in this manuscript may be transferrable information for educators in other post-secondary settings. However, it should be noted that this study was limited to a few schools in the United States. Another limitation is that the interviews were conducted by a small group of faculty researchers and trained graduate students. Despite regular team meetings to discuss consistency, interviewing skills varied among interviewers which yielded variations in depth and focus of the interviews. Finally, our initial research question was about the development of purpose in college. As is typical for grounded theory methods, unexpected categories can emerge. Our participants told rich narratives about collegiate stressors and related coping strategies that warranted attention by the higher education community. Had our main research question been about coping, this manuscript would certainly have been more robust. This article should not be read as a comprehensive review of collegiate stressors or coping strategies used by students with disabilities. Instead, it can serve as a starting point for future coping studies.

### Findings

This paper presents emergent categorical findings intended to illuminate how coping strategies vary widely in response to three common forms of ableism and illustrate the myriad ways students coped. We take this approach because there are hundreds of ways a person can cope, and scholars have warned about oversimplifying coping and coping categories. As suggested in the literature (e.g., Carver & Connor-Smith, 2010; Skinner et al., 2003), we do not oversimplify student narratives by labeling their coping strategies as effective or ineffective. Instead, we offer rich meaning making as evidence of the var-

ied ways college students with disabilities cope with pervasive ableism. Although there is overlap in the categories, the findings are divided into three sub-sections for ease of reading. The first section focuses on the various ways students coped with bullying. The second section discusses coping strategies students with disabilities used to respond to manifestations of pervasive ableism such as labels, stereotypes, and assumptions. The third section explicates coping strategies students used to navigate ableist attitudes of low expectations and discouragement from educators, peers, and family members.

### Coping with Bullying

Numerous participants dealt with treatment that could be understood as bullying. In their extensive review of bullying related literature and policies, Slattery et al. (2019) explained that there is no agreed upon definition of bullying and further noted that attempting to construct one would be impossible. Nonetheless, it is important to offer some insight into our decision to use this term. As such, we use bullying in this manuscript to refer to any offensive or “aggressive behavior that hurts, humiliates, or harms another person physically or emotionally” (Slattery et al., p. 231).

In this study, participants described and responded to various forms of bullying with a variety of coping strategies such as avoidance, speaking up, reframing, and outdoing the bullies. Landers, a student with dyslexia and speech apraxia, ignored bullying and name calling for a short time and then spoke up. He finally approached his instructor and said: “I’m having a problem. He keeps on making fun of my speech, and I’m just getting enough of it. It’s been a month already, so it’s time for it to end.” Nixon, another student with a disability would cope by not allowing things to bother him. He described bullies as belonging in a category of “negative” influences in his life. Nixon explained how he was subjected to verbal bullying in the form of negative comments about his disability:

Negative influence! I was never super good at listening to that. I always tried to kind of you know [ignore it]. If someone said something [negative to me about my disability] or made a[n offensive] comment I would kind of just let it roll off, and you know, not let it bother me as much as I could. (Nixon, learning disability)

Nixon’s quote is telling when he says that he does not let bullying bother him “as much as I could.” This phrase reminds us that despite their best attempts to

not let bullying “bother” them, most of our participants experienced some emotional toll as a result of bullying.

Other students took the long view when coping with bullies. While they might be forced to endure taunting, name calling and harassment at present, they had confidence in their ability to withstand the influence of bullying and to succeed in the future. Thus, they persevered through the bullying. When Fanny experienced bullying at college, she coped by thinking back to middle school when she worked twice as hard to succeed. Her coping strategy was to make bullies look bad while succeeding personally and academically. She explained:

So, I just worked twice as hard so that one day I'd be able to basically shove it in everyone's face and go, “Nah, nah, nah, nah, look what I did and look what you're all not doing.” It definitely felt a lot better when—it definitely felt amazing when I was in high school, when I graduated high school and the kids that were picking on me, bullying me in middle school, have either dropped out of high school or became drug addicts. (Fanny, ADHD, dyslexia)

Indeed, Fanny was quite proud that she had not only made it to college (while bullies did not), but was actually thriving in academe. In sum, college students with disabilities coped with bullying by avoiding, speaking up, reframing, and/or outdoing the bullies.

### **Coping with Labels, Stereotypes, and Assumptions**

Students with disabilities grew up in a culture pervaded by ableism. As a result, they experienced a lifetime of fighting negative labels, stereotypes, and assumptions. They responded by using different coping strategies such as educating others, avoidance, overcompensation, proving others wrong, and self-acceptance. In some cases, students internalized negative labels and stereotypes, and, in turn, their self-confidence and self-esteem was diminished.

Some students like Athena, who had muscular dystrophy, coped with inappropriate labels by educating others. When people labeled her (or her diagnosis of muscular dystrophy) incorrectly she would correct them. Athena said:

I try to...say something. Oftentimes people might group you in certain labels and you have to be like, “Well, that's not a correct label, this is actually what I am.” I'm in a wheelchair and someone says: “Oh, you must be having a hard time.” [I] tell them, “Well this is how I live my life. It's not a hard time, it's just my truth.” (Althea, muscular dystrophy)

Others avoided discussing their collegiate struggles precisely because they were afraid to be labeled or stereotyped. Rhonda who had a physical disability which caused chronic pain, stated: “Sometimes I would hide what I was thinking and feeling because I just didn't want them to know or look at me differently.” Similarly, Farah, worked hard to avoid the stereotypes associated with her disability, said:

I only threw myself into my studies as a way to show people that the Tourette's didn't affect me in every area of my life...I didn't want people to look at me and think that just because I had Tourette's I was, like, different, or strange, or stupid, and things like that. (Farrah, Tourette syndrome)

In an effort to avoid labels and stereotypes, Layla often did not request disability accommodations for which she was eligible. Layla described how her self-reported disability (frequent and debilitating migraines) came and went. As such, she hesitated to ask for accommodations which labeled her as “disabled” and triggered stereotypes from faculty. Layla explained how she often began the semester with a hope that her migraines would not happen, and thus, did not request accommodations:

I hate asking for accommodations, even when I know that I actually deserve them. Because I know if I am perceived to be asking for them too often, people will think I'm just making it up. So often I do not use them unless I'm in fairly dire circumstances. (Layla)

By waiting until she was in “dire circumstances” with a “debilitating” migraine that made her miss multiple classes, Layla jeopardized her own academic success. Yet, this was the risk she was willing to take to avoid labels and stereotypes from faculty and peers.

Rhonda learned that avoidance was not always an effective coping strategy. For a long time, she chose not to talk with her therapist and parents about some of her struggles. Eventually, she learned that being honest, and sometimes asking for support, were important and effective coping strategies. Rhonda explicated:

No one is going to know how you're feeling unless you say something. Like with friendships, with relationships, or even trying to get what you want to be successful...You need to verbalize and just talk...That was the one thing my therapist yells at me [about]. [She said,] “I don't know what you're thinking, you have to tell me what you're thinking.” I think that was import-



ant for my parents to understand. That sometimes I would hide what I was thinking and feeling around them because I just didn't want them to know or look at me differently. Then they said, "Just tell us, we'll approach the situation together because that's what we're here for, not telling us we're never going to know." (Rhonda, physical disability, pain throughout the body)

Rhonda was well aware of the negative labels, stereotypes, and assumptions made about people with disabilities. For much of her life, she hid her struggles and physical symptoms in an effort to avoid being treated "differently." However, she eventually learned that being candid about her experiences, seeking support, and asking for help from loved ones were coping strategies that worked for her.

Growing up, Ida faced a particular type of assumption. Specifically, her father assumed that she should behave in ways that were difficult because of attention deficit hyperactive disorder (ADHD). Ida stated the following:

Everyone tries so hard to...not be themselves—to be what everyone else wants them to be. My father always wanted me to be someone else. He always wanted me to be quiet. He always wanted to kind of push this [ADHD related] energy somewhere else instead of realizing that's who I was. And I think a lot of people should look into themselves and be like, "Hey, this is who I am." But I don't know if anyone could actually put a word or even a description to that. I think if people didn't worry about what everyone thought about them so much and they just did not care and were just themselves, I think that's what I do. I'm not really sure. [Now that I'm in college] I just do not care what anyone thinks. I just go into things with no fear, and just kind of, whatever happens is going to happen and I'll deal with it then, but no fear. (Ida, ADHD & dyslexia)

This quote shows that Ida attempted to use positive self-talk and acceptance to cope with negative messages and the pressure to behave like someone without ADHD. She exhibited strength and resiliency in resisting parental (and societal) pressure to not be herself.

### **Coping with Low Expectations & Discouragement**

As critical disability scholars have argued, disability oppression can manifest in deficit notions about the capabilities of people with disabilities (Charlton, 2006; Davis, 2006). College students in our study had

to deal with overt comments and subtle messaging that conveyed low expectations regarding their prospects for academic achievement and overall success in life. These messages were perpetrated by peers and faculty. Students with disabilities responded to low expectations and discouragement by using a variety of coping strategies including avoidance, internalization, working extra hard, reframing, and withdrawal.

Study participants recognized that students with disabilities often cope with low expectations by working extra hard to prove that they can succeed. Alice explained how blind people have historically been subjected to low expectations and discouragement:

Helen Keller and Anne Sullivan (her teacher), they had to prove—when Helen was in Radcliffe College—that, no, her interpreter is not doing her work. Blind people had to prove themselves back then too. Believe or not, blind people still have to prove themselves today. It's ridiculous. (Alice, blindness)

Ida felt similarly. She said,

I'd persevere through it because it bothered them more, and it upset them more if I basically kept going instead of giving in to what they wanted. So, I was always more trying to do the opposite. I was always trying to prove people wrong. I'm like, so many people have put me down. So many people have hurt me that I basically spent my life getting myself back up, dusting myself off, and being like, "I'm going to prove them wrong one day." (Ida, ADHD & dyslexia)

Reyna, a student with cerebral palsy also described coping with low expectations by proving people wrong. She said, "They told me I could never walk, could never talk, could never speak, could never do anything alone. Well, here I am today!" Peers and teachers often conveyed low expectations about Fanny's ability to succeed academically. She recounted these interactions and her coping strategy as the following: "[People say,] 'But you're dyslexic!' [I] don't care. I'm going to do this." An English teacher did not think that Willa, a blind student, could keep up with the readings. In response, Willa explained that she had to "prove myself to her before she, [the teacher], thought that I was capable of doing it." These quotes suggest that working hard to prove people wrong was a coping strategy students with disabilities used not only in college, but throughout their lives to respond to low academic expectations and discouragement.



A number of students used avoidance or withdrawal to cope with low expectations or discouragement. Aricelli, who had depression, coped by

Withdrawing. Not necessarily from my classes, but kind of living inside myself, not being as vocal as I usually am, or not participating more, not having as much desire to be a part of it anymore, because I feel...excluded in a way...So I guess that would be my response, to try to pull into myself and get away from the situation. (Aricelli, depression)

Reyna, a student with cerebral palsy coped with discouragement and low expectations by seeking out positive influences. She avoided people with negative perspectives because she wanted to focus on her personal and professional ambitions. She shared the following:

When people say, "Why don't you just die?" It's 'cause you want to keep living! You want to keep doing what you wanna do. Everyone's here for a purpose, I believe. And, my purpose is to do this. So, that's what I tell them...I tell them I can do this. Fuck them if they don't understand. Sorry, [about] my language. And to narrow minded people? Sometimes it's better to not just associate with them at all. (Reyna, cerebral palsy)

Avoidance, however, did not just mean staying away from negative people. In fact, students like Reyna and Rhonda combined avoidance of negativity with seeking positivity. In Reyna's case, avoidance of negativity led her to seek more positive relationships. For Rhonda, avoidance and reframing of a stressor turned into support for others. She said the following:

I think the best thing is when I don't think about myself, when I do things for other people. And that's in turn what I want to do with my life—is not focus on myself. So, when I get discouraged or something I try to dive into [and support] someone else's life because I don't want to think about mine. (Rhonda, physical disability, pain throughout the body)

In this case, Rhonda coped with discouragement by reframing negative emotions into helping others. As such, her avoidance became a form of altruism. Gemma also reframed low expectations and discouragement and encouraged others to do the same:

I don't really think about myself anymore as like this little girl that can't do anything. It's okay. Everybody's bad at something. For me, sports is my way out. [When I see other students with disabilities struggle I want] to be like, "It's okay if you're struggling with this. You're good at something." So maybe to other people, they have that, too. (Gemma, reading comprehension disability)

While Gemma was able to overcome negative self-talk about being a girl who "can't do anything," other students were not so successful. A number of students responded to low expectations and discouragement by internalizing negative messages about themselves. For instance, Aricelli, a student with depression, shared her internal thought processes after encountering low expectations and discouragement. She wondered, "Maybe I'm not going to be good enough. Or, there had to be a reason that someone discouraged me." When asked how she coped with discouragement, Tippi echoed this sentiment by saying:

Umm well initially I get like, if I'm really discouraged about something and someone else is like, "You can't do it." Initially I'm like, "They're absolutely right, I can't do this. I am stupid for even thinking about it." And like, if it's something I really care about, I'll, you know, get back up and be like "I'll show them." (Tippi, ADHD)

Tippi's response is a good example of the complexity of coping. She did not always internalize negative messages, nor did she always seek to prove people wrong by succeeding despite discouragement. As Skinner et al. (2003) argued, to understand coping strategies, a variety of factors must be considered. When Tippi was discouraged from something she "really care[s] about," her coping strategy was different than when a stressor was related to less important topics and issues. In essence, during her secondary appraisal process (e.g., meaning making), she selected coping strategies based upon how deeply something mattered to her life.

Other students described ongoing attempts to cope with low self-concepts that resulted from pervasive ableism in the form of ongoing discouragement and low expectations. Many of our participants utilized positive self-talk to cope with discouragement, low expectations, and resulting lowered self-confidence. Lenina said,

I'm trying to think positive about myself. I think okay, "I love myself. I'm really happy with my life." I'm trying to make this my... inner [man-

tra]. It's a phrase I just say. It makes me feel better. I'm trying to think more positively. (Lenina ADD, ADHD, dyslexia)

Similarly, Finley, a student with attention deficit disorder and dyslexia explained, "I've been working a lot on confidence like having the confidence—that my ideas matter!...I've been like really working on that...I realize I have tons of really great ideas." Titus, a student with ADHD and dyslexia, summed up the sentiment of many of his peers attempting to foster self-confidence and self-love despite discouragement and low expectations. Titus reflected, "It has to start with me supporting me, and liking me, and liking what I can do. And then all that other stuff will come."

### Discussion and Recommendations

Although the number of students with disabilities enrolling in postsecondary degree programs is increasing (NCES, 2017), research shows that students with disabilities continue to encounter unwelcoming learning environments characterized by pervasive ableism, disability-related stigma, and inadequate access to supports (e.g., Cawthon & Cole, 2010; Evans et al., 2017; Kattari et al., 2018; Olney & Brockleman, 2003; Saia, 2022; Trunk et al., 2020). As a result, students with disabilities find themselves forced to confront and cope with numerous ableist obstacles to postsecondary success (Francis et al., 2019; Kattari et al., 2018; Kimball et al., 2016a). In this section, we discuss the significance of our findings. We also offer recommendations for supporting individual students as well as recommendations for institutional action against the roots of ableism that require students to cope.

Our study adds to, and connects, two bodies of historically separate literatures the psychological literature on coping (Folkman & Lazarus, 1988; Lazarus, 2000; Lazarus & Folkman, 1984; Lazarus & Launier, 1978; Skinner et al., 2003) and the educational literature about unwelcoming and ableist postsecondary learning environments (Cawthon & Cole, 2010; Evans et al., 2017; Kattari et al., 2018; Olney & Brockleman, 2003; Saia, 2022; Trunk et al., 2020). There is limited empirical literature traversing these topics to explicate how students with diverse disabilities adapt to and cope with various forms of ableism in postsecondary education. The few studies available have compared disabled and non-disabled students (Hall et al., 2002) or focused on students with specific disabilities such as severe psychiatric disabilities (Hartley, 2010), depression (Aselton, 2012), or deaf students (Lukomski, 2007). This gap between these

important bodies of literature complicates the adoption of evidence-based practices intended to support students with disabilities (Kimball et al., 2016b). Our findings, drawn from in-depth interviews with college students from multiple campuses and with diverse disabilities, contributes to the bridge between the historically distinct bodies of research on postsecondary ableism and coping. Specifically, the findings offer insight into how disabled college students experienced and coped with three manifestations of ableism: (a) bullying; (b) labels, assumptions, and stereotypes; and (c) low expectations and discouragement.

Participants coped with these common forms of ableist oppression in vastly different ways. For instance, participants responded to bullying with coping strategies such as avoidance, speaking up, reframing, and outdoing the bullies. Coping strategies used to combat ableist assumptions and stereotypes included educating others, avoidance, overcompensation, and proving others wrong. Participants coped with low expectations and discouragement using avoidance, internalization, working extra hard, reframing, withdrawal, and self-acceptance. We hope that one of the key takeaways from this study is that disabled college students can effectively cope with ableism by employing a plethora of coping strategies to successfully navigate higher education. There is no single best way to cope, nor will all students adopt the same coping strategies to deal with similar manifestations of ableism. This finding aligns with coping literature that elucidates hundreds of potential coping strategies (Carver & Connor-Smith, 2010; Skinner et al., 2003).

Prior studies have documented the need for educators to help students develop successful coping strategies (Becker & Chapin, 2021; Trunk et al., 2020). For instance, Becker and Chapin (2021) argued that "Disability Support Services should work with students to manage and develop general health promoting lifestyle habits" (p. 82), while Trunk et al. (2020) argued that college counselors need to "help individuals to learn coping skills to address personal and interpersonal challenges in a more effective manner" (p. 132). These two articles reveal alternative perspectives on whose responsibility it is to foster effective coping skills. Our data suggest that campus programming and interventions can focus on coping strategies for academic and social success. We also contend that it is the job of all educators to help all students develop effective coping strategies. It is important that all campus employees (e.g., faculty, staff) engage in professional development workshops to learn how to talk effectively with students about coping. Students can benefit from structured and unstructured opportunities to reflect upon the ways they cope

with bullying, labels, assumptions, stereotypes, low expectations, and discouragement as well as a myriad of other life stressors. Educators can encourage students to think about which strategies have been effective or ineffective for them, and why. As scholars have noted, coping strategies are not inherently adaptive or maladaptive, but dependent on the person's skills, the context of the situation, and intensity of the stressor (Carver & Connor-Smith, 2010; Skinner et al. 2003). One of the important roles that higher educators can play is helping students evaluate the usefulness of particular coping strategies. During individual advising or workshops, faculty and staff can encourage students to determine if a coping strategy is adaptive or maladaptive by considering individual strengths, short-term outcomes, long-term effects, and situational context.

Self-reflective activities can be powerful learning opportunities for students, which was the case for Rhonda who learned that avoidance and refusing to seek support were not effective strategies for her. Once she learned to use different coping strategies, therapy sessions were more successful and the relationship with her parents improved. Through intentional dialogues, faculty and staff can help college students with disabilities learn and grow from their coping choices.

Beyond informal coping conversations, campuses can host formal coping workshops at which students can be taught multiple coping strategies, none of which are inherently adaptive or maladaptive (Carver & Connor-Smith, 2010). More seasoned students with disabilities can play a leadership role in these workshops, sharing strategies and introducing novel approaches that they identified for coping with the unique conditions of their campus environments. Hearing how other students with disabilities have coped with institutional stressors can help new students by validating their experiences or legitimizing their efforts to seek accommodations as needed. Ideally, workshop attendees will be encouraged to practice primary and secondary appraisal, and consider the *many* types and categories of coping available to them. The work of Skinner et al. (2003), which categorized hundreds of coping strategies into a manageable number of coping families/categories, might be a useful foundation for this session. Sometimes individuals (not just college students) can be so emotionally impacted by a stressor that they do not have the capacity to imagine all of the potential coping strategies that could be employed. As such, they rely on a small number of strategies they are aware of and have used in the past, whether they are effective or not. By learning about the countless potential coping strate-

gies before a stressor happens, students with disabilities can expand their toolkit of coping options, and, in turn, be more successful as they navigate ableist postsecondary institutions.

In the prior paragraphs we have discussed our findings and offered student-centered recommendations for practice. However, we would be remiss if we did not call for institutions to focus on combating ableism. Only discussing ways students might cope with ableism has the potential to miss the opportunity to simultaneously discuss the institutional responsibility for curbing oppression so that students may not have to "cope" with ableism as often. Without this dual (individual, institutional) focus, the onus falls on students to simply deal with and try to succeed in an ableist system. Postsecondary institutions have a role to play in mitigating stressors for college students with disabilities.

Our three findings sections were based upon the most common stressors described by our participants. Colleges and universities can develop a variety of policies and programs to address these pervasive forms of exclusion. For instance, most universities have student codes of conduct. Those codes can be reviewed to ensure that bullying is included and defined in a way that allows for any offensive or "aggressive behavior that hurts, humiliates, or harms another person physically or emotionally" (Slattery et al., 2019, p. 231). Then, student leaders (e.g., resident assistants), faculty, and staff who enforce the code of conduct can be educated about the prevalence and manifestations of ableist bullying. It is also important to train faculty and student leaders on appropriate bullying interventions. However, campuses can go beyond educating the "enforcers" to develop bystander intervention training for all students so that all college students can effectively intervene when they witness bullying. The literature on bystander interventions in postsecondary education can offer guidance (e.g., Mazzone, 2020).

Researchers have noted that higher education staff often feel unprepared to support college students with disabilities, usually due to a lack of education and training (Kimball et al., 2016b). Higher education institutions must offer extensive in-service training and professional development for faculty and staff, appropriate for their institutional context. Given our findings, we recommend trainings begin with the importance of using appropriate language, including disability terminology. Additionally, educational programs and workshops can also target the pervasive issue of low expectations and discouragement as described by our participants. These oppressive actions can have deep and long-lasting negative impacts on college students.



In conclusion, this manuscript adds to the limited empirical literature about how students with diverse disabilities experience, and cope with, various forms of ableism in postsecondary education. Specifically, this paper offers insights into how disabled college students used diverse coping strategies to respond to three manifestations of ableism. We hope that this study offers educators, in varying postsecondary contexts, transferrable insights for fostering effective coping in students and enacting institutional changes to mitigate ableism in their context specific learning environments.

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