



Supporting LGBTQ+ Students with Disabilities: Exploring the Experiences of Students Living on Campus



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**STUDENTS WITH MULTIPLE OPPRESSED IDENTITIES,**

such as LGBQ+ students with disabilities, face a multitude of barriers on college campuses due to heterosexism and ableism, sometimes even from those in-group. This large-scale, multi-institution comparative quantitative study of LGBQ+ students with disabilities living on campus examines these students' experiences with belonging and discrimination. Guided by the Model of Multiple Dimensions of Identity, we compare the experiences of students in the intersections of sexual and ability identities to guide housing and residence life practitioners in supporting students with complex identities. A series of chi-square ( $\chi^2$ ) analyses and adjusted standardized residuals allowed us to explore the experiences of students who identify as LGBQ+ and without disabilities, as well as students who identify as straight with or without disabilities, in order to highlight the experiences of LGBQ+ students with disabilities. Findings indicate that LGBQ+ students most frequently report mental health disorders or multiple disabilities or impairments and that these students feel less physically safe, comfortable being themselves, like part of their campus communities, and valued by their institutions than their peers. Most troubling is the large proportion of LGBQ+ students with disabilities who have personally experienced offensive behavior, discrimination, or harassment at their institutions based on their sexual orientation. Implications focus on creating partnerships with mental health, disability services, and LGBTQ/Pride Center professionals; evaluating roommate matching policies; the proactive creation of support systems; and applying concepts of Universal Design.

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Students with multiple oppressed identities often face more barriers by having to integrate into various communities (Harley, Nowak, Gassaway, & Savage, 2002). While 16% of college students identify as GLB and 10% of students are suspected to have a disability, there is little known about the overlap of the two populations because researchers often categorize students by only one marginalized identity (Henry, Fuerth, & Figliozzi, 2010). The experiences of students within this intersection are deserving of study because they face both overt and covert discrimination on college campuses (Harley et al., 2002). (Note: In this study we use the term LGBQ+ but have used the original terminology of other researchers when discussing their work including GLB, LGB, LGBQ, LGBTQ, etc.)

Complex large-scale quantitative studies are vital for continuing to research small populations with interrelated variables like sexual identity and ability (Garvey, Sanders, & Flint, 2017; Renn, 2010), but many research reports on LGBQ+ students are over a decade old and need to be revisited (Longerbeam, Inkelas, Johnson, & Lee, 2007; Rankin, 2005). As such, we use data collected from the National Survey of Student Engagement (NSSE) to guide this comparative study of LGBQ+ students with disabilities who live on campus, specifically their experiences with belonging and discrimination. Student development theory aids in this exploration through the use of the Model of Multiple Dimensions of Identity (Jones & McEwen, 2000) to guide housing and residence life practitioners on how to best support students. By examining the experiences of students in the intersections of sexual and ability identities, more specifically the experiences of students who

identify as LGBQ+ and without disabilities, and students who identify as straight with or without disabilities, we can hone in on our purpose of highlighting the experiences of LGBQ+ students with disabilities.

## **AN OVERVIEW OF LGBQ+ AND STUDENTS WITH DISABILITIES**

Given higher education researchers' neglect of the intersection of LGB individuals and those with disabilities (Evans, Broido, Brown, & Wilke, 2017) and the qualitative focus of existing research (Henry et al., 2010; Miller, 2015, 2017), a quantitative study such as this is needed. In this section, we outline existing literature on LGBQ+ students, students with disabilities, and their intersection, demonstrating the college student experience is complex and navigating it with multiple marginalized identities can ratchet adversity (BrckaLorenz, Duran, Fassett, & Palmer, 2019).

### **LGBQ+ Students**

Both on campus and within residence halls, LGBQ students experienced overt and covert discrimination and homophobia (Beemyn, 2003; Byers, 2013; Evans & Broido, 1999; Vaccaro, 2012). LGBQ students were explicitly bullied, expelled, and physically attacked due to their sexual orientation both within residence halls and on college campuses (Byers, 2013; Dille, 2002; Ott & Aoki, 2002). Strayhorn and Mullins (2012) named residence hall structures and policies as spaces for perpetuating heterosexism and social isolation for LGBQ residents. In their study of Black gay men undergraduates (BGMU) in residence halls, they found that heterosexual residents used policies to make their BGMU residents uncomfortable and that programming like dating games often

framed heterosexism as the norm. Outside of the residence halls, over one-third of LGBTQ students stated they experienced harassment at college (Blumenfeld, Weber, and Rankin, 2016) and were more than twice as likely to attempt suicide than their heterosexual peers (Harley et al., 2002). LGBT students were also one-third more likely to depart their institutions than their peers (Blumenfeld et al., 2016; Harley et al., 2002).

### Students with Disabilities

Nearly three decades ago, the United States granted individuals with disabilities the same protections as other minoritized demographics (Wisbey & Kalivoda, 2016). While courts specified qualifications to constitute disabilities, the term spans more than most people may imagine (Meade, 2006; Wisbey & Kalivoda, 2016), including invisible disabilities such as learning, emotional, or chronic health issues (Brown & Broido, 2015). Although laws require institutions to provide educational accommodations for students with disabilities, providing outside-of-the classroom accommodations has proven more challenging (Bryan & Myers, 2006). For example, residence life practitioners may not consider the ways that policies or programs are not accessible to all students

(Bauman, Davidson, Sachs, & Kotarski, 2013). Further, some accommodations (i.e., requiring students with disabilities who require attendant care to live individually) increased isolation, stigmatization, or harassment (Ackles, Fields, & Skinner, 2013; Bauman et al., 2013).

### LGBQ+ Students with Disabilities

Individuals who hold both a minoritized sexual identity and disability frequently faced multiple forms of oppression due to heterosexism and ableism, sometimes even from those in-group (Harley et al., 2002; Henry et al., 2010). Both marginalized identities experienced reductions in how they were understood. Individuals with disabilities were often desexualized (Henry et al., 2010; McRuer, 2011) while LGBQ individuals were only viewed through their sexual behaviors (McAllan & Dittilo, 1994). Although both of these marginalized identities are growing in visibility separately, how students live within the intersection of both of these identities needs more exploration (Harley et al., 2002), which aligns with Means and Jaeger (2013) who called for researchers to explore the intersectional identities of queer students.

## FRAMEWORK FOR UNDERSTANDING IDENTITIES

We used Jones and McEwen's (2000) Model of Multiple Dimensions of Identity as a framework for our study. These scholars posited that each person has an internal core identity that is connected to and surrounded by several external identities (race, gender, sexual orientation, ability, etc.). Additionally, each individual's internal and external identity development

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processes happen within larger contexts (sociocultural, family, career, etc.). Jones and McEwen (2000) cautioned against underestimating the influence of larger contexts on the identity development process. In this study, we consider the context of higher education institutions with a focus on students living in campus housing and the potential impact for LGBQ+ students with disabilities.

## METHOD

The data for this study comes from the 2017 administration of the National Survey of Student Engagement (NSSE). NSSE measures the time and effort that undergraduate first year students and seniors at four-year colleges and universities invest in activities that relate to student learning and development. In this administration, 31 participating institutions received an additional item set that focused on LGBQ+ issues. More specifically, the items selected for this study focused on student perceptions of safety; sense of belonging; or having experienced any offensive behavior, discrimination, or harassment at their institutions based on their sexual orientation (Table 1). To explore the experiences of students with respect to their sexual orientation and disability, we conducted a series of chi-square ( $\chi^2$ ) analyses and reviewed the adjusted standardized residuals. This method is useful when

categorical group sample sizes are unequal and when attempting to understand individual group representation (McHugh, 2013). We considered adjusted standardized residuals greater than 2 or less than -2 to be notable differences (Agresti & Finley, 2009).

Students were asked to select which of the following best describes their sexual orientation: (a) *Straight (heterosexual)*; (b) *Bisexual*; (c) *Gay*; (d) *Lesbian*; (e) *Queer*; (f) *Questioning or unsure*; (g) *Another sexual orientation, please specify*; and (h) *I prefer not to respond*. For ability status, students were asked to choose (a) *Yes*; (b) *No*; or (c) *I prefer not to respond* to whether they had been diagnosed with any disability or impairment. Students who indicated affirmatively were asked to select all that apply from the following options: (a) *A sensory impairment (vision or hearing)*; (b) *A mobility impairment*; (c) *A learning disability (e.g., ADHD, dyslexia)*; (d) *A mental health disorder*; or (e) *A disability or impairment not listed above* (NSSE, n.d.). We included all students who responded to demographic items about sexual orientation (including those responding straight or with an LGBQ+ identity) and disability (including those responding to having or not having a disability) and *at least* one item from the extra item set on LGBQ+ issues in this study. We removed students who selected that they preferred not to respond to either demographic question.

## RESULTS

The student respondents consisted of 5,896 first-year (71%) and senior (29%) undergraduate students who reported living in campus housing. Approximately three-quarters of students in this study identified as straight and

did not have diagnosed disabilities (77%,  $n = 4,521$ ); approximately one in ten identified as straight and had disabilities (10%,  $n = 585$ ) or were LGBQ+ and did not have disabilities (9%,  $n = 545$ ) with a smaller proportion of students identifying as LGBQ+ and also having disabilities (4%,  $n = 245$ ). Straight students with disabilities primarily reported having learning disabilities (34%,  $n = 200$ ); mental health disorders (26%,  $n = 150$ ); or multiple disabilities or impairments (18%,  $n = 102$ ). LGBQ+ students with disabilities far more often reported

mental health disorders (46%,  $n = 113$ ) or multiple disabilities or impairments (31%,  $n = 75$ ) with a smaller proportion reporting learning disabilities (14%,  $n = 33$ ).

In many ways, LGBQ+ students with disabilities living on campus had more negative experiences at their institutions than their peers (Table 1). Although the proportion of LGBQ+ students with disabilities feeling physically safe on campus (92%,  $n = 223$ ) was relatively high, it was notably lower than the proportion of straight students without disabilities feeling

**Table 1****Chi-Square Statistics for Differences by Sexual Orientation and Disability Status**

	Adjusted Standardized Residual (Column %)				$n(df)$ $\chi^2$ sig
	Straight; no disability	Straight; diagnosed disability	LGBQ+; no disability	LGBQ+; diagnosed disability	
<b><i>I feel physically safe at my institution.</i></b>					
Agree (Somewhat agree, Agree, Strongly agree) <sup>a</sup>	4.3 (97.5)	-1.2 (96.1)	-1.7 (95.7)	-4.8 (91.8)	5,689(3) 30.034 ***
<b><i>I feel comfortable being myself at my institution.</i></b>					
Agree (Somewhat agree, Agree, Strongly agree) <sup>a</sup>	9.4 (96.7)	-1.9 (93.6)	-7.2 (89.0)	-6.5 (86.5)	5,693(3) 111.659 ***
<b><i>I feel valued by my institution.</i></b>					
Agree (Somewhat agree, Agree, Strongly agree) <sup>a</sup>	5.5 (90.6)	-2.6 (86.5)	-2.5 (86.1)	-4.4 (80.8)	5,688(3) 36.740 ***
<b><i>I feel like part of the campus community.</i></b>					
Agree (Somewhat agree, Agree, Strongly agree) <sup>a</sup>	5.3 (89.7)	-.8 (87.4)	-3.0 (84.5)	-5.7 (77.0)	5,683(3) 46.630 ***
<b><i>Have you personally experienced any offensive behavior, discrimination, or harassment at this institution based on your sexual orientation?</i></b>					
Yes (Yes, and it interfered with my education or Yes, but it did not interfere with my education) <sup>b</sup>	-13.0 (5.5)	.2 (8.3)	8.6 (17.8)	14.4 (32.7)	5,652(3) 305.579 ***

Key: \*\*\* $p < .001$

a. Compared to Disagree (Somewhat disagree, Disagree, Strongly disagree) b. Compared to No

the same (98%,  $n = 4,239$ ;  $\chi^2 = 30.0, p < .001$ ). Disproportionately, straight students without disabilities felt comfortable being themselves at their institutions (97%,  $n = 4,207$ ) compared to LGBQ+ students without disabilities (89%,  $n = 475$ ) and LGBQ+ students with disabilities (87%,  $n = 212$ ;  $\chi^2 = 111.7, p < .001$ ). Similarly, more straight students without disabilities felt like part of their campus communities (90%,  $n = 3,894$ ) compared to LGBQ+ students without disabilities (85%,  $n = 452$ ) and LGBQ+ students with disabilities (77%,  $n = 187$ ;  $\chi^2 = 46.6, p < .001$ ). Fewer straight students with disabilities (87%,  $n = 486$ ) and LGBQ+ students without disabilities (86.1%,  $n = 460$ ) or LGBQ+ students with disabilities (81%,  $n = 198$ ) felt valued by their institutions than straight students without disabilities (91%,  $n = 3,939$ ;  $\chi^2 = 36.7, p < .001$ ). Most troubling, however, was the greater proportion of LGBQ+ students with disabilities (33%,  $n = 80$ ) and LGBQ+ students without disabilities (18%,  $n = 95$ ) who had personally experienced offensive behavior, discrimination, or harassment at their institutions based on their sexual orientation compared to their straight peers without disabilities (6%,  $n = 237$ ;  $\chi^2 = 305.6, p < .001$ ).

## LIMITATIONS AND SUGGESTIONS FOR RESEARCH

Although this study contained many LGBQ+ students both with and without diagnosed disabilities to show comparisons, we note that this masks the nuance between students with differing LGBQ+ identities and those with differing types of disabilities. Although we would have liked to further explore within these groups, some subgroups were particularly small for quantitative analysis. We do not

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assume that all LGBQ+ students or LGBQ+ students with disabilities living on campus have the same perceptions of and experiences at their institutions. Given the great diversity in how students self-identified for the sexual orientation and disability questions as well as the diversity of campus residence hall environments, it is difficult to generalize findings.

Additionally, students were limited by the questions and response options asked of them on the NSSE survey. We could not, for example, examine the experiences of students with undiagnosed disabilities. This could be problematic given the stigma associated with learning disabilities or mental health diagnoses. Moreover, although we intended to be critical with our work, future research will benefit from more specificity such as using crip theories of sexuality (McRuer, 2011) and studies that could delve deeper into LGBQ+ students with disabilities' experiences without needing comparison groups. Although comparisons to other groups can provide some insight about their relative experience and further support

the importance of understanding their struggles, it does not provide rich details or directions for how to improve.

## DISCUSSION

Most campus students in all student groups studied felt physically safe, comfortable being themselves, valued by their institutions, and part of their campus communities. We do not wish to dismiss these positive findings, and we commend the good work institutions do, particularly of the positive environments created within campus housing. Our purpose, however, was to magnify the experiences of LGBQ+ students with disabilities by exploring the differences in experiences of students in intersecting categories of sexual and ability identities.

Disproportionately, LGBQ+ students with diagnosed disabilities agreed less with feeling comfortable being themselves, feeling valued by their institutions, or feeling like part of their campus communities than their LGBQ+ peers without diagnosed disabilities. Although we could further discuss notable differences in the experiences of straight students, the differences in experiences between LGBQ+ students with and without disabilities are striking. Nearly one-third of LGBQ+ students with disabilities have personally experienced offensive behavior, discrimination, or harassment compared to less than one in five LGBQ+ students without disabilities. Findings such as this accentuate the complexities of living with multiple marginalized aspects of identity.

The findings of this study additionally reinforce previous research regarding the mental health of LGBQ+ students. Nearly one-half of the LGBQ+ students with disabilities in

this study reported that their disabilities were related to mental health. Shadick and Akhter (2014) discussed the ways in which students' primary culture plays a role in their mental health. Students whose primary culture aligns with the surrounding environment have more experiences that are positive, but those whose primary culture differs from the surrounding environment experience greater stress and mental health concerns, which is especially true if they do not receive the proper support and resources (Shadick & Akhter, 2014). Residence halls are often segregated by gender, which Hamilton (2007) argued increased heteronormativity and created more negative environments for LGBQ+ students. The per-

Evans and Broido (2002) named four roles that RAs should play including supporting LGBQ+ students, increasing awareness among heterosexual students, creating inclusive communities, and confronting homophobic comments.

petuation of heteronormativity within living environments may be a contributing factor to increased mental health concerns among LGBQ+ students.

We do not necessarily know the saliency of these students' sexuality in this study, but

the Model of Multiple Dimensions of Identity (Jones & McEwen, 2000) emphasized the ways in which surrounding context influences identity salience. This means residence hall environments play a role in the ways LGBTQ+ students experience their sexuality. Experiencing discrimination may negatively impact the ways in which students develop in their LGBTQ+ and ability identities. Further, being affirmed in their sexuality influences how students make meaning of their other identities (Stevens, 2004). The need for residence hall environments to be supportive and affirming of marginalized identities is critical as, ultimately, these environments shape students' identity development and overall experiences with institutions (Jones & McEwen, 2000; Miller, 2015, 2017).

## IMPLICATIONS FOR PRACTICE

Based on these findings, we have identified several implications for practice. In this study, LGBTQ+ students with disabilities reported the highest rates of negative experiences. Crenshaw (2016) used the analogy of an ambulance not being able to respond to an injured person to explain intersectionality (in her example, Black women), arguing that no one takes responsibility for the resources and support necessary to heal the injury. We urge practitioners to proactively think about how they offer support and resources for LGBTQ+ students with disabilities, which includes determining who is responsible to respond and follow through on reports of negative experiences, so these students do not fall through the cracks. Specifically, we encourage residence life practitioners to establish partnerships with mental health, disability services, and LGBTQ/Pride

Center professionals to address these students' needs. This can additionally be supplemented by building coalitions with off-campus allies as campus resources can vary.

Residence life practitioners and other practitioners across campus should explore ways to proactively work against homophobia and heterosexism and evaluate whether their current policies contribute to these issues. Pitcher, Camacho, Renn, and Woodford (2018) believed if institutions communicated the value of the queer experience through various means then students would be more successful. Moreover, policies should be affirming of LGBTQ+ students including non-discrimination policies that are inclusive of sexuality. The symbolic nature of affirming policies alone could make a difference (Vaccaro, 2012), and we challenge residence life practitioners to evaluate whether policies related to campus living are affirming of LGBTQ+ identities.

Some institutions have changed policies to restrict roommate choice to increase the likelihood that students interact with others different from themselves (Bauer-Wolf, 2018; Simon, 2018). These policies might place students from marginalized backgrounds in positions where they experience increased discrimination or do not feel comfortable being themselves (Solórzano, Allen, & Carroll, 2002). For LGBTQ+ students with disabilities, this might be particularly complicated, since these identities are often invisible (Harley et al., 2002). Therefore, residence life practitioners should evaluate their roommate matching policies to consider the experiences of students from various backgrounds and identities.

Further, residence life practitioners should ensure both professional and paraprofessional

staff are prepared to foster more positive environments for LGBTQ+ students with disabilities. Evans and Broido (2002) named four roles that RAs should play including supporting LGBTQ+ students, increasing awareness among heterosexual students, creating inclusive communities, and confronting homophobic comments. In training related to fulfilling these roles, we urge practitioners to not think of LGBTQ+ students as monoliths and seek ways to affirm the diverse identities of LGBTQ+ students.

Several institutions have established LGBTQ/Pride living-learning communities (e.g., Spectrum at Indiana University [2019] and Stonewall Suites Living-Learning Community at the University of South Florida [2019]), which are meant to create intentional spaces for LGBTQ+ students (Dunn & Dean, 2013; Pasque & Murphy, 2005). Having communities dedicated to celebrating LGBTQ+ identities can help affirm these identities, which influences students' overall identity development. Creating these spaces might also decrease the amount of discrimination related to sexuality in a similar manner to how Black students use peer support networks for success (Tatum, 1997). It would additionally be important that such communities ensure that students with multiple marginalized identities are fully supported beyond the LGBTQ+ aspect of their identities such as making sure residence life practitioners and students in the community are aware of the needs of their peers with disabilities. Although establishing visible identity-based communities may increase the ability of others to target discrimination or harassment (Strayhorn & Mullins, 2012), institutions must proactively work to protect these communities. Simply having these communities, however,

may provide the space and access to support systems that would decrease the impact of negative experiences. Further, these affirming environments may positively influence the mental health of LGBTQ+ students. Our findings show a significant proportion of LGBTQ+ students reported mental health issues as their disabilities, thus residence life practitioners may consider how to implement mental health support and resources for this community.

We support applying concepts of Universal Design to create supportive environments for LGBTQ+ students with disabilities (Couillard & Higbee, 2018). Universal Design has a long history of use to increase accessibility, but at its core, Universal Design is about making environments more accessible and inclusive to all. Couillard and Higbee (2018) suggested using interactions with students as opportunities to affirm and learn more about their identities. Residence life practitioners often have formal and informal one-on-one interactions with students (e.g., advising, conduct, supervision). Practitioners should be prepared to use those interactions as developmental learning opportunities for students but also for input and feedback on achieving the goals and meeting the principles of Universal Design.

## CONCLUSION

The higher education experiences of LGBTQ+ students with disabilities are not well understood. In this study, we find that in many ways LGBTQ+ students with disabilities living on campus have more negative experiences at their institutions than their peers. With respect to their sexual orientation, they feel less physically safe on campus, less comfortable being themselves, less valued, and less

part of their campus communities. Most distressingly, they report personally experiencing more offensive behavior, discrimination, or harassment based on their sexual orientation. Although implementing different strategies may support LGBTQ+ students with disabilities and their needs, we propose practitioners additionally explore the factors that lead to their negative experiences and proactively implement changes to prevent discrimination and harassment when possible. Residence halls are microcosms of the broader campus environment; therefore, if students are experiencing discrimination and harassment in residence halls, it is likely these experiences are also happening outside of residence halls. Developing policies and initiatives, on- and off-campus partnerships, and strategic communication are integral for the success of LGBTQ+ students with disabilities.

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## Discussion Questions

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1. What kind of tools or resources can be implemented in RA training to encourage RAs to think about intersecting identities in LGBTQ+ students?
2. What could be the staff recruitment, selection, hiring, and employment experiences of LGBTQ+ students with disabilities?
3. How might your institution's housing policies and residence hall structures perpetuate heterosexism, homophobia, and social isolation to LGBTQ+ residents? Are there ways they can be more inclusive? Do they reflect consideration for the many identities housed?
4. How can the various positionality and roles of residence hall staff provide better support and advocacy to the intersectionality of LGBTQ+ students with disabilities?
5. It's 9:00 a.m. when you arrive to work and the first email you see is from your director. The email entails that 33% (n=80) of your LGBTQ+ students with disabilities reported in the NSSE Survey that they experienced offensive behavior, discrimination, or harassment in their residence hall and/or on campus. The director requests that you provide a list of recommendations and email her by 10:00 a.m. as she has a meeting with the Vice Chancellor at 11:00 a.m. What recommendations do you provide?
6. How did the Rehabilitation Act (Section 504) impact the United States granting individuals with disabilities the same protections as other minoritized demographics?
7. What would be strengths and challenges for establishing a LGQTQ/Pride Living Learning Center? What would be the academic component and the LLC learning outcomes?
8. How would you use Universal Design to create non-discriminatory practices and spaces of advocacy, support, and celebration for LGBTQ+ students with disabilities?

*Discussion questions developed by Hannah Lynn Wiebke and Demarcus Merritt, graduate students at UNC Greensboro.*