

Encouraging disabled leaders in higher education: recognising hidden talents

Stimulus paper

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Stimulus Paper Series

The Leadership Foundation is pleased to present this latest series of 'Stimulus Papers' which are intended to inform thinking, choices and decisions at institutional and system levels in UK higher education. The themes addressed fall into different clusters including higher education leadership, business models for higher education, leading the student experience and leadership and equality of opportunity in higher education. We hope these papers will stimulate discussion and debate, as well as giving an insight into some of the new and emerging issues relevant to higher education today.

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Executive summary

The Leadership Foundation commissioned this stimulus paper to explore the experiences of disabled leaders in the sector with a view to developing better practice, both in institutions and in relation to leadership development more broadly.

Around 90 disabled people, mainly from UK universities, contributed via questionnaires, focus groups, discussions and interviews, which provided rich qualitative data for analysis. Participants, from across the range of academic and professional services roles, included 46 people who identified themselves as current or aspiring leaders and approximately 45 delegates (including senior leaders) attending neurodiversity- and disability-focused conferences.

The research draws attention to the various barriers to encouraging and developing disabled leaders in HE, including: limitations of the Equality Act 2010, stereotyping, invisibility of role models, limited senior buy in to strategic change, ableist assumptions, and disorganised infrastructure. There was evidence that disabled people often possess characteristics associated with effective leadership. In many instances, contributors were making effective use of problem solving skills gained through navigating disabling barriers in their approach to leading and encouraging colleagues and building functional teams and productive alliances. A key finding was that a striking degree of congruence emerged between participants' descriptions of their own values and approaches as leaders and the principles of distributed leadership.

However, despite the positive experiences expressed by participants, many experienced barriers and frustrations in the workplace. These included assuming what a disabled person needs without asking them, a lack of reasonable adjustment reflecting inadequate infrastructure, planning and administrative support, getting support from Access to Work, accessibility generally and in relation to leadership training programmes, the use of assistive technology.

Themes which emerged have been translated into recommendations for institutional change and a development agenda designed to promote disability equality in leadership. Recommendations for action, grouped under the headings (i) strategic responses, (ii) inclusive design, reasonable adjustments and Access to Work, (iii) leadership recruitment and development and (iv) peer support, mentoring and networks, include:

- reviewing university systems from the perspective of the 'user'.
- actively promoting a culture which celebrates rather than problematises diversity.
- acknowledging that leadership exists in many forms at many different levels across an institution.
- joining up and integrating disability services for staff and students and across different processes.

Individuality emerged as an important theme with the emphasis on creating conditions which would enable individuals to take more control over how they organise their working lives, including the nature of systems and support which would increase their overall effectiveness.

The research reveals a range of themes which translate into a number of recommendations for institutional change and a leadership development agenda designed to provide disability equality in the sector. Strategic level commitment is necessary to eradicate barriers and sustain change. Well organised, supportive environments are necessary for disabled people to contribute effectively and realise their career aspirations. Inclusive practices and design considerations reduce the requirement for individualised adjustments and benefit everyone. In light of this, a number of suggestions for action are identified and, while more visible role models are important, it is important to remember that disability is only one component of a person's identity. Asking people what they need in order to be effective is far more effective than telling them what they are going to get.

The stimulus paper acknowledges that the analysis conducted has limitations. Some of these include a lack of contributions from those with intellectual impairments, response rates, the definition of disability (particularly by individuals themselves), identity and disclosure issues. However, valuable insights have been captured and these have also informed suggestions for further work in order to develop better leadership development practices in higher education institutions, including embedding equality and diversity concerns into developing leadership potential, encompassing disability issues into ageing at work studies, implementing longitudinal studies involving early-career disabled people, and focusing on transitions between work roles and organisations.

1
Campbell (2009)

2
Oliver (2009)

3
Shakespeare (2013)

4
Bebbington (2009)

5
Charlton (1998)

6
Barnes (2003)

Introduction

This stimulus paper commissioned by the Leadership Foundation includes insights from disabled leaders as well as people who are already taking on leadership but aspire to progressing further and feel frustrated or thwarted in their attempts to achieve their ambitions. Participants, mainly from UK universities, identified what they do and what they need in order to be effective in leadership roles. The recommendations arising from this study are, like most reasonable adjustments, relatively easy and inexpensive or cost neutral. This is especially true if they are actioned from the planning stage with a view to sustainability rather than being retrofitted.

Two key arguments often made for investing in disabled leaders are social justice and the legal argument arising from equalities legislation. In addition, the business rationale may also have a place. This is underpinned by the notion that investing in disabled people represents value for money; enabling individuals to work to capacity means that they are more able to achieve outcomes that are beneficial to the organisations for which they work. Disabled academics such as Campbell,¹ Oliver,² and Shakespeare³ provide numerous illustrations which show that, as a result of a lifetime of having to find ways to address myriad socially-constructed everyday difficulties, disabled people are often by necessity creative entrepreneurial problem solvers with the ability to see the bigger picture. These are attributes associated with good leadership.

The aim of this stimulus paper is to explore the experiences of disabled leaders in the sector with a view to the development of better practice. In a report commissioned by the Leadership Foundation, Bebbington⁴ provides compelling arguments in favour of diversity in leadership from social justice and business perspectives and develops practical ideas for taking this agenda forward. This study builds on the themes presented in that report, and goes further by focusing on disability as a valued strand and priority in the diversity debate.

The expression “nothing about us without us”⁵ underpins the approach taken in this research, which identifies and reflects on emerging themes from the participants’ responses. These themes are translated into recommendations that offer encouragement and support for disabled people to help with securing and maintaining leadership roles in the sector. While relevant literature on equality legislation, leadership and disability theory provides some necessary background, the voices of disabled people predominate. In keeping with emancipatory research principles,⁶ notions of authenticity and usefulness are central.

Equality data

Data from the Higher Education Statistics Agency (Hesa) Staff Record for 2013-14 indicates that the most commonly reported impairments amongst academic and professional and support staff were 'a longstanding illness or health condition' and 'a specific learning disability' (Appendix 1). Looking at recent trends, the proportion of staff disclosing a disability has increased somewhat from 2.2% in 2003-04 to 3.9% in 2012-13. Between 2011-12 and 2012-13 there was an increase of 0.5 percentage points in the proportion of staff disclosing a disability.⁷

Career progression into senior posts is more limited for disabled people according to Equality Challenge Unit's (ECU) analysis of the Hesa dataset.⁸ Fewer professors disclosed a disability than academics below professorial level (2.7% compared to 3.4%). Out of 170 heads of institutions only five (2.4%) disclosed as disabled while 5% of staff in support roles disclosed a disability.

It is estimated that there are 13.3 million disabled people in the UK – 21% of the total population.⁹ Of these, 18% are of working age. The proportion of people disclosing a disability in higher education seems low by comparison, though it is difficult to know to what extent this is due to low levels of disclosure and low levels of actual employment of disabled people in the sector.

Disclosing a disability

The strong possibility of low disclosure rates amongst higher education staff is reflective of a wider problem and the term 'disclosure' is in itself viewed as problematic by some disabled people. Ambivalence about disclosure, evidenced here and elsewhere¹⁰ points to the impossibility of gathering reliable information about the number of disabled leaders in the sector and beyond. Hesa data relates only to information provided by staff who have decided to disclose. Others could have actively chosen not to, or may not realise that their 'condition' is covered by the Equality Act 2010. Even so, Nash¹¹ argues that it is possible to improve work-based opportunities for disabled people without having totally accurate figures.

People identifying with hidden impairments struggle with disclosure and debate the relative merits and demerits of disclosing a disability. This is a common theme in disability studies. Roulstone and Williams¹² unearthed concerns about the 'riskiness' of disclosure amongst 42 disabled managers from various roles outside the higher education sector and Nash¹³ raised similar concerns in a study involving over 2,000 disabled employees from public and private sector organisations, although this did not include universities. There is a particular fear of stigma around mental health problems echoing Sayce's¹⁴ findings of the huge risk associated with disclosing hidden disabilities. A further issue is the perceived negative connotations associated with the term 'disclosure' as if one might be choosing to share an 'awful secret'. This was evident amongst participants in Nash's study¹⁵ and amongst people who took part in this study.

7
ECU (2015)

8
ECU (2015)

9
Department of Work & Pensions (2017, p7)
www.gov.uk/government/uploads/system/uploads/attachment_data/file/600465/family-resources-survey-2015-16.pdf [accessed 28 March 2017]

10
Roulstone and Williams (2014)

11
Nash (2014)

12
Roulstone and Williams (2014)

13
ibid

14
Sayce (2011)

15
ibid

16
Ewens and Williams (2013)

17
www.legislation.gov.uk/ukpga/2010/15/contents [accessed 13 Dec 2016]

18
Campbell (2009)

19
Goodley (2013; 2014)

20
Loja et al (2013) p193

21
<http://disability-studies.leeds.ac.uk/files/library/Northern-Officers-Group-defining-impairment-and-disability.pdf> [accessed 13 Dec 2016]

Terms of reference

Working definitions of 'disability' and 'leader' provide necessary starting point for discussion.

Defining disability

Ewens and Williams¹⁶ summarise current equalities legislation stating that English, Scottish and Welsh HEIs are subject to the Equality Act 2010.¹⁷ This replaced previous legislation including the 1995 Disability Discrimination Act (DDA) and its amendments. (The DDA does, however, still operate in Northern Ireland). As well as implementing reasonable adjustments as a way to counter discrimination, the Equality Act requires HEIs to proactively foster good relations between people and promote equality of opportunity.

The Equality Act 2010 itself can be considered ableist in the way it defines disability. This in spite of the fact that it was introduced to streamline equalities legislation and strengthen protection against discrimination, harassment and victimisation of people with a range of protected characteristics including disability. Section 6 of the Equality Act 2010 states that:

A person has a disability if they have a physical or mental impairment, and the impairment has a substantial and long term adverse effect on his or her ability to carry out normal day to day activities.

As will be noted later in this paper, participants argued that impairment rather than disability is being described here in a statement seemingly disengaged from the impact of disabling barriers external to the individual. Campbell,¹⁸ Goodley,¹⁹ and others use the term 'ableism' to denote attitudes and societal constructs which impact negatively upon disabled people. Loja et al²⁰ equate ableism with:

The invalidation of impaired bodies and the constant struggle to establish credibility.

This chimes with the experiences of many participants who felt that legislative definitions of disability, such as that previously quoted from the Equality Act 2010, equated to descriptors of ways in which impaired bodies deviate inconveniently from assumed normative corporality. These definitions are in themselves ableist.

A further problem with the Equality Act 2010 is that although it identifies disability as a protected characteristic, it lacks clarity around good practice in career development and progression and does not particularly emphasise the benefits of an inclusive work based culture which could encourage diversity in leadership.

More useful definitions are put forward by the Department of Disability Studies at the University of Leeds who describe a disabled person as one who has an impairment and who experiences disability.²¹ Disability is defined as:

... the result of negative interactions that take place between a person with an impairment and her or his social environment. Impairment is thus part of a negative interaction, but it is not the cause of, nor does it justify, disability.

More specifically:

Impairment: an injury, illness, or congenital condition that causes or is likely to cause a loss or difference of physiological or psychological function.

Disability: the loss or limitation of opportunities to take part in society on an equal level with others due to social and environmental barriers.

Thus disability in this definition is of social causation; it arises as a result of disabling barriers constructed by society.

Defining leadership

Leadership means different things to different people and is rarely viewed with neutrality in the workplace or anywhere else. It encompasses emotive notions of power and subordination which do not sit well with participants in this study, as this paper will show. Leadership theory is explored below, and a more nuanced engagement with the idea of what it means to be a leader will emerge.

Bebbington²² cautions that clear definitions of leadership remain elusive even though there is a burgeoning literature on leadership and leadership development activity. One of many models of leadership is trait theory, based on the contested assumption that leaders are ‘born not made’ and that they have certain qualities such as vision, creativity and charisma. For disabled people the very idea of the charismatic leader may appear to be based on various assumptions including heteronormativity, ableism and sexism. This is evident in absences within the literature. For example, Corlett and Williams²³ and Williams²⁴ highlight scholarship around ableism within Critical Disability Studies and the absence of disability within mainstream organisational and identity literature. The latter reflects an ableist approach in which everything is planned for the mythical norm.²⁵

In contrast to trait theory, the contingency approach suggests that personality and behaviour are not deemed adequate to explain leadership styles and that leadership qualities need to be adaptive to different teams, activities and situations.

Drawing on the work of Bass,²⁶ Bebbington discusses a shift in leadership concepts from traditional leader-follower dynamics towards transactional and transformational concepts of leadership.²⁷ Transformational leadership occurs when the leader collaborates with employees to identify where change is needed, and is predicated on a social exchange process and on notions of the exchange of power. Transactional leadership is characterised by gaining the compliance of followers through contingent reward. Transformational leaders, according to this leadership model, achieve organisational goals through being able to inspire and motivate followers.

22

Bebbington (2009)

23

Corlett and Williams (2011)

24

Williams (2011)

25

Lorde (1984)

26

Bass (1999)

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ibid

28

Bolden et al (2008)

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Bennett et al (2003) p7

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Bennett et al (2003) p8

More recently Bolden et al²⁸ have examined distributive or collective leadership within the higher education sector and this has been viewed as a more inclusive approach. Bennett et al²⁹ suggest that:

...distributed leadership highlights leadership as an emergent property of a group or network of interacting individuals the additional dynamic which is the product of conjoint activity.

While identifying 'numerous overlaps with other notions of leadership – collegial, democratic, and so on', Bennett et al³⁰ identify distinct advantages of distributed leadership including:

Pooling of initiative and expertise, the outcome is a product or energy which is greater than the sum of their individual actions.

Openness of leadership boundaries is key to this type of leadership and inherent in this approach is a predisposition to widen the conventional net of leaders. This in turn raises the question of which individuals and groups are to be brought into leadership or seen as contributors to it. A variety of expertise is distributed across the many, not the few. Related to these concepts is the idea that numerous, distinct, germane perspectives and capabilities can be found in individuals spread throughout the group, organisation (or institution). When these are brought together it is possible to forge a dynamic which represents more than the sum of the individual contributors. Initiatives may be inaugurated by those with the relevant skills in a particular context, but others will then adopt, adapt and improve them within a mutually trusting and supportive culture. Leadership then develops as a product of concertive or conjoint activity, emphasising it as an emergent property of a group or network. These different concepts of leadership provide context for the themes that emerged in this study.

Approach and methods

In order to explore the experiences of disabled leaders in the sector, and to develop better leadership practice in HE institutions, a Steering Group of disabled staff was identified in the first instance, drawn mainly from National Association of Disabled Staff Networks (NADSN³¹) and National Association of Disability Practitioners (NADP³²) members. As disabled people themselves Steering Group members did not claim to be neutral bystanders but acknowledged a personal interest in the research.³³ The involvement of disabled people throughout the research process reflects emancipatory research methodology whereby the insider perspective is paramount. In this approach, disabled people take control to ensure that the outcomes of the research are useful to them.^{34, 35}

On the advice of the Steering Group, email approaches were made via networks and organisations aimed at HE staff including the Equality Challenge Unit (ECU), the National Association of Disability Practitioners (NADP), the Disability Equality Research Network (DERN³⁶) and the National Association of Disabled Staff Networks (NADSN). In order to extract as wide a range of views as possible the introductory statement invited potential participants to respond themselves and/or to pass on the request (see Appendix 2). The approach included a statement that made it clear that we were interested in disabled leaders from beyond the sector as well as leaders who may have been aspiring or thwarted in their ambitions, particularly as they experience disability.

Developing the research tools

The timing of the project coincided usefully with the first Steering Group meeting of the NADSN which was used to begin to develop the research tools, based around a questionnaire and interview questions. The Steering Group was very clear that drawing out broad themes yielding practical information would be most useful. They also felt that the participants should be invited to share personal information in their own way and therefore control the level of detail they chose to supply.

After careful consideration it was decided that the questions should focus on the following areas:

- Demographic information
- Experiences of impairment
- Identity and disclosure
- Values, influences, strengths and leadership style
- Barriers and frustrations
- Strategies, resources and advice
- What action is required?

The questionnaire (Appendix 2) firstly asked participants for demographic information including their name, position they held and, if they were in agreement, the name and/or type of their institution. They were asked if they consented for the information gathered in the interview to be used anonymously and that this was on the understanding that they could withdraw prior to publication. They were requested to give any other information they considered relevant including their age, gender, ethnicity, and qualifications.

31

<https://nadsn-uk.org>
[accessed 13 Dec 2016]

32

<https://nadp-uk.org>
[accessed 13 Dec 2016]

33

Bryman (2008)

34

French and Swain (1997)

35

Barton (2005)

36

www.edfresearch.org.uk/?p=4769 [accessed 13 Dec 2016]

A series of open ended questions were then asked. These were designed to be answered via email or in focus groups and interviews and covered such areas as leadership style, influences on leadership development, values, strengths and ambitions, challenges and greatest achievements. Participants were asked what their greatest frustrations were and what, if anything, they would like to say about their impairment. They were then asked about the main barriers they experienced in their role and how these may be reduced.

Questions then focused on ways of improving the workplace including the sorts of policy, practice, legislation, support or assistance that should be put in place. A number of prompts were used in relation to Access to Work funding and membership of networks. Participants were asked to give their 'three top tips' to aspiring leaders and institutions in recruiting, retaining and supporting leaders. They were then asked to set out their three top tips in recruiting, retaining and supporting disabled leaders whilst acknowledging that these may be the same for all leaders. Finally, participants were asked to give practical suggestions for resource development and training.

Gathering the data

Data were gathered for the project via group and one-to-one activities. Group discussions took place as follows:

- Dyslexia Cultural Festival. A neurodiversity workshop solicited the views of the five delegates who attended, which were captured on flipcharts as the workshop proceeded.
- First conference of the NADSN. A presentation and facilitated discussion was undertaken with twenty conference delegates during which their ideas were captured on flipcharts.
- NADSN Steering Group. A focus group session was run with the Steering Group. This discussion was recorded digitally and transcribed verbatim.

Individual responses included:

- One-to-one interviews. Six one-to-one interviews were conducted, two in person and four over the phone. These interviews were recorded but not transcribed verbatim due to resourcing constraints.
- Questionnaires. In response to the call to disability and equality-related organisations, forty questionnaires were completed and returned to the researcher.

Data analysis and emerging themes

The survey and interview questions provided a framework for gathering rich qualitative data. Time was spent repeatedly sifting through these qualitative data, coding, recoding and deciding upon themes. The headings devised to report and analyse responses reflect the themes which were generated by engaging with the data closely and repeatedly.³⁷ While these were chosen in order to represent contributions as fairly and usefully as possible, the Steering Group members were acutely aware of their own subjectivity, and that other people may have interpreted the data differently.

Coding focused on what people said about leadership. On the advice of the Steering Group the data was not broken down according to role or impairment category. This accords with Critical Disability Studies Theory that problematises the notion of "homogeneity by impairment label".³⁸ Grouping responses according to job titles as well as impairment descriptors would have negated a myriad of obvious differences and lead to over-generalisation as one participant commented:

I am speaking for myself, not as a representative of other people with the same diagnosis. There is nothing more annoying than when people say, 'I had a colleague who was like you.'

37

Charmaz (2011)

38

Madriaga et al (2008)

Results

Demographic information

To avoid potentially intrusive questioning, 46 participants provided demographic information that they deemed relevant both from questionnaires and interviews. Some questions were left unanswered and the comment, *'I am only speaking for myself'* occurred often.

Of the 46 participants, 21 were female. In terms of ethnicity and nationality, 29 participants described themselves as White British nationals and 10 participants as non-white British nationals. Seven were not British nationals and three were from outside the UK. Three people stated their religion. Ten participants stated their sexual orientation, with two identifying as gay. With regard to age, 10 participants were aged under 40 and three were over 60 with the majority of participants (33) in the 40-60 age range.

With regard to participants' education and careers, 34 had higher degrees and 29 had held two or more previous leadership roles. Only seven reported that they were in their first leadership role. Sixteen participants worked in Russell Group and Red Brick universities and 21 were from post-92 universities.

With the exception of contributions from the Dyslexia Cultural Festival, participants identified their context and role. Three people worked outside the UK; two in Europe, and one in an African country. Five held roles outside their university in the arts, the charity/voluntary sector, school and the church. All but one participant was currently employed. Participants described their leadership roles as follows:

- Professor
- Principal Lecturer
- Senior Lecturer
- National Teaching Fellow
- Head of Research Centre
- Senior Research Fellow
- CEO
- Senior HE administrator
- Head of Service
- Consultant (post senior HE roles).

Despite best efforts it was impossible to secure contributions from vice-chancellors, chancellors or university governors.

In attempting to categorise the participants' impairments, a distinction is made here between unseen and visible impairments where appropriate. In broad terms participants identified their impairments as follows:

Unseen impairments:

- Dyslexia
- Dyspraxia
- Asperger syndrome
- Autism
- Mental health issue
- Chronic health condition
- Epilepsy

Visible impairments:

- Hearing impairment
- Visual impairment
- Mobility impairment
- Restricted growth

Ten people in total stated that they had more than one impairment. Insights are included from one participant with intellectual impairment who was leading a non-university national advocacy organisation. It should be noted here that researchers within Critical Disability Studies often face criticism for excluding participants identified with intellectual impairment, particularly those who do not communicate conventionally.³⁹ People with this label are conspicuously absent in higher education. A small body of relevant literature does exist in this area (for example Caldwell,⁴⁰ Schalock and Verdigo⁴¹) and key themes include the need for support for leadership without compromising leader autonomy and the issue of limited opportunities for leadership development for this group.

Comments were captured from three participants who were parents. Two were parents of disabled children and were themselves disabled. The other parent was not disabled but was a parent of a disabled child. In this role the individual was indirectly affected by disability as a result of their parental role.

Equalities legislation

Participants discussed operating within contexts required to comply with the Equality Act 2010. While there were some positive effects of the Act, others were not so sure. Many people recommended ECU as a source of information about the enactment of equalities legislation within the sector and some referred to the *Enabling equality: Furthering disability equality for staff in higher education report*⁴² commissioned by the LF and ECU. Participants valued the potential for the Equality Act 2010 to embed disability within a broader equalities agenda.

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Goodley (2010)

40

Caldwell (2011)

41

Schalock and Verdigo (2012)

42

Ewens and Williams (2013)

43
Gabel and Peters (2004)

44
Palmer and Hartley (2012)

45
Logan and Martin (2011)

In contrast, some participants felt that the Equality Act 2010 had limited powers to change disabled people's situations. Others expressed frustration about feeling that some viewed their impairment as the most significant aspect of their being. Significantly, four participants with visible impairments talked about feeling overexposed as a result of their success being put down to good practice:

While I welcome the Equality Act, I'm not convinced it has teeth. Frankly, I get tired of the university appropriating my success as an example of their good practice.

Some participants found the Equality Act's definition of disability to be rather too close to the medical model with its emphasis on pathology, diagnosis and deviance from the 'norm' (see for example Gabel and Peters,⁴³ Palmer and Hartley⁴⁴) as one participant put it:

...with all its ableist assumptions, the medical model serves to pathologise, diagnose, try to fix, and in so doing, manages to oppress people deemed to be deviant in some way from the mythological norm.

Impairment vs disability

Participants discussed impairment effects to a limited extent and focused far more on disabling barriers. Nonetheless, they described a range of impairments and these were experienced negatively in some respects and positively in others.

Fluctuations in symptoms were evident with fatigue and chronic or fluctuating pain described by seven people with health and mobility issues. Similarly, fluctuation and variability of symptoms was a factor identified by four people with mental health issues. Problems with dexterity were mentioned by three individuals with mobility limitations, whilst two participants who identified with autism spoke of feeling awkward in social situations. Interestingly, one of these participants explicitly defined autism as a neurological difference not an impairment. Participants with neurodiverse profiles, five in total, spoke most about feeling irritated by their ability to manage tasks like spelling and formatting documents. This frustration was echoed resoundingly by participants at the Dyslexia Cultural Festival.

Other participants highlighted positive aspects of their impairments. Those identifying with dyslexia discussed strengths associated with their neurodiversity especially their ability to see the bigger picture, a point reiterated in the literature particularly by dyslexic entrepreneurs.⁴⁵ One participant described themselves as thinking differently to others. This brought a creative approach to this person's work:

I have dyslexia. I understand why people like Richard Branson are highly successful working for themselves making millions. I can conceptualise big ideas and work them through with others. In meetings I'm always one step ahead (at least) of linear thinkers, because I think holistically and see connections between ideas which don't seem to occur to others. I'm highly creative and imaginative. If I had more control at work, I could be even more effective. I'm bogged down with plodding along stuff. I get why it's important and firmly believe that teams need people who can make sure that all the t's are crossed and the i's are dotted but I'm not a completer finisher. I'm good at getting the best out of team members. Other neurodiverse people say the same. We should all be entrepreneurs and millionaires.

Turning to the impact of being disabled, many participants spoke positively about their experiences in relation to leadership development. The experience of being disabled meant developing problem-solving strategies partly prompted by having to live in an environment created by non-disabled people:

My world view is influenced by being disabled. As a result, I've developed many problem solving strategies which I use in my leadership role.

All my life I have had to solve problems. I'm a disabled person navigating a world designed by non-disabled people. I think laterally and encourage other people to do the same. My approach to leadership is inevitably informed by my approach to life.

Preference was expressed for a **social model** perspective⁴⁶. This involves identifying and circumventing disabling environmental and attitudinal barriers. According to Oliver:⁴⁷

In the broadest terms, the social model of disability is about nothing more complicated than a clear focus on the economic, environmental and cultural barriers encountered by people who are viewed by others as having some form of impairment - whether sensory, physical or intellectual. The barriers disabled people encounter include inaccessible education systems, working environments, inadequate disability benefits, discriminatory health and social support services, inaccessible transport, houses and public buildings and amenities, and the devaluing of disabled people through negative images in the media - films, television and newspapers.

Some participants spoke about the interrelated experience of impairment and disability, as one participant with chronic pain said:

Although there are barriers which make life harder, I am also limited by my impairment as it involves chronic pain.

This is in keeping with Shakespeare's⁴⁸ **post social model**. In this model a flight of stairs may be a disabling barrier to someone with mobility impairment, but fatigue may also be a limiting factor. The interaction between tiredness and unnecessary obstacles is relevant but the staircase is only part of the story.

The **affirmative model** acknowledges that impairment could well happen to any of us eventually and is just part of life. Cameron,⁴⁹ Swain and French⁵⁰ and others argue that the affirmative model recognises the ordinariness of impairment. Nash⁵¹ cites evidence which indicates that most disabled UK employees acquire their impairments during their working life. Some participants in this study acknowledged what can often be associated with the everyday effects of ageing:

The binary between disabled and non-disabled could be blurred. Ageing will make everyone disabled. Certainly older academics will increasingly experience limitations.

I'm getting older and the volume of work is very tiring. Even a little bit of admin support would enable me to work for longer.

46

Oliver (2009)

47

Oliver (2009) p47

48

Shakespeare (2013)

49

Cameron (2011)

50

Swain and French (2000)

51

Nash (2014)

It seemed that for those with an impairment, ageing may exacerbate the effects of disability:

I get tired and I have a clear sense of how I can conserve my energy and apply myself effectively. The infrastructure at [institution] is frustratingly inadequate in terms of systems and admin backup therefore exhausting, for everyone, not just disabled staff.

This could be even more complex for disabled people with caring responsibilities:

It's difficult to spend a night away from home because of medical things so that restricts the conferences I can attend. It would have been great to join in the post-conference, networking, drinks and dinner, but I just thought I'm not staying because of all my caring issues, including that, I am a carer. It's not worth the problems but it would be nice to feel liberated enough to participate in all of that and not have to worry about all the little things.

Some people, particularly those with chronic health conditions such as diabetes which they managed without help, explained that although they were included in the Equality Act definition they did not 'feel' disabled. The development of the neurodiversity movement has prompted debate on whether neurodiversity is about disability or about thinking differently. While some participants who identify as neurodiverse discussed the choice of aligning themselves politically with the disability movement, alignment with difference was explained in terms of feeling that: disability had negative connotations.

Disability held no adverse personal associations for those who viewed the term 'disabled' as being:

... political and equated with oppression which should be named, identified and resisted.

However, other people's attitudes were acknowledged by all participants as problematic:

I am very tired of my neurodiversity being problematised and my institution's failures to provide an infrastructure in which I can thrive.

I work harder than anyone else but strategic thinking comes easily to me. We dyslexic people are unmanageable but we are fantastic managers ourselves provided we have sufficient backup and we are not bogged down wasting time on things we are expected to cope with and find difficult, but which admin people find easy.

Identity and disclosure

Participants, as one would expect, talked about themselves and their lives across wide-ranging aspects of their self-identities. They emphasised the complexity of identity and the intersection of disability with other aspects of identity such as gender, race and sexual orientation:

... thinking beyond the obvious, understanding that experience of impairment and disability forms part of identity, alongside myriad other factors.

Acknowledge differential experiences of disability discrimination when this oppression is combined with others: the self-advocacy frustrations of a white middle class woman with anxiety disorder may not be the same as a South-Asian working class male with Asperger's, and if both of those individuals are cisgendered or heterosexual their experiences might differ again from LGBTQIA⁵² persons.

One female participant, echoing Morley's findings of women's leadership experiences in higher education,⁵³ spoke of not fitting in to the management 'norm':

I don't look like any of our senior leadership team. I'm not an old white dude in a grey suit.

A recurrent annoyance, mainly expressed by people with visible impairments, was that assumptions made by colleagues were often based on what they could see thus resulting in a reductionist view of people's identities:

... the imposition of frustratingly reductionist identities such as 'the wheelchair user'.

My impairment is part of who I am but it's the first thing people see and they often make assumptions based on first impressions and, I'm afraid, stereotypes.

My spinal injury still bothers others, eg would-be employers, way more than it should. I've been perfectly comfortable with it for over 43 years.

Stereotypical media portrayals were highlighted as a contributory factor. The film *Rain Man*, for example, resulted in 'genius pressure' put on people who identify with autism. Though making judgements based on a single aspect of a person's identity seems unfeasible, this is still very much part of the everyday ableism that disabled people experience (Campbell,⁵⁴ Goodley^{55, 56}).

Another assumption connected with the notion of identity was that disabled people's caring roles may not be acknowledged, with only their own care needs recognised. This was highlighted by a disabled parent:

As a disabled person, I feel I am viewed as requiring care, whereas really having young children means that I need flexibility in work to provide care as a dad.

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Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual

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Morley (2013)

54

Campbell (2009)

55

Goodley (2013)

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Goodley (2014)

The notion of pride arose in relation to various equalities dimensions including disability. A participant who identified as gay suggested that:

...the Disability Movement is somewhat behind gay rights activists in embracing pride.

Some participants described being proud of their personal achievements as the following examples show:

I'm proud of who I am (short stature, with dwarfism) and the gradual change in how society views people like me.

I have lived my life with speech impairment. This has presented challenges, but has also given me the drive to achieve the things I have in my life and career.

However, there was also contention around the idea of disability pride because, as one person put it:

..... impairment is only part of a multi-faceted sense of self.

While some participants talked about "avoidance of overt association with disability pride" others cited "examples of positive pride initiatives". These included the London School of Economics Disability Identity conference 2011, Disability Pride Conference, the Cambridge Annual Disability Lecture, the 2014 Dyslexia Cultural Festival, NADP, ECU and NADSN conferences.

With regard to disclosure, people identifying with hidden impairments debated its relative merits and demerits. One person commented that disclosure is in itself an unpopular term with negative connotations. Participants described being compelled to disclose in order to access workplace services as:

..... unhelpful, clunky, emotionally draining, dangerous and not inclusive.

Concerns were expressed about disclosure carrying risks around discrimination. Furthermore, there was a view that disclosure did not guarantee positive outcomes in the form of reasonable adjustments:

My impairment is unseen. To get help, I need to 'disclose'. I really don't like that word - it feels risky. I don't know how people will react. If support isn't available it's pointless.

Involvement in high profile activities such as chairing disabled staff networks could be compromised by the risk associated with increased visibility in carrying out that role:

No one was willing to chair our Disabled Staff Network because of the associated visibility.

Connected to the risk of disclosure were issues of confidentiality. This emerged early on in the study as an important theme. Some people were particularly wary, having had past workplace experiences of confidentiality being breached. This could involve the seemingly innocent approach of: *"I hope you don't mind but I've just told xxx"*.

I regretted disclosing as confidential personal information was emailed around the university while HR and finance - not understanding Access to Work - debated who was responsible for implementing reasonable adjustments.

On the theme of the risk of visibility, two participants with visible impairments were concerned about overexposure by being called upon frequently to comment publicly about disability issues. Indeed Nash⁵⁷ has highlighted concerns around pressure to 'be inspirational'. One participant spoke shockingly of having to be a standard bearer for the Equality Act:

I am literally "wheeled out" within the institution as some kind of standard bearer for the Equality Act, which was not always a comfortable experience.

While some participants worked in areas aligned to disability, for example as senior academics in Critical Disability Studies or Heads of Disability, Wellbeing and Equalities Services, many did not and were irritated by being expected to be the spokesperson for equalities. In addition there were pressures to perform better than the average. Several people spoke of constantly having to prove their worth to their institution.

Even when participants in this study had other roles but did get involved in equality issues they could feel that their institutions did not recognise the value of this activity:

Sometimes it's like having an extra role in addition to my own job.

Values, strengths and leadership style

A striking degree of congruence emerged between participants' descriptions of their values and approaches as leaders and the principles of distributed leadership. Emphasis was placed upon empathising with colleagues and encouraging them to progress, valuing team work and consciously striving to develop diverse, cohesive, organised teams with shared goals. Additionally, they focused on promoting inclusive practice and not taking credit for the work of others. While comments were characterised by humility and concern for other people, participants were also able to articulate their own strengths, including the ability to hold a clear overview, to plan strategically and to act with integrity. There was clearly a focus on addressing issues of inequality, diversity and inclusion:

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Nash (2014) p45

I see the bigger picture while not losing sight of detail. I am strong in working with group dynamics, power relations, inequalities, diversity and inclusion. I have vision and think outside the box. I am not afraid to try new approaches but at the same time I am not too attached to my own perspectives and ideas. Instead, I prefer to work through community and cooperation, while appreciating and providing space for people's uniqueness. I work hard and am committed and invested. I am very organised.

The emphasis on equality was underlined by another participant:

I suppose my greatest achievement is that I have always remained true to my principles about the value of an equal society and I have never compromised.

One participant highlighted the personal rewards gained from helping others in the team to achieve:

Our greatest resource is our team. My greatest delight is encouraging people to achieve. I ensure that people have opportunities to develop and feel confident about sharing ideas. I never take credit for other people's work.

Barriers and frustrations

Despite positive experiences expressed in this study, many participants experienced barriers and frustrations in the workplace. Participants largely just 'lived with' their impairments but expressed irritation, resignation and sometimes anger about disabling external factors and ableist assumptions. The following illustrations, grouped thematically, reflect the most frequently mentioned barriers and frustrations. Key themes were around attitudes, infrastructure and administration, technology and leadership training.

One person felt that a major barrier was people's attitudes and assuming what a disabled person needed without asking them:

Other people's attitudes create barriers: I found that often colleagues make assumptions about what is right and what can help the disabled person without asking them. This cannot help to resolve any problems and has made me feel disrespected. I think the only person who knows best what kind of support is needed and the best solution is the disabled individual.

By overlooking disabled people's needs, activities could be arranged without taking their needs into account. This could result in workplace practices which excluded them:

I don't want to be forced into engaging in social activity especially at the end of a very busy day. I can do the networking that a role requires but I don't want to have to 'relax' in a social setting in the evenings on a highly intensive training course as I often have little mental strength left.

There was much discussion around the lack of reasonable adjustments reflecting inadequate infrastructure and administrative support. Having to lobby for reasonable adjustments could be a draining experience:

Above all, I am tired of the lack of understanding of reasonable adjustments and the energy spent educating people over and over again.

Good planning and administration were clearly lacking for a participant with mobility problems:

Our campus is on a hill and I'm timetabled to get from one side to the other in five minutes. I can't do this in my wheelchair. There are no automatic doors. It's a failure of timetabling and estates planning which leaves me frustrated and exhausted.

Frustration was also expressed in getting support from Access to Work. This could be time-consuming and burdensome and result in having to take time out of working hours to resolve:

Getting support from ATW can be a very slow process. Disabled people usually know what they require. Assessment process can take time and is not always helpful as the disabled person already knows what type of support and equipment they need. I am at my most productive when I do not have to undertake endless administrative tasks. In a senior role I need a PA!

Problems with wheelchair access could be detrimental to people's careers in the long-term, as one participant explained:

My career path was completely chaotic, based on finding work anywhere that had wheelchair access.

The lack of planning around technology was highlighted. There was an issue around not taking accessibility into account when systems were changed:

When ICT⁵⁸ systems change there does not seem to be any coherent planning about maintaining accessibility.

Another problem was inconsistency amongst universities in terms of providing assistive technology; some universities excel and others do not. A job move can entail much time in negotiating a better working environment:

I left one university where assistive technology was networked, promoted and well used by staff and students. It was a nasty surprise when I found I had to start all over again because it was not available as standard in my new place. What followed, inevitably, was months of negotiation with the institution and ATW at a time when I should have been settling into quite a demanding senior role.

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Information and
Communications
Technology

The time factor was again emphasised with regard to the length of time required to get to grips with new technology:

There is so much fantastic technology available but I don't feel that there's enough time to learn how to make best use of it.

Several participants commented on the lack of thought put in to designing leadership programmes both in terms of content and accessibility, as one participant put it:

I really find it astonishing that organisers don't anticipate that there may be disabled people present. I've just been to a workshop about research leadership. No thought had been given about participation of disabled people. They hadn't asked the right questions in advance, hadn't thought about the venue and the trainer told offensive and alienating anecdotes.

A person employed in the National Health Service (NHS) felt that there should be a programme designed specifically for aspiring disabled leaders:

I am not aware of any disabled leaders programmes in the NHS. NHS England should work with a disability organisation, such as Disability Rights UK to develop a programme for disabled staff who wish to become leaders.

Suggestions for action

The following recommendations for the development of policy, practice and procedures to assist disabled people in attaining leadership roles are based on a thematic analysis of participants' responses. The emerging categories are presented with a view to reflecting the authentic voices of participants and producing information designed to be of practical benefit to individuals and institutions.

A high degree of congruence is apparent between the findings of this study and the much larger study by RADAR⁵⁹ *Doing seniority differently: a study of high flyers with ill-health, injury or disability*. In both studies, disabled people reject ableist assumptions and reflect on societal constraints which hinder their career progression. Recommendations for action that emerged from this study can be grouped into four broad themes:

- Strategic responses
- Inclusive design, reasonable adjustments and Access to Work (AtW)
- Leadership recruitment and development
- Peer support, mentoring and networks

Strategic responses

Participants were generally positive about the principles underpinning UK equalities legislation and they viewed disability equality alongside and intersecting with other protected characteristics. There was, however, widespread agreement amongst participants that legislation in isolation would make no difference unless there was high level commitment to bringing about organisational change. There was a huge range of recommendations as to how change could be effected. A key recommendation was visible championing of the issues as well as equality mainstreaming in strategic and day-to-day planning:

If diversity isn't visibly championed at the highest level and, if there are no real role models in senior leadership, we've really got an uphill struggle. Institutions must ensure that disability equality is mainstreamed into strategic and day-to-day decision-making in everything we do.

One participant emphasised the importance of acknowledging institutional discrimination and the need to be aware that this should be part and parcel of policies that may in other ways appear virtuous:

Acknowledge that the definition of "institutionalised discrimination" means that discrimination occurs through the operations, policies, and values of the institution. Don't consider discrimination an aberrant feature of otherwise virtuous policies, and do the work to understand how your own policies might be perpetuating disableism.⁶⁰

59

RADAR (2010)

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See Sara Ahmed's 'On Being Included' for a useful discussion of this in relation to race (2012, pp44-50)

61
Gretch (2011)

62
Martin (2011)

63
Sayce (2011)

64
www.parliament.uk/documents/commons-vote-office/March%202015/12%20March%202015/40.DWP-Access-to-work.pdf [accessed 6 February 2017]

65
House of Commons: Written Statement (HCWS372), Department for Work and Pensions. Written Statement made by: The Minister for Disabled People (Mr Mark Harper) on 12 March 2015

66
<https://www.disabilityrightsuk.org/news/2015/march/access-work-changes-dr-uk-response> [accessed 6 February 2017]

Participants felt that institutions could only evolve towards equality from a position of open acknowledgement that improvements were required and an understanding of the baseline from which they were starting. The use of benchmarking was recommended to analyse existing policies and practices, including via the use of equality impact assessment:

Organisations should undertake benchmarking (such as the Disability Standard) to analyse existing policies and practices and identify how these can be revised to support more diverse leadership. Ensure that the recruitment policy and procedure has been through an equality impact assessment, is monitored and reviewed regularly to make sure it's practical and fair.

Wholesale change was also seen to be necessary via systemic culture change programmes to thoroughly address under-representation and disadvantage:

A systematic cultural change programme within and beyond HE is needed around under-representation and disadvantage of disabled people in employment and other aspects of life, i.e. beyond legal compliance.

Some people acknowledged disability rights as a global concern noting the privileged position of minority world countries, an issue which has been explored by Gretch⁶¹ and Martin:⁶²

The Disability Discrimination Act, followed by the Equality Act, definitely changed things for the better in this country but this protection is not available all over the world. I'm not sure how aware university staff in the developing world are of The UN Convention on The Rights of People with Disabilities.

Inclusive design, reasonable adjustments and Access to Work

Access to Work was frequently mentioned as an aspect of support for disabled staff which had the potential to make a very positive difference to people's working lives. Many of these issues have already been flagged up by Sayce.⁶³

Top of the list were requirements to raise institutional and individual awareness of what AtW could offer and to embed procedures which would make funding much easier to acquire and utilise effectively. Some participants raised concerns that the potential loss of other aspects of assistance for disabled people could limit employment opportunities. In March 2015 Mark Harper, Minister for Disabled People, announced Access to Work reforms which included a cap despite the fact that only 1% of Access to Work recipients utilised funds that exceeded £35k and the average spend was £3k per individual.^{64, 65} Sayce responded to the proposed changes on 12 March 2015 on behalf of Disability Rights UK.⁶⁶

The scheme makes the government money. For every £1 spent on AtW, £1.48 comes back to the exchequer in tax, national insurance or savings to the benefits bill.

*On 1 April 2016 an upper limit of £41,400 was introduced.*⁶⁷

One participant expressed a number of concerns about how AtW was administered and this created problems when moving from one job to another:

AtW should be married up with whatever policies we have in place or contracts, you know...for instance, the procurement that goes into getting equipment, getting support workers, all that. There has got to be a more streamlined way of doing it. It's very difficult to get continuity with AtW when moving from one job to another.

As the data was being collected, participants were expressing concerns around the general trend towards revisions and reductions in disability benefits including the point that the Independent Living Fund (ILF) was under threat: These concerns were not unfounded as the ILF closed on 30th June 2015 from which point enquirers were redirected by gov.org to their local council.⁶⁸

AtW is part of a wider package. I am concerned about the way things are going with disability benefits generally. The Independent Living Fund is part of the story for many and this is under threat. Proposed Disabled Student Allowance (DSA) changes might discourage potential disabled students and ultimately limit opportunities to get graduate level employment. A joined up approach is necessary. Moving from DSA to AtW ought to be much simpler.

As well as working strategically to enhance AtW's effectiveness within HEIs, participants consistently recommended moving towards embedding reasonable adjustments as far as possible within inclusive workplaces. By their very inclusivity, such environments could reduce requirements for 'special' arrangements. One participant highlighted the benefits to everyone of universal design:

Universal design isn't about disability. If the university took a good hard look at all its systems from the perspective of the end users and streamlined everything so that the administrative structure was much better than it is now, everyone would benefit.

This is also the case with technology, as one person put it:

I would not be able to do any of what I do without computers and electronic technology! Much 'assistive technology' is good for everyone. The sector does need a bit of a technological revolution to make best use of it. Networking assistive technology and not associating it specifically with disability would be a start.

Emphasis was placed on the need for high level commitment to a workplace culture in which diversity was celebrated rather than problematised and people were encouraged to be open about their requirements. Some saw the benefits of a diverse leadership in higher education:

We need to address the policy practice gap and be very clear about the benefits of diversity in leadership.

67

<https://www.gov.uk/access-to-work/what-youll-get> [accessed 6 February 2017]

68

<https://www.gov.uk/government/organisations/independent-living-fund> [accessed 2 February 2017]

69
Nash (2014)

70
Roulstone and Williams
(2014)

71
Nash (2014)

72
Roulstone and Williams
(2014)

73
Nash (2014) p19

Many other comments were made about how things could be better organised. One way would be to give disabled people more control in organising their working lives often at minimal cost to the institution:

I need about four hour's clerical assistance a week and for that person to do things like format my documents in probably ten minutes. If I was given £50 a week to organise my own clerical support I would be quite happy and a lot less worn out.

As with Nash⁶⁹ and Roulstone and Williams,⁷⁰ the notion of control came up frequently. Participants described the counterproductive experience of being told what was going to be provided rather than being asked what was needed in order for them to flourish at work. Accessibility of information about infrastructure and available services was viewed as essential and many commented that this was more readily available to disabled students. Pooling these resources could be done to productive effect:

Disability services for students are quite separate from services for staff and usually much better. Joint provision would make sense. There is expertise and resources in universities which staff can't access.

It was noted that entrepreneurs may have more control over the support they are able to arrange and one participant felt that a similar approach could be adopted in the university setting:

Successful people, who work for themselves, such as dyslexic entrepreneurs, have control of support they arrange. The university and AtW should listen to me and put in place reasonable things I need. At the moment it's too convoluted and inconsistent. I don't feel able to control the situation adequately. This causes me unnecessary stress.

Leadership recruitment and development

Career progression was a burning issue for many participants who felt that they had not been encouraged to move up the ladder. Many expressed concern around the lack of access to senior role models echoing the findings of Nash.⁷¹ Obvious obstacles included 'poor infrastructure and inadequate administrative systems' which resulted in 'feeling overwhelmed and exhausted'. Attitudinal barriers were felt to be more insidious but closely aligned to lack of obvious encouragement to progress. These experiences are reflective of other research that refers to the notion of the 'glass partition' arising from feeling reluctant to move jobs and start again from the beginning therefore missing out on opportunities to broaden experience by taking on new roles.⁷² Participants expressed experiences akin to Waters' notion of "the subtle bigotry of low expectation" (cited in Nash⁷³). There was a need to stop recruiting a leadership from a homogeneous group and start recruiting from a more diverse pool:

Stop hiring white, abled men. I mean this seriously, it is embarrassing. There should be more women, more disabled people and more people of colour in leadership positions.

Acknowledge that leadership exists in many forms at many levels and leaders are not all non-disabled white men in grey suits.

Similarly, leadership and disability should not be seen as mutually exclusive:

Do not assume that autistic individuals cannot lead or will not be followed.

While participants came up with some examples of useful and accessible leadership training events these were the exception. Organisers of networking, staff development and leadership activities were frequently criticised for not taking equality concerns seriously and not anticipating and planning for the participation of disabled people. High quality mandatory Disability Equality Training, delivered by disabled people as part of an integrated approach to equalities training for all staff was recommended. Many people felt that they would like to be contributing but some felt too constrained by their jobs and others did not want to be, as one participant put it, *'shoe-horned into the disability champion role'*.

Disability Rights UK offers 'A career development programme for people in employment, living with a disability or health condition.'⁷⁴ Delivery by disabled people is highlighted as a strength in models of good practice mentioned by participants, which also included Frontrunners,⁷⁵ Churchill⁷⁶ and the Calibre⁷⁷ leadership programme:

Frontrunners and Trailblazers and other similar initiatives are starting to encourage young disabled people to think about leadership. This is a good thing. Churchill and Calibre offer bespoke leadership training for disabled people which is also highly regarded and quite rightly so.

It was deemed important to embed equality into any training scheme:

Training is useless unless it challenges stereotypes and negative attitudes. Insist on a genuine commitment to equality and diversity with disability embedded not problematised.

Suggestions for embedding inclusive practice related to the whole employment journey, covering concerns around recruitment, mentoring, progression and leadership development:

Inclusive recruitment processes, at every level, need to dovetail neatly and without fuss, into transparent and well publicised systems for work practices which are conducive to success. Disconnects between, for example, interview based adjustments and work placed adaptations, need to be identified and sorted. Having disclosed at interview it took me a while to realise, after I was appointed, that I had to do it all over again. That was a shame as I really needed things in place from day one.

74

www.disabilityrightsuk.org/disabled-people-leading-career-development [accessed 14 Dec 2016]

75

<http://frontrunners.dk/curriculum/> [accessed 6 February 2017]

76

<http://churchillleadershipgroup.com/> [accessed 6 February 2017]

77

<http://www.imperial.ac.uk/equality/support-for-staff/training/calibre/> [accessed 6 February 2017]

The necessity of a degree for access to graduate level employment was commented upon by several people and the importance of maintaining opportunities for disabled students to access degree courses was reiterated. A pressing concern was raised in relation to graduate recruitment in that high-level careers events cluster around the Russell Group, while some disabled students target universities near home in order to maintain their established support networks. Disadvantage is therefore potentially created by recruiter bias towards Russell Group degrees over those from universities perceived by potential employers as less prestigious. Some disabled people may well not have a traditional CV which in turn could limit opportunities for progression.

There is also need to be more flexible in considering the qualifications people may or may not have and to provide additional support such as mentoring:

Look beyond formal qualifications to the individual's experience and enthusiasm; be prepared to be flexible regarding working arrangements if there are individual needs to be met; encourage long-term mentor involvement. Regard personal experience of disability as a strength or additional insight, rather than negatively.

Peer support, mentoring and networking

Participants were overwhelmingly enthusiastic about the value of networking and formal and informal peer support and mentoring arrangements. Disabled staff networks were valued but lacking in senior staff representation. Participants did not want their networks to be hijacked by their institutions and wanted to maintain organisational control:

It's really important to maintain control and confidentiality so you can be yourself. I do not want my being part of a network to give the university the impression that I necessarily want to be a visible 'face of disability'. I certainly don't want to be 'The Chair.'

Some networks extend their reach to include relatives of disabled staff as well as the staff themselves:

We have a network of disabled staff which includes, for example, parents of disabled children and grown-up sons and daughters. It's important to be inclusive in this way as we do have a lot in common and we do support each other.'

Boundaries between mentoring, coaching and befriending were not clearly delineated by participants. Some formed arrangements with people who had similar impairments, others with comparable job roles. Examples of disability-focused mentoring research were given, including projects by the British Dyslexia Association and Research Autism.

One participant felt there should be mentoring for people at PhD and early career researcher level:

A mentor system for PhD and Early Career academics would be useful.

One person spoke of having had mentoring from several individuals that varied in terms of how useful it was:

I have had formal mentors (former CEO of xxx, Director at an investment bank) and many informal mentors (including other disabled artists). Some are better than others.'

On occasion participants had set up their own arrangements in the absence of external recognition that this was needed:

I know that what's obvious to me isn't necessarily obvious to the world and, that things don't happen unless someone makes them happen. Sometimes, if it's something you need, that someone has to be you.'

Mentoring can be helpful at particular points in a career, for example, at the point of becoming disabled:

Peer support is really important. I became disabled about 6/7 years into the job and I came to you (xxxxx) for advice because I felt vulnerable isolated and lost and didn't know what to do. I still remember I said how I may end up in a wheelchair and you said "don't worry, you'll have more energy!"

Research Autism⁷⁸ is also focusing on transitional periods, recognising that change can be more difficult for disabled people:

Research Autism is doing something about mentoring focusses on transition which is a vulnerable time in education and work. People get stuck in a role because change is much more difficult when you are disabled. If everything is set up where you are you don't move. That holds people back.

Equality networks embedded into institutional governance were viewed as necessary in order to affect institutional change. Some people felt that the divide between staff and students closed the door on in house services which could help disabled staff and provide role models for students. Networks supported at the highest level were felt to be valuable:

Our disabled staff network is a sub-committee of the Diversity and Equal Opportunities Committee which is chaired by the Vice-Chancellor. It fits into the structure in a real way and this helps us to get our voices heard.

78

<http://researchautism.net>
[accessed 6 February 2017]

79

Nash (2014)

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www.purplespace.org
[accessed 13 Dec 2016]

A national network for disabled university leaders was thought to be a faraway dream because of resourcing concerns and lack of visibility within the sector. Many participants valued meeting other disabled workers at NADP, NADSN, ECU conferences and would like to see these organisations having a co-ordinated national role given their remits and expertise in disability equality. ECU publications were highlighted as being of value.

Nash⁷⁹ discussed taking disabled staff networks forward in various workplaces and suggests emphasising 'ability' in the title. Nash has gone on to develop 'Purple Space' described on the website as 'the network for promoting disabled talent in business'.⁸⁰

Purple Space is gaining momentum and bringing disabled leaders together physically and via a developing social media presence.

Networking amongst disability organisations was felt to be a valuable activity, particularly when conferences had good accessibility:

NADSN is something I do alongside my day job, with no sort of time allocation so it's hard work, but it is important.

I meet other disabled leaders at NADP conferences which are always highly accessible and very valuable.

Limitations of the research and suggestions for further work

No grand claims are made for this paper which simply engages with the limited available literature and captures views of willing volunteers at a particular point in time. The decision to avoid impairment-specific recommendations is justified, partly because of the relatively small number of responses, but also because participants were concerned about creating a false sense of 'homogeneity by impairment label', as one participant said:

... identity is formed and individual experience is informed by so many factors not just by diagnostic labels.

Certainly, contributions from leaders who identified with an intellectual impairment were almost totally lacking. This was only partly rectified by including insights from a participant from outside the higher education sector.

For every person who engaged with a questionnaire, interview or focus group there are likely to have been others who could not find the time or missed the email requesting their participation in the study. Additionally, the author was uncomfortable about using email as the main mode of communication, particularly as email overload was identified as an issue.

Given that Nash⁸¹ and others have found that people with long-term health conditions may not identify as disabled, it may have been advisable to be more explicit with potential participants about how disability is defined according to the equalities legislation. This may have boosted the response rate to the research.

Finally, contributions, although anonymously reported, were not always anonymous to the author and this may have influenced what participants felt prepared to share.

In spite of these limitations, valuable insights have been captured because of the generosity of participants. The resulting paper, whilst limited in scope, includes some very good ideas which have come directly from people with lived experiences of disability and leadership. Further, it clearly highlights avenues for future action in order to develop better practice in HE institutions in terms of leadership development. These include:

- embedding equality and diversity concerns into future research around leadership practice, and developing a better understanding of the constraints of ableism (Corlett and Williams⁸²).
- including participants with the label of intellectual impairment.⁸³
- encompassing disability issues into ageing at work studies
- Track the progress of people with a disability who express interest in leadership in order to learn about the factors which help.
- focusing on transitions between work roles and organisations.

81

Nash (2014)

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Corlett and Williams (2011)

83

Goodley (2010)

Conclusion

This study explores the experiences of disabled leaders in higher education, with a view to informing the development of better leadership practice and investment in disabled leaders in the sector. Using questionnaires, focus groups, discussions and interviews, disabled practitioners have been engaged to provide insight into current practices and highlight the barriers to developing better policies. The research reveals a range of important issues, which have been analysed and captured as recommendations for institutional change and a leadership development agenda designed to enhance disability equality. Disabled leaders tend not to be visible despite often possessing characteristics and the skills associated with effective leadership. Further, the study reveals numerous examples of disabled leaders sensitively adapting to circumstances and team dynamics and expressing a degree of cynicism about the idea of charismatic leadership. However, without strategic level commitment to eradicating barriers and sustaining change, the status quo will remain. Disabled people work effectively within well organised, supportive environments where they feel valued and have some control. Inclusive practices and universal design reduce the requirement for individualised adjustments and benefit everyone. A number of suggestions for action are identified, including strategic responses, inclusive design and reasonable adjustment responses, a focus on leadership recruitment and development, and developing peer support, mentoring, networking and equalities-focussed leadership training.

Visible role models are important but disability is but one facet of a person's identity. In the words of a disabled participant:

Asking people what they need in order to be effective, is far more useful than telling people what they are going to get.

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Acknowledgments

This work is dedicated to the late Deb Viney, a disabled leader who was a founding member of The National Association of Disability Practitioners.

Author biography

Professor Nicola Martin is a disabled leader in the field of education and a National Teaching Fellow with a particular interest in inclusive practice across the age range. Having worked in education for 35 years she is currently head of research, higher degrees and student experience in the division of education at London South Bank University. Nicola is a board member of the National Association of Disability Practitioners and editor of *The Journal of Inclusive Practice in Further and Higher Education* and a founder member of the National Association of Disabled Staff Networks. She is well known for her work on mentoring autistic students conducted in collaboration with the University of Cambridge.

Appendix I - All staff known to have a disability by disability and activity standard occupational classification group 2013-14^{84,85}

Disability	All staff (excluding atypical)										Atypical staff	
	Academic staff	Percentage of academic staff	Non-academic managerial, professional and technical staff	Percentage of non-academic managerial, professional and technical staff	Clerical staff	Percentage of clerical staff	Manual staff	Percentage of manual staff	Academic staff	Percentage of academic staff		
Disability												
A specific learning difficulty	1305	18.2%	840	19.0%	465	13.9%	370	20.0%	430	28.2%		
General learning disability	40	0.5%	25	0.5%	15	0.5%	35	2.0%	15	1.1%		
A social/communication impairment	60	0.8%	20	0.5%	25	0.7%	10	0.6%	20	1.2%		
A long-standing illness or health condition	1570	21.8%	1185	27.0%	945	28.4%	505	27.2%	245	15.9%		
A mental health condition	485	6.8%	405	9.1%	390	11.8%	155	8.3%	150	10.0%		
A physical impairment or mobility issues	795	11.0%	455	10.3%	360	10.8%	115	6.2%	160	10.5%		
Deaf or serious hearing impairment	440	6.1%	265	6.0%	200	5.9%	130	7.0%	90	6.0%		
Blind or a serious visual impairment	205	2.8%	115	2.7%	60	1.8%	30	1.7%	40	2.5%		
Other type of disability, impairment or condition	1680	23.4%	695	15.7%	570	17.0%	335	18.0%	275	18.1%		
Two or more disabilities, impairments or conditions	605	8.4%	400	9.1%	310	9.3%	165	9.0%	95	6.3%		
Total	7185	100.0%	4405	100.0%	3340	100.0%	1855	100.0%	1520	100.0%		

In this table 0, 1, 2 are rounded to 0. All other numbers are rounded up or down to the nearest multiple of 5. Percentages are not subject to rounding.

84

Hesa (2015)

85

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streams=5&year=
3&field=All
[accessed
13 Dec 2016].

Appendix 2

QUESTIONNAIRE

Demographic information

Name (optional):

Email (optional):

Position held:

Institution (optional) or type of institution:

Further background information you consider relevant, e.g. age, and gender, ethnicity, qualifications, previous roles (optional)

Consent for information to be used anonymously on the understanding that I can withdraw prior to publication (Signature)

Open-ended questions

1. How would you describe your contribution to higher education?
2. How would you characterise your leadership style?
3. What influenced your development as a leader? (Prompt: include comments on specific leadership training, if any)
4. What are your strengths?
5. What do you enjoy about your role?
6. How would you describe the values which underpin your work?
7. What are your ambitions?
8. What would make your work life easier?
9. What is your greatest achievement?
10. What could make you even more productive?
11. What aspects of your role do you find particularly dull and why? Could this be changed? How?
12. What is your greatest frustration about work?
13. What aspects of your role do you find particularly rewarding and why?
14. What, if anything, would you like to say about your impairment (in broad terms)?
15. What are the main barriers you experience in relation to your role and what might help to reduce these? (Prompt - own actions, other people, systems)
16. What aspects of your role do you find particularly challenging and why?
17. What sort of policy, practice, legislation, support or assistance would make, or has made a positive difference to you at work /how? (Prompt in relation to Access to Work funding, membership of networks and /or interest in networks, in which case, what would these look like, sources of useful information, union support, mentoring etc.).
18. What advice might you give to your 25 year old self about career development and/ or leadership? (Question to be adjusted if interviewing anyone younger than 30).
19. What would be your three top tips to aspiring leaders?
20. What would be your three top tips to institutions in relation to recruiting, retaining and supporting leaders?

21. What would be your three top tips to institutions in relation to recruiting, retaining and supporting disabled leaders (if there is any difference from your answers to q. 20)?
22. Have you got any practical suggestions for existing resources, resource development, useful training, training that would be useful but does not exist, policy etc.?
23. Any other comments you have not had the opportunity to make?

Stimulus paper



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