

Examining SGIDs through a disability lens: Increasing awareness and access in a CTL program

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Abstract

Centers for teaching and learning (CTLs) have increasingly been attending to diversity, equity, inclusion, justice, and access (DEIJA), offering myriad programs for instructors to learn how to make their teaching more welcoming and effective for all students. Yet considerations of disability continue to lag behind in higher education, and educational developers themselves may not always create programs that are inclusive and accessible. In this article, we will focus on one popular CTL program, primarily called Small-Group Instructional Diagnosis (SGID) in the literature. When we examine this program through the lens of Disability Studies, we begin to realize just how much ableism permeates its design and implementation. This article will begin an important process of uncovering, naming, and detailing some of the overlapping barriers for those involved in the SGID process and the accompanying equity and access gap(s) that may inadvertently be created because SGIDs are so frequently offered across the United States. We will explore how we might respond to some of the limitations of the SGID program, as currently and commonly conceived, including turning to Universal Design for Learning (UDL) for redesign ideas and even considering whether this program continues to be the best way to achieve its intended outcomes. We offer a model for more broadly

rethinking educational development processes that may perpetuate ableism and intersecting forms of oppression.

Keywords: SGIDs, disability, ableism, diversity

Centers for teaching and learning (CTLs) across the country have increasingly been attending to diversity, equity, inclusion, justice, and access (DEIJA), offering myriad programs for instructors to learn how to make their teaching more welcoming and effective for students. The annual conference of the Professional and Organizational (POD) Network boasts numerous sessions every year to support and assess these instructional and institutional efforts. Yet, in an analysis of two decades of the journal *To Improve the Academy*, Grooters (2014) discovered that disability was “addressed in fewer than 1% of articles coded”; the same was true for presentations at the POD conference. Despite expanded attention to issues of DEIJA in higher education over the last decade, considerations of disability continue to lag behind (e.g., Burke, 2020). Recently, Gagné (2022) referred to accessibility as a “gap” in the educational development community. And, despite calls for critical self-reflection and growth along other social identity markers, such as race (e.g., Brooks et al., 2022), educational developers themselves may not always create programs that are inclusive and accessible:

When we consider common educational development programming, we can identify other examples of barriers to access we may inadvertently create: emphasizing or requiring participation or interaction; inviting participants to stand for recognition or to “vote with their feet”; assigning or distributing inaccessible scanned texts; showing videos without closed captioning and/or a transcript; requiring participants to quickly relocate; using labels or idioms such as “crazy” or “blind spot”; not hiring sign language interpreters for public talks; asking those with disabilities to send a special request to ask for

accommodation; treating access as an afterthought or a footnote; and excluding from the programming voices, perspectives, experiences, resources, and other materials from people with disabilities. These barriers highlight the urgency of deeper awareness of an attunement to disability. (Trybus et al., 2019, pp. 64–65)

To make a modest contribution toward filling this ongoing gap in the literature, we will focus on one popular program supported by educational developers and CTLs across the country, including our own, which has been primarily called Small-Group Instructional Diagnosis (SGID). (Other names, such as Group Instructional Feedback Technique [GIFT], with minor variations are also used in earlier studies.) SGIDs were developed in the 1980s and have been used ever since at institutions of varying types, under varying names, with demonstrated usefulness (Diamond, 2004) and impact (Hurney et al., 2014). When we examine this program through the lens of Disability Studies, however, we begin to realize just how much ableism permeates its design and implementation. Students, the recipients and primary participants of the SGID process, are an obviously affected population. Barriers can also exist for those who are or who wish to become SGID consultants (that is, the people responsible for gathering and conveying the mid-semester feedback, often CTL staff) as well as the instructors who request the feedback in the first place and who are the target population supported by a SGID program.

This article will begin an important process of uncovering, naming, and detailing some of the overlapping barriers for these main SGID constituencies as well as the accompanying equity and access gaps that may inadvertently be created because SGIDs are so frequently recommended and offered as an educational development program across the United States. We will focus primarily on the particular iteration of SGID used on our campus, though this version is popular elsewhere, as Hurney et al. (2021) demonstrated. While this process will be described in more detail below, briefly, SGIDs entail an external consultant soliciting

consensus-based, formative feedback from students in class around the middle of the semester and then meeting with the instructor afterward to discuss the results in order to incorporate student feedback into teaching decisions. We hope readers will recognize variance in the SGID programming at their own universities (if this program is offered) and adjust the following questions and considerations accordingly. We will end the article by exploring how we might respond to and address some of the limitations of this program, as currently and commonly conceived, including turning to Universal Design for Learning (UDL) for redesign ideas and even considering whether this program continues to be the best way to achieve its intended outcomes.

Part of the motivation behind this specific examination of a common educational development program is to increase awareness of disability among readers. We wish to underscore the importance of critically reflecting on all of our practices through a disability lens—not just SGIDs, even though that is the focus here. Failure to do so widens equity and access gaps by allowing only some people to participate and benefit, thus weakening the overall effectiveness of any given program by flattening the diversity and richness of perspectives included. In the case of SGIDs, think of what perspectives are lost if not all students participate. Think of which educational developers are centered . . . and who continues to be marginalized. Think of which instructors (can) even request SGIDs in the first place. We do not presume or promise that we will be able to eliminate ableism in all SGID iterations, much less that which remains rampant in the academy (e.g., Dolmage, 2017; Price, 2011). Instead, we would like to make a humble contribution to noting and starting to disrupt the ableism in one corner of educational development, with the intent to encourage others to embark on similar critical examinations of their own contexts. This work is, of course, never done. We take inspiration from UDL, in that we will not be prescribing any checklists or one-size-fits-all singular solutions for everyone, regardless of their various contexts, to follow. Rather, we offer an iterative, process-oriented approach or spirit that we invite readers to try out too.

Disability: Definitions, Models, and Ableism

People with disabilities are the largest minority group in our country—and around the world (United Nations, n.d.). Disability scholars have claimed disability “as a minority identity,” explaining that “to call disability an identity is to recognize that it is not a biological or natural property but an elastic social category both subject to social control and capable of effecting social change” (Siebers, 2008, pp. 3, 4). Similarly, some have defined disability as “the social experience of persons with certain impairments” (p. 18), a definition we find helpful, so long as the latter term is left open and broad, influenced by disabling environments and social contexts. Foundational works in the field of Disability Studies (e.g., Mullaney, 2019) explore the ways the term “disability” is contingent, contextual, and contested. Ultimately, defining disability is a complicated task with academic, political, historical, philosophical, cultural, personal, and other implications.

For readers unfamiliar, there do exist basic American laws that are intended to protect people with disabilities and to guide the accommodations that our institutions are legally obligated to provide, to both students and employees. Under the Americans with Disabilities Act of 1990 (ADA) and its later amendment (ADA Amendments Act of 2008), a person with a disability is defined as someone “who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment.” The fine print further specifies some of these key terms, for instance, “major life activities include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working” (ADA 1990).

Beyond this bare-bones legal definition, which, in practice, rarely goes far enough in ensuring civil rights, we appreciate and affirm that there is wide variety within the disability community. There are

differences of the body and of the mind, which is sometimes referred to as “neurodiversity” (Shmulsky, 2022). There are visible and invisible disabilities. People who have the same disability may experience it quite differently. Many who have disabilities wish them away and many do not, celebrating and appreciating the assets, gifts, and opportunities that their disabilities provide them. Disability, of course, intersects with many other facets of identity (such as gender, race, or class). It is a fluid identity, one that people can move in and out of. And disability is best understood through interactions with those who actually experience it (Charlton, 1998).

In this article, we work from what is often called an “interactional” understanding of disability. Disability is “not only a set of physical or mental differences but the product of interactions between physical, cultural, and political environments shaping the perception and experience of different capacities” (University of Michigan, n.d.). The “problem” of disability is thus located not solely within an individual who has some kind of impairment that requires a diagnosis from a physician in the hopes of finding a cure/solution (as previous “medical” models of disability have done) nor solely with the various environments in which the person operates (physical, learning, discursive, etc.), which often exclude people with disabilities, but rather at the intersection (i.e., the interaction) between the two. That is, even if it were possible to design totally inclusive and accessible environments, individuals with disabilities might still experience pain, limitations, frustrations, and challenges. And, conversely, even if we were able to remove an individual’s particular disability, a poorly designed environment, such as an old building without an elevator, could still prove to be a barrier, due to disability or otherwise.

Where there are perceived differences—in skin color, in bodies, in minds—there are usually attendant value judgments. Humans are wired toward us vs. them thinking, with bias toward our own “in-groups.” We demarcate what’s “normal” and what’s “abnormal,” what’s deviant and what’s acceptable. And, even though they are socially constructed, these labels have real-world ramifications, such

as judgment, discrimination, exclusion, microaggression, oppression, invisibility, silencing, violence, and more. These are not neutral categories. This pervasive bias and mistreatment affecting people with disabilities is referred to as “ableism,” akin to other (perhaps more familiar) -isms, such as sexism or racism. As has become clear in anti-racist reckonings, in our field and outside, such terms can sometimes raise hackles and provoke defensive responses. To clarify:

Ableism doesn't mean you hate disabled people. It doesn't mean you're an evil person. . . . Ableism is the **system of oppression** that faces disabled people in our society, a system that marks disabled people as inferior and most importantly, **other**. It doesn't have to be done with malice to be ableism. It doesn't even have to be done with conscious intent. Ableism is separating society into *us* and *them*. . . . Ableism is dictating that there is a right, a “normal” way to be, and disabled people aren't it. (Liebowitz, 2017, p. 153)

Sometimes called “disability oppression,” ableism is a “pervasive system that oppresses people with disabilities while privileging people who do not currently have disabilities. Like other systems of oppression, ableism operates on many levels, including institutional policy and practice, cultural norms and representations, and individual beliefs and behaviors” (Ostiguy et al., 2016, p. 299). We are interested in uncovering such systems of oppression not to play a game of “gotcha!” or virtue signal, but rather to destabilize a problematic status quo and try to create more equitable futures for our students and colleagues. SGIDs, commonly supported by educational developers and specifically practiced at our institution and others, are but one instance of a larger system that may be enabling oppression and exclusion in higher education.

Certainly, adopting any critical or disciplinary lens will inevitably illuminate some issues and not others. Sociologists focus on a different unit of the human experience than psychologists do; a biology class will follow a different process, and may come to different results, than

a class in a history department; a women's studies major might notice different trends than an African Studies major—though obviously there can be overlap (from questions asked to conclusions drawn) among all of these different methods. Taking a Disability Studies approach, likewise, attunes us to certain barriers, gaps, and problems—that is, the ableism—in SGIDs, which have so far gone undocumented in the literature, but it is not a panacea, deserving pride of place. We are confident that adopting a different theoretical approach when analyzing CTL programs will bring to the fore other important considerations. (As an analogue, note Bernhagen & Gravett, 2017; Gravett et al., 2023, who have taken, as their starting point and critical focus, gender in the field of educational development.) We encourage readers to adopt as many different lenses as possible when critically examining their practices.

Overview of SGIDs

Many instructors (along with university administrators, prospective students and their parents, potential donors, state legislators, and others) spend time wondering about the “quality,” “effectiveness,” or “success” of their teaching—and just how to ascertain or measure it. We all hope to offer learning experiences and environments in which our students can master skills, demonstrate competencies, grow personally, get out of comfort zones, feel a sense of belonging, unlearn problematic behaviors or assumptions, discover or develop new passions, find community, prepare for graduate school, or become marketable for future employment. Yet too often the only indicators of how things are going in the classroom are in high-stakes situations, such as those at the end of a course by students or at the end of the academic year by a department chair/unit head. Occurring after the teaching and learning experience is already over, and usually for the purposes of personnel documentation and merit-pay possibilities, this information doesn't do much to help either the instructor

or students *during* the semester. And the circumstances often mean that the stress alone can block the instructor from even reviewing the results, let alone using them to inform their teaching in the future. This is in addition to the limits, such as gender or racial bias, that we know pervade many of these evaluation mechanisms (Chávez & Mitchell, 2020; Heffernan, 2022).

Called by many other names (e.g., Engaging Students' Perspectives [ESPs] or Teaching Analysis Polls [TAPs]), SGIDs are one popular formative way of assessing teaching effectiveness. They typically occur around the midpoint of the semester, and they allow students to provide feedback about how the course is going while there is still time to effect change. The instructor can consider and even act upon this student feedback before the course is over. SGIDs offer not a singular, definitive, or comprehensive judgment of one's teaching, but rather a snapshot of a particular moment in time, based on one source of information (i.e., the student perspective). Instructors may turn to other sources, such as peer observation or reflective writing, to fill out the picture (though these sources have their own limitations too). Feedback from a SGID can also "feed forward" into future iterations of the course or the instructor's overall teaching approach.

Unlike individual student responses, which instructors can gather on their own, SGIDs depend on a consensus-building process in which students discuss their perspectives in small groups led by an outside consultant (usually a representative from a CTL). This approach provides opportunities for students to learn from one another about the class and opportunities for the consultant to push back against any problematic opinions shared. It also means that the feedback given to the instructor represents a majority of students' opinions.

In their recent book *Midcourse Correction for the College Classroom*, Hurney et al. (2021) detailed the specific stages (or "convo," as they call them) of a typical SGID process, which our program has similarly followed: "the pre-SGID," in which the instructor makes an SGID request and the consultant and instructor establish logistics; "SGID convo 1," which occurs in class, in which the consultant introduces

the process to students, they work together in small groups answering the SGID questions, and the students write their feedback on a board; "SGID convo 2," also in class, in which the consultant guides a discussion with the whole class about the feedback written on the board; "SGID convo 3," after class, in which the consultant creates feedback documentation for the instructor and they meet to discuss; "SGID convo 4," back in class, in which the instructor addresses the feedback with their class; and, finally, "post-SGID," later in the semester, in which the instructor debriefs and continues to reflect on the SGID process.

The questions asked during the SGID can vary, depending on the center and sometimes even on the instructor (e.g., what they want to find out about their course). The questions we have traditionally used at our institution are:

- What helps your learning in this course?
- What hinders your learning in this course?
- What suggestions do you have to improve your learning in this course?
- What are YOU doing to help your learning in this course?
- What are YOU doing to hinder your learning in this course?
- What could YOU be doing to improve your learning in this course?

Depending on the size of the class, the in-class portion of the SGID, led by the consultant in the instructor's absence, usually takes only about 30–45 minutes. The debrief afterward, between the consultant and the instructor, usually lasts between 30–60 minutes. Here, the instructor has an opportunity to reflect on, with a colleague, what's working and what could use some improvement. An instructor may use this time to brainstorm possible paths forward, commit to a particular change, or simply vent/receive support. The in-class follow-up conversation with the students (i.e., "SGID convo 4" in Hurney et al., 2021) is essential (Weimer, 2016). It can last as long as the instructor chooses. In our own courses, this conversation has taken a portion of

a class period, the entire class period, or even multiple days. This conversation closes the feedback loop, giving the instructor a chance to thank the students for their feedback, to preview any changes made on the basis of the SGID, and/or to explain parts of the course that need to remain the same—and why.

This is all to say, SGIDs that follow this model are not an insignificant commitment for the requesting instructor, for the consultant facilitating the SGID, or for the students being asked to take time out of class to give their feedback. For CTLs, SGIDs can also involve a great deal of time and energy managing the logistics of requests and schedules of the consultants (in addition to any other kind of support, such as consultant training). For this reason, and because SGID is a program so widely offered by CTLs and because it potentially impacts the campus community as a whole, it is necessary to critically examine the process.

Barriers in the SGID Process

When examining SGIDs through a disability lens, we realize that potential blocks and challenges exist at multiple points in the process, for the students, the SGID consultants, and the instructors requesting the SGID. These barriers, like the “invisible knapsack of privilege” that McIntosh (1989) delineated for white people, may not be obvious to those of us for and by whom these systems have been designed. Ability privilege can be similarly disregarded by those who benefit from it (Wolbring, 2014). Beyond any specific barriers, which exclude and harm individuals or groups of people, this kind of CTL program participates in larger systems of ableism, making us all complicit. Below we explore several barriers of the SGIDs with which we are most familiar (not possibly an exhaustive list) and the ways they might impact the main SGID constituents. We have chosen to organize this section by barrier, not by each specifically impacted SGID population, because there are so many similar and overlapping concerns.

To begin, the SGID sign-up processes for instructors and consultants may **depend on inaccessible formats**. The complicated logistics of receiving, organizing, and assigning SGID requests often mean that CTLs may not be attuned to access, may not offer multiple entry points, or may not always use accessible formats and processes. For example, a Google spreadsheet, which is what our center has used in the past for consultants to sign up for SGID requests, is cost effective and convenient, but it can also pose challenges, especially if the people creating it have not been specifically trained in spreadsheet accessibility (e.g., for screen-reader access). Particularly at larger institutions, or under-resourced centers, resource constraints might mean defaulting to what is easy rather than what would serve the most users.

SGIDs typically **entail fast-paced, timed interactions**. Indeed, Hurney et al. (2021) described how in-class SGID conversations “typically take 20–30 minutes. . . . Although 20–30 minutes may seem like a lot of time, SGID consultants will find that it goes by very quickly” (p. 20). Note the recognition that the SGID process goes by “very quickly” as well as the assumption that 20–30 minutes will seem like “a lot of time” to everyone. After the in-class portion of the SGID, the instructor and the consultant are supposed to meet prior to the next class period, so that the instructor can follow up with the students when they teach next. While understandable, this recommendation can also create a (somewhat arbitrary) urgency and speed that may exclude participants. We can consider, instead, adopting a more flexible and forgiving relationship to time (Samuels, 2017), which is captured in “crip time”—a concept that arises from disability experience and perspectives that encourages us all “to slow down and acknowledge that adhering to a rigid time frame can cause harm” (Schumm, 2022). What perspectives are not surfaced in a SGID because there simply wasn’t enough time to formulate them? What suggestions were not made because the adherence to a fast pace forced the group to move on too quickly?

When SGIDs **occur in-person**, only some perspectives (i.e., the ones in the room) will be included. In a pandemic-altered world,

COVID-19 continues to make in-person spaces inaccessible for many (Moody, 2022), as a result of a variety of body and mind differences (e.g., age, being immunocompromised, anxiety). Students on college campuses may be absent from class on any given day for disability-related reasons (e.g., low blood sugar), but also, it is important to note, for many other reasons too (e.g., a family emergency, a temporary illness, oversleeping). If they are absent on the one day that a SGID occurs, and there are no alternatives for offering their perspective, they miss out on the entire opportunity (and the instructor misses out on their potentially valuable feedback). For a wide range of reasons, online or hybrid options remain essential for many teachers and students.

SGIDs may **take place in buildings or rooms on campus that are inaccessible** or create accessibility barriers. This could mean a range of problems, including lack of ramps, automatic doors with working buttons, or clear walkways. But it could also include buildings with fluorescent lighting, exposure to chemicals (e.g., perfumes as well as scented soaps, shampoos, deodorants, and laundry detergents), and more. Our campus, for example, is incredibly inaccessible: it is divided by a highway (which takes a long time to traverse), and many of us teach and have offices in older buildings that do not have elevators or accessible entrances. Based on the heights that many whiteboards are placed at in the classrooms, writing on the board could also be a barrier for people of short stature, wheelchair users, etc. College classrooms have not always been designed for diverse minds and/or bodies; in fact, as Dolmage (2017) persuasively argued, universities were specifically designed to keep disability out.

Traditionally conceived, SGIDs **rely on visuals** without necessarily or always offering alternatives. If SGID consultants pass out paper handouts for students to read and fill in, this design choice excludes those who can't access that format (e.g., those who use screen readers) and any other student who relies on or prefers other modes of expression. Once feedback is shared out (in the case of our SGIDs, on a whiteboard or a projector), everyone is tasked with looking at

that feedback to discover any points of confusion or disagreement. And, after the in-class “convo,” SGID consultants transfer the student feedback to a worksheet/template to ground the in-person consultation, during which the instructor reads and reviews the results. Even just supplementing hard copies of the SGID results with an accessible electronic version for the instructor is helpful and an example of the “plus-one” UDL approach that educational technologists (e.g., Tobin & Behling, 2018) have proposed.

Related, in-person portions of the SGID process often **require writing** at various points. Students may be prompted to record their SGID feedback (though usually through a designated note-taker) on a worksheet, which our center has used in abundance; then someone writes the results of those group reflections on the board. The most common “accommodation” request at our institution, through the Office of Disability Services, is a note-taker, which implies that there may be students in any given class (not to mention SGID consultants) for whom taking, especially handwritten, notes in real time is not possible or preferable. If we fail to create access, we risk alienating participants and losing potential. What if a student with a disability is a skilled note-taker and wants to participate in the group process this way but is unable to contribute their talents because of the way the SGID has been designed? Access, as Disability Studies teaches us, is about maximizing choice, agency, and autonomy.

The SGID process asks students, instructors, and consultants to **possess, or potentially even “fake,” certain social skills**. Students work in groups during a SGID, which can be a barrier for a wide range of people (such as someone who has autism or anxiety, but also simply someone who is having a bad day and not feeling particularly social). SGID consultants are expected to go into a room filled with people they don’t know, facilitate activities among groups of students who are not their own, and then interact with the instructor (a person they also may not know) afterward to convey the SGID results, some of which are, inevitably, critical. The whole SGID process relies on a set of skills

that align with, and reward, neurotypicality. We risk losing perspectives that would be captured by multiple, flexible channels of expression.

Another barrier is that participation in a SGID **does not necessarily require any training or sensitivity to diversity**, particularly in terms of disability. For example, Hurney et al.'s (2021) recent SGID book, which is a wonderful guide for beginning or refining this program, does not mention disability. SGID consultants may not be given tools for addressing issues related to diversity, particularly disability, that can arise in the process. Similarly, students are not necessarily primed to be sensitive to diverse identities; as a result, during the SGID process, they sometimes offer problematic comments (e.g., complaining about an international instructor's accent, a woman instructor's lack of care). We can imagine instructors with certain disabilities being called "unfriendly," "disorganized," or "hard to understand." If consultants aren't attuned to these biases and don't confront or address them during the SGID itself, it could lead to further stigmatization and shame.

Potential Exposure to Additional Instances of Ableism Through SGIDs

This brings us to an important point we think is worth highlighting. Particularly when unexamined or uncritically reproduced, the SGID process has the potential to open up additional spaces for microaggressions and the reification of power imbalances, marginalization, and exclusion. Like the current reckoning that higher education is having with student evaluations of teaching, which too often contain negative comments or ratings based on identity factors (Heffernan, 2022), we suggest that SGIDs may also be inadvertently causing harm and further disadvantaging those who have already been marginalized. Feedback, even if framed as formative, may still reflect assumptions, biases, and stereotypes about who "belongs" or should be an instructor (Metropolitan State University of Denver, 2022). For example, students in a SGID might identify a hindrance to their learning, such as "we can't

understand our professor,” that may really be code for a faculty member’s disability, reflecting student and cultural biases and discomfort around communication more than any teaching deficit. For a disabled SGID consultant, or a disabled instructor requesting the SGID, these comments—even if delivered with the intention of being helpful—can create an impact of exclusion and discrimination. And, for students with disabilities, additional exposure to peer comments such as “oh, but that quiz was so easy” or “the readings don’t take that much time at all” could reinforce damaging stereotypes about what is “normal” in learning.

Possibilities for Addressing the Ableism of SGIDs

As in the SGID itself, often ideas for improvement are implied by, or flow naturally from, the concerns or hindrances. We find that this is the case here, with our concerns above implying certain possibilities for rethinking and improving the SGID process so that more people can participate at all stages. Of course, we won’t be able to “solve” all of the problems with the SGID process in the space of one article drawing on one theoretical lens. SGIDs can vary so much by institution, and CTL programming is constantly getting updated. We also recognize that sometimes attempting to address one issue can create other issues. That is why the process must be iterative and ongoing. What we would like to offer for readers’ consideration are four possible moves, increasing in scope and demand. We are certain there may be other possibilities, which readers can generate, and we are not arguing for one of these approaches as the best or only legitimate one. Rather, inspired by the flexibility and multiplicity modeled by the field of Disability Studies, we are offering many ideas for consideration and inspiration, which might address issues and create more effective, inclusive practices, depending on context.

Our first idea is for CTLs to **reconsider the name of this program**—Small-Group Instructional Diagnosis—and all that it means. Many

institutions (including our own) have already explored different names for this program, yet, as Hurney et al. (2021) demonstrated, “SGID” is still a popular choice. Within Disability Studies, the term “diagnosis” carries a lot of weight: it is the (medical) label that contributes to the pathologization of disability identity, implying something is “wrong” that needs to be “fixed,” but it also is what can give (some) in the disability community access to understanding and insight—and legal rights. In higher education, for example, diagnosis is often a required step in the process of getting access to learning, through a disability services office, but diagnosis can also signal privilege: that someone has the cultural, financial, and other resources, as well as the desire, to seek a diagnosis in the first place—which is certainly not true of everyone with disabilities. But this fascinating contradiction of “diagnosis,” in an educational development context, could signal the insidious (and unconscious) ways ableism seeps in. It took even these authors, who are typically attuned to disability, a long time to even notice the connections and the implications of this terminology. If teaching is something to be “diagnosed,” rather than explored, valued, even celebrated—or if variations in teaching and learning are coded as “problems” to be fixed—what does that say about the ways we think about and enact education? Shifting away from the name (as many CTLs have already done), and shedding the baggage associated with it, could be one way to transform this practice.

Another possibility to reduce or resist ableism in the SGID context is to **apply the principles of UDL to the program**, which aims to make processes and opportunities more available to all. Universal design is not a checklist or a one-and-done kind of way of operating. It is not a simple, definitive fix. Rather, it is an aspiration, an approach, a spirit—“a process and mode of becoming” (Dolmage, 2017, p. 115). Originally coming out of an architectural context, whose principles came to include equity and flexibility in use, simple and intuitive, and tolerance for error, universal design has now been applied to education and the classroom (Burgstahler, 2021). We encourage readers to spend time with the UDL guidelines, as outlined on the CAST (n.d.) website, which

include providing multiple options and opportunities for Engagement (affective; the “why”), Representation (recognition; the “what”), and Action and Expression (strategic; the “how”). These can be applied just as well to educational development decisions as to classroom practice. To provide just one example of applying UDL to one of the barriers we noted above, CTLs could explore other ways to solicit and engage student feedback to achieve the goals of the SGID process. Yes, student in-class discussion to build consensus can be powerful, but using a wider variety of options for participation (e.g., surveys or polls, monitored discussion forums, Google Docs) and allowing more time for students to process questions and think through answers, individually and together, would include a wider range of perspectives. This would be a way to provide the flexibility and space—to pause, think, breathe, take care of ourselves—of *crip time* that can actually support deeper, and more equitable, feedback.

Next, we wonder, beyond UDL, how the SGID program itself could **become a site of resistance**, a way to uncover and challenge ableist barriers. Why are we doing the same stuff over and over again that reifies problematic social systems? Instead of minor tweaks after the fact to slightly improve access (a concept in Disability Studies called “retrofitting”), reconsidering and recreating the SGID process could open up spaces to ask important, critical questions about the role of ableism (including implicit bias, such as what we expect a “typical” professor or student to look/act/talk/be like) in higher education. Centering disability offers opportunities to have conversations with colleagues, for example, about the hidden ableism in classroom practices (such as the ableism of academic “rigor”; e.g., Pryal, 2022) or to challenge (potentially ableist) assumptions—about instructors and students alike. We could craft or frame SGID questions in ways that invite critical reflection, such as including an introduction that reminds students to be aware of, and work to counter, their assumptions regarding teaching and learning. We could provide SGID consultant training that invites reflection, tools, and practice in addressing disability as diversity and in identifying and resisting ableism. We could

also advocate for student (and faculty peer) training around bias in giving instructional feedback (something our own institution is considering with both mid-semester and final student course evaluations). We could help students and instructors identify moments of discomfort related to hidden or explicit ableism and to reflect on why the discomfort is there, such as if a student were to critique a neurodiverse faculty member who “stims”—engaging in self-stimulating repetitive behaviors that are often misunderstood (Kapp, 2019). If issues of pacing or timing come up, this is an opportunity to invite reflection on expectations about “time” (such as the response time to email, the time it takes to complete or grade assignments, timed tasks such as exams, or how instructional time is used in the classroom). We can leverage such conversations to introduce how “crip time” might offer new possibilities.

Finally, we must ask ourselves, as with any long-standing program, whether it is best to **let SGIDs go**. We have been part of an institution that has renamed buildings carrying racist overtones and also members of cities/states that have destroyed carryovers from another time (such as statues commemorating the Confederacy). While we are certainly not equating SGIDs to a bronze Robert E. Lee, the point is that we must always be willing to reexamine and possibly move away from problematic practices, even those that have been around a long time and may be beloved or perceived as beneficial for many. This is part of change, part of growth. Sometimes programs need to be sunsetted for other, better programs to take their place. Following the same sort of backward design approach (i.e., Wiggins & McTighe, 2005) that we recommend to instructors, we as educational developers can ask ourselves, What are the goals of SGIDs (e.g., to help instructors gather mid-semester feedback with enough time to make changes before the semester is over, to value and include student perspectives in the teaching improvement process)? SGIDs are not the only way to meet those goals. Payette and Brown (2018), for example, described an alternative DIY Mid-Semester Feedback technique (p. 5) in their IDEA paper on gathering mid-semester feedback. What other options

exist? We encourage readers to use their imaginations to brainstorm new and creative possibilities.

Conclusion

We must recognize that the intersecting pandemics of the early 2020s (COVID-19 as well as others) have radically altered our lives and the landscape of higher education. The trauma of these years continues to manifest in so many ways, including in students who may be disengaged, frustrated, confrontational, and hostile; an instructor can become an easy target for all these feelings. Add to that situation the trauma and burnout experienced by faculty and staff as well as general uncertainty and disruption in higher education. Defaulting back to a “normal” that does not exist, or automatically applying approaches and programs that used to work to this new now, does not make sense. It also fails to do justice to the painful losses, and lessons, of the pandemic. The pandemic has been offering us opportunities to radically rethink what we are doing and to be open to new possibilities—possibilities that come closer to meeting the goals of greater equity and inclusion in higher education. As Gagné (2022) wrote, “The pandemic cannot be thanked for much. . . . However, one thing for which the pandemic may be thanked is highlighting the need for accessibility in teaching and learning environments and the ways pedagogy can work with technology to create more accessible learning” (p. 1). We hope that by closely and critically examining one long-standing, popular CTL program through a Disability Studies lens, we have made a small contribution to achieving more accessible learning experiences for all.

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Conflict of Interest Statement

The authors have no conflict of interest.

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