

**Education and Disability: A Study on Access to Higher Education for Students with
Disability in Jammu and Kashmir**

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Abstract

The experience of people with disability varies depending on their particular circumstances, availability of resources and other external factors. Similarly, students with disabilities represent an emerging population in higher education institutions, whose insights and experiences of higher education are ultimately shaped by their sociocultural experiences, the existing of environment, and the availability of specific facilities, required by them. This study aims to explore factors or barriers which affect the access of students with disabilities in higher education institutions and aimed to understand the experiences of disabled students while gaining higher education in Kashmir.in Jammu and Kashmir. The study was directed on 22 students with disability studying I higher Education Institutions of Kashmir during the year 2021. The outcomes uncovered that these individuals face an enormous number of snags while getting to schooling and go over a tremendous measure of difficulties, for example, encountering badgering being rejected from the college, absence of institutional help, convenience, monetary help, classes and framework and offices important to get benefits from the same nature of instruction as their associate.

According to the conference on the ‘Rights of Persons with Disability’, Article 24, 2(a), disabled persons should not be barred from broader education organizations due to their disability. Besides, the ‘Millennium Development Goals’ and ‘Education for All’ insist on justice, equality and quality education for all. Yet, like in other societies, in Kashmir too disabled people face a large number of obstacles while attempting to achieve higher education. Disability is an intricate experience, imitating an interface between characteristics of a person’s body and characteristics of the culture in which they live (WHO/World Bank, 2014). Globally, more than 180 million young people live with some form of disability, bad enough to make their day-to-day living complicated, and

the majority of these reside in the developing countries. Despite notable progress in legislations and policies for these students in higher education institutions, many of them still face various challenges in completing their studies successfully. Yet, like in other societies, in Kashmir too disabled people face a large number of obstacles while attempting to achieve higher education. Unfortunately it was also found that there is a dearth of research studies in the context of Jammu and Kashmir.

Chapter I

Introduction

“Disability need not be an obstacle to success. I have had motor neurone disease for practically all my adult life. Yet it has not prevented me from having a prominent career in astrophysics and a happy family life.”

Stephen Hawking

People with disabilities form an important part of the world population the exact numbers are hard to separate due to doubted under reporting and differences in the definition of disability between countries, and cultures (Yeo and Moore, 2003). The experience of people with disability varies liable on their particular circumstances, availability of resources and other external factors. Similarly, students with disabilities represent an emerging population in higher education institutions, whose insights and experiences of higher education are ultimately shaped by their sociocultural experiences, the existing of environment, and the availability of specific facilities, required by them. Disability is a relative concept, which differs according to time, place and sociocultural contexts (Shah et al., 2004). According to the Convention on the Rights of Persons with Disabilities (2008), ‘people with disabilities include those who have enduring physical, cognitive, psychological or sensory impairments which in collaboration with a variety of obstacles may impede their complete and efficient contribution in the society on equivalent basis with other members of their society’ (Matonya, 2016). Disability is an intricate experience, imitating an interface between characteristics of a person’s body and characteristics of the culture in which they live (WHO/World Bank, 2014). Despite notable progress in legislations and policies for these students in higher education institutions, many of them still face various challenges in completing their studies successfully. Unfortunately it was also found that there is a dearth of research studies in the Indian context. This study aims to explore factors or barriers which affect the access of students with disabilities in higher education institutions in Jammu and Kashmir. Globally, more than 180 million young people live with some form of disability, bad enough to make their day-to-day living complicated, and the majority of these reside in the developing countries (Nel et al., 2015).

Profile of Disabled Persons

According to the conference on the 'Rights of Persons with Disability', Article 24, 2(a), disabled persons should not be barred from broader education organizations due to their disability. Besides, the 'Millennium Development Goals' and 'Education for All' insist on justice, equality and quality education for all. According to the Census of India (2011), in India, out of the 121 crore population, 2.68 crore persons are 'disabled', which is 2.21 per cent of the total population. Out of these, 56 per cent (1.5 crore) are males and 44 per cent (1.18 crore) are females. In the total population, the male and female population is 51 per cent and 49 per cent, respectively. A majority (69%) of the disabled population belong to rural areas (1.86 crore) and (0.81 crore) in urban areas (Census of India, 2011). According to the Census of India 2011, in the case of the total population also, 69 per cent are from rural areas, while the remaining 31 per cent lived in urban areas. The same Census reported 19 per cent to have a disability in seeing, 20 per cent in movement, 19 per cent disability in hearing, 3 per cent mental retardation, 7 per cent in speech, 8 per cent with multiple disabilities and 6 per cent with any other type of disability. In terms of age group, among 10–19 years is the highest age group followed by the age group 20–29 years for both the male and female disabled persons. Among the disabled females, 23 per cent of the female disabled are elderly, and, among the disabled males, 18 per cent are elderly. So far as educational status is concerned, 55 per cent of the total disabled population are literates, 62 per cent are the male disabled literates and 45 per cent constituted the female disabled literates. The literacy is higher among the disabled persons belonging to urban areas: 67 per cent literates of the total disabled persons reside in urban areas as against 49 per cent of the literate disabled persons in rural areas. In the context of higher education, 15 per cent of them are graduates who belong to urban areas, and only 5 per cent of the graduate disabled persons are living in rural areas of the country (Ministry of Statistics and Programme Implementation Government of India, 2016).

As far as the population profile of disabled persons in Jammu and Kashmir is concerned, its total disabled population is 363,153, out of which 204,834 (56.7%) are males and 156,319 (43.2%) are females. From 2001 to 2011, the disabled population increased by 19.3 per cent. The proportion of the disabled people in the union territory of Jammu and Kashmir is frequently growing as compared to other states of Indian because of conflict based violence. Making use of pellet guns has generated a new category of disabled persons often goes by the

name of pellet victims or half blinds. Most of the disabilities, particularly in Kashmir, are the by-product of violence. In terms of disabilities, 12 per cent of the disabled are crippled as compared to the national average of 27.9 per cent. The mentally disabled population of the state is 8.2 per cent against 10.3 per cent of the national level. In the context of classification of disabilities in the union territory, the hearing disability counts for 20.5 per cent, seeing 18.3 per cent, speech 5.15 per cent, movement 16.0 per cent, mental retardation 4.6 per cent, mental illness 4.3 per cent, any other 18.5 per cent and multiple disability 2.3 per cent (Naik & Selvarajan, 2011)

Table 1.1

Disable Population in Jammu and Kashmir

Age group	Total	Male	Female	Seeing	Hearing	Speaking	Movement	Mentally retarded	Mentally ill	Others	Multiple disabilities
Total	36,11,53,204	834156	1,56,319	66,448	74,096	18,681	58,137	16,724	15,669	66,957	44,441
0 to 4	17,771	9,712	8,059	3,591	5,126	376	1,467	721	240	4,871	1,379
5 to 9	25,395	14,165	11,230	4,667	5,356	2,493	2,762	1,324	731	5,023	3,039
10 to 19	58,262	32,489	25,773	9,822	10,973	4,736	7,753	3,666	2,595	11,268	7,449
20 to 29	52,668	31,737	20,931	7,432	11,394	3,050	8,497	3,156	2,732	10,963	5,444
30 to 39	46,691	28,588	18,103	6,490	9,820	2,698	8,309	2,726	2,790	9,429	4,429
40 to 49	41,709	24,775	16,934	6,588	8,169	2,301	7,497	2,296	2,612	8,270	3,976
50 to 59	34,35	19,0	15,3	7,00	6,47	1,30	6,747	1,304	1,734	6,481	3,314

	6	50	06	4	0	2					
60 to 69	36,58 5	19,2 71	17,3 14	8,62 4	7,14 0	973	7,008	858	1,266	5,684	5,032
70 to 79	29,26 0	15,2 66	13,9 94	7,50 3	5,93 8	503	5,235	455	672	3,361	5,593
80 to 89	13,36 3	6,97 3	6,39 0	3,52 3	2,69 8	174	2,130	167	219	1,152	3,300
90 above	4,679	2,55 1	2,12 8	1,14 0	885	50	692	43	62	347	1,460
Age Not Stated	414	257	157	64	127	25	40	8	16	108	26

Source: Census report of 2011 Data of Disable Population in
Jammu and Kashmir

Defining Disability

A cursory look at the history of disability shows that in the feudal and medieval times, though disabled people were accepted as part of the family and were made to contribute in productive work yet they were looked upon as evil people possessed by black magic or sinners whose presence invited various disasters upon the society in the form of drought, floods, plague, pestilence, war and the like. There is wide range of debate about the understanding of disability. Disability as a concept is in vogue since times immemorial but earlier it was a naïve concept which expressed disability as sickness or inability to do anything. But with the passage of time, the term “Differently Abled” was coined by US Democratic National Committee in the early 1980’s as a more acceptable term that handicapped or disabled. These words were taken as dehumanizing as they treated them as an undifferentiated group.

A general definition of disability, according to World Health Organization manual relates to “any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being” A disability may be

physical, cognitive, mental, sensory, Emotional, and developmental or sometimes a combination of these. In the broadest sense of the term, people are labelled as disabled or handicapped because they look different from the rest of the society on account of their appearance or behaviour or capacity to learn and develop. difference in appearances and/or behaviour, in combination with a functional limitation or an activity restriction" It says that a functional limitation disability may be defined as "specific reductions in bodily functions that are described at the level of the person" In the definition given by the Planning Commission of India, a disabled person means a person who is "blind, deaf, having orthopedic disability; or having neurological disorder, mentally retarded." The definition includes "any person who is unable to ensure himself/herself, wholly or partly, the necessities of a normal individual or social life including work, as a result of deficiency in his/her physical or mental capability."

The Ministry of Social Justice and Empowerment, Government of India, prescribing a standard set of definitions along with standard tests for the purposes of certification of disability defines four major categories of disability. These include visually handicapped denoting total absence of sight; the loco motor handicapped as those having restriction in the activity of arms, limbs or other parts of the body on account of damage to the bones, muscles or nerves; hearing handicapped in whom the sense of hearing is non-functional for ordinary purposes in life and mental retardation which relates to sub average general intellectual functioning associated with maladaptive behaviour, occurring in the developmental period.

Definition of disability, according to Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, includes seven broad categories related to blindness, low vision, hearing impairment, mental retardation and mental illness and locomotor disability; whereas mental illness means any mental disorder other than mental retardation, mental retardation means a condition of arrested or incomplete development of the mind of a person, which is specially characterized by sub normality of intelligence. According to Disability Act, a person with a disability must suffer from not less than forty percent of any disability, to be certified for the same by a medical authority. A person with low vision means a person with impairment of visual functioning even after treatment or standard refractive correction but who uses or is potentially capable of using vision for the planning or execution of appropriate assistive device. A locomotor disability, according to the Act denotes disability of the bones, joints or muscles leading to substantial restriction of the movement of the limbs or any form of cerebral palsy.

WHO (1980) defined disability within a linear causal linkage between impairment, disability and handicap. They are explained below:

According to the ICIDH, *Impairment* has been defined as ‘any loss or abnormality of psychological, physiological or anatomical structure or function. ‘Impairment may be visible or invisible, temporary or permanent, regressive or progressive.

According to the ICIDH, *Disability* has been defined as ‘any restriction or lack of ability to perform an activity in a manner or within the range which is considered normal for human beings.’ As a result of impairment, the affected person may be unable to carry out certain activities considered normal for his age, sex, etc., this inability is called disability.

According to the ICIDH, *Handicap* has been defined as ‘a disadvantage for a given individual, resulting from an impairment or disability, that limits or prevents the fulfilment of a role that is normal, depending on age, sex, social and cultural factors, for that individual’.

The Status of Students with Disability in Jammu and Kashmir

A welfare state has a commitment to promote overall development of its citizens including those with disabilities so that they will be enabled to lead lives of equality, freedom, and justice and dignified as mandated the Constitution of India. With today’s changed perception of society towards persons with disabilities, they can lead a better life, if they have equal opportunities and effective access to rehabilitation measures. Several schemes and Programs are being implemented in the State in order to facilitate the persons with disabilities to reap benefit from growing socio-economic environment. Pension scheme for the persons with disabilities, special school for education of the persons with disabilities, scholarship & stipend to continue with higher studies, self-employment programs, reservation in jobs and educational institutions and reservation in poverty alleviation Programs are some of the measures, implemented for the welfare of the persons with disabilities. However much more remains to be attended to in this area. It is imperative to create environment for persons with disabilities to live with dignity and self-esteem.

The state of Jammu & Kashmir is situated in the northern extremity of India. The territory of the state lies between 32° and 37° North and 73° and 80° East. The state is bound in the

north-east by China, in the north- west by Afghanistan and in the west by Pakistan. The southern boundary of the state is contiguous with the states of Punjab and Himachal Pradesh. On the basis of its location, the state occupies a position of unique and strategic importance in the subcontinent. The area of the state is 2, 22,236 sq.kms. As per Census figures of 2001, the population of the state is 1.007 crore. The literacy rate is 55.52% which is below national average of 65%. The state is divided into three distinct regions, viz, Jammu, Kashmir and Ladakh comprising 14 districts. More recently 4 districts each in Jammu and Kashmir regions have been added, thereby raising the number to 22. Even though the state of Jammu and Kashmir has ethnic, linguistic, religious and cultural diversity, yet it is a perfect example of unity in diversity. For the last 16 years the J&K State has undergone turmoil and disturbances because of terrorism and militancy that have taken a heavy toll of life and property, besides throwing normal life out of gear.

According to Census 2001, the total population of differently-abled individuals in J&K State is 3.067 Lakhs. Out of total persons with disabilities, 2.8 lakh individuals are visually impaired, 0.38 Lakhs are physically handicapped, 0.17 Lakhs are with speech disability and 0.13 Lakhs have hearing disability, but in the state of J&K no statistics or data are available regarding number of persons with disabilities. Jammu and Kashmir State has always assumed responsibility for providing the welfare of persons with disabilities and the apathy of the State to develop a comprehensive policy for persons with disabilities becomes apparent from its sporadic efforts. Initially in 1974 the Government of India launched the Integrated Child Development Scheme (ICDS), the scheme was adopted by the Jammu & Kashmir State as well. However, the scheme has no provision for the persons with disabilities. In 1975, Project Integrated Education for the persons with disabilities was started but again the government did not put any efforts for the smooth functioning of the scheme. The Mental Health Act (1987) of the Government of India clearly excluded persons with mental retardation from the definition of those with mental illness. National Policy on Education (1986) and Plan of Action (1992) advocated the policy of integrating the physically and mentally handicapped with the general community as equal partners with the objective that the persons with disabilities should have access to quality education comparable to normal children. In response to international developments and increasing pressure from disability activists in India, the Government of India enacted the Persons with Disabilities Act into force only in February 1996 (Mohit 2000). The continuous conflict in the J&K region has deleterious consequences on the residents in their health and abilities. Two major areas of individual functioning that have

been affected are vision and mental health. Vision of young person's has been impacted due to the various types of armed combats. For example, the crowd control weapon, the pellet gun, used by the paramilitary forces cause grievous eye injuries indiscriminately. During the recent clashes in Kashmir region, the past four months have taken the highest toll on the vision of youth in Kashmir with eyes of 1178 persons getting pierced by pellet gun shots fired by security forces. These pellet victims will remain ineligible for benefits provided to persons with disabilities, such as reservation in government employment and will suffer in every aspect like education, domestic and social life, rehabilitation etc. till they get their disability certificate. Due to the sudden high population of vision victims, these processes would further delay their access to the benefits exacerbating the problems faced by the suddenly disabled population.

In Jammu and Kashmir, the Government constantly makes efforts in order to start new programs for the persons with disabilities which include various types of aids/appliances at minimum costs. The requirements for providing of aids/appliances, which are essential for the social, economic and vocational rehabilitation of persons with disabilities are inadequate. The persons with disabilities in Jammu and Kashmir are not fully getting benefit of these schemes to purchase aids/appliances because of lack of awareness, extra formalities and lack of professionals to train persons with disabilities on mobility aids. State approach towards implementation of programs has varied from being neglect to complete dependence on non-government organizations for delivering different services in remote parts of the state, which has reached only 2% of the persons with disabilities. In education, programs advocating education of persons with disabilities like the Integrated Education of Persons with disabilities Scheme (IEDC) in 1974 and the Project Integrated Education for the Persons with disabilities (PIED) in 1987 met with limited success as exclusionary policies and practices prevalent all over India still deny admission to persons with disabilities in regular schools. The lack of comprehensive planning and political will to achieve integration resulted in the poor implementation of the program provisions like orientation and training of school teachers etc. Thus education of people with disabilities has remained confined mostly to special schools in urban areas. The Universal Primary Education (1997) program that sought to integrate into general schools, children with visual, hearing, orthopedic and learning disabilities at the primary school level, has met with partial success. In recent years the District Primary Education Program (DPEP) has had a powerful impact on integrating persons with disabilities as it addressed core issues related to curriculum. However, the

provision of only three resource teachers per block under the DPEP pattern has proved inadequate, as schools are spread over vast geographical stretches, limiting interactions between the teachers and students. Most schools have not been able to remove architectural barriers and hence still refuse admission to persons with disabilities (Zachariah, 2001).

Kashmir has been regarded by many as heaven on earth. Its splendid beauty and hospitable population is legendary. Over the past 18 years Kashmir became associated with violence. Mental, physical and social health, are vital strands of life that are closely interwoven and deeply interdependent. Depression is more likely following particular classes of experience – those involving conflict, disruption, losses and experiences of humiliation or entrapment. World Health Organization has ranked depression as the fourth among the list of the most urgent health problems worldwide and has predicted it to become number two in terms of disease burden by 2020 overriding diabetes, cancer, arthritis etc.

The magnitude, suffering and burden in terms of disability and costs for individuals, families and societies are staggering. Mental disorders are universal, affecting people of all countries and societies, individuals at all ages, women and men, the rich and the poor, from urban and rural environments. Mental functioning is fundamentally interconnected with physical and social functioning and health outcomes. The mental health is influenced by displacement through conflict and war, by stresses on families, and by economic adversity. For the many persons who face uncertain futures (including those by conflict or disasters), the burden of serious emotional and behavioral disorders afflicts their lives. Many people living amidst the rages of conflict suffer from post-traumatic stress disorder. Causes of Disability in Jammu and Kashmir Disabilities in Jammu and Kashmir are totally of different nature when compared to the rest of the country resulting on account of conflict; victimization, causing behavioral disorders in the form of irritation, depression and physical disabilities a) Human Rights Violation: Majority of the current disabilities occurred as a result of usage of military power in which hundreds and thousands were beaten mercilessly (Naik Asif 2015, 354-56). According to Indian human rights report 2008, 42,147 persons have been killed in the violence till February 2007 of which 48 per cent were militants, 11 per cent were security personnel and 27 per cent were civilians. (Indian human rights report 2008). The district level data revealed that military areas were affected badly and having more disabilities than that of those areas where their interferences is less. The intensity of human rights can be revealed from the fact that more than one lakh disabilities are the conflict victims(Jammu

Kashmir Handicapped Association 2014). Further, a study of children conducted in the region of Kashmir held that out of 103 children 37 show symptoms of Post-Traumatic Stress Disorder (Margoob 2005, 22). Hence, states as well as the central government have to reform their attitude towards the people of the state and to treat the people of the state as human as people in other regions of the country.

b) Equality Confined To Papers: Disabilities act of 1998 guaranties equal opportunities for the disabled persons. But equality remains confined to the papers in the state. Currently, incentives for disabled people of the state have been minimized. There is an urgent need to have an exclusive full-fledged institution which would address the problems of the persons with different disabilities. Disable-friendly mode of transportation, educational institutions and hospitals are to be provided in order to minimize the growing disabilities in the state (The Jammu and Kashmir State Legal Services Authority 2010).

c) Lack of proper planning: Huge budgets were invested for the betterment and upliftment of the disabled in the state but the outcome has not been in tune with the efforts. Hence, planning reformation is needed for fruitful results that can minimize disabilities in the state (Bashir and Zahoor 2013).

d) Social conflict: Social exclusion is supposed to be the main factor contributing to disability. Poverty, unemployment, etc also comes under social causes. The unemployment rate in Jammu and Kashmir is rising with the passage of time. Employment oriented programs must be addressed for the betterment and survival of disabled. Employment will secure the life and rights of disabled people. Social inclusive programs have to be operationalized so as to curb unemployment rate. The unemployment rate among rural male is 3.8 per cent rural female as 1.8 per cent and urban male as 10.9 per cent and urban female as 4.7 per cent. 21.63 per cent people of Jammu and Kashmir State are living below poverty line which directly or indirectly contributes to disabilities in the state. (Digest of Statistics JK, 2010-11; NSSO Round 66th 2009-10)

e) Lack of awareness: lack of awareness among general public regarding controlling measures of disabilities adds to the number of disabilities in the state of Jammu and Kashmir (N S Alam et al., 2010).

f) Biological Factor: Biological factor such as gene transfer from a disabled person to another, acts as a genetic disease. Biological factors can be resolved socially with social setup which lacks in the state of the Jammu and Kashmir (Lone Irshad 2013).

g) Malnutrition: Malnutrition is considered to be a major cause of disability in Jammu and Kashmir. A large portion of people in the state were caught in poverty trap. Hence, common micro-nutrient deficiencies resulting disability in the state. (Haque, and Naseer 2013; Digest of Statistics 2010-11)

h) Inadequate Policy Implementation: Right from the front, so many law and Acts have been formed e.g. disability Act, 1987, disability Act, 1995 (PWD Act); disability Act, 1992 and amended in 2000 (RCI Act), disability Act, 1999 (National Trust Act), (CRPD, 2008) and J and K Disability Act of 1998, all needs to be implemented at the grass root level with efficiency and equity (Lone and Sudesh 2013).

i) Lack of Surveys and Research: Jammu Kashmir has not tackle problems in a proper way. There is only one private school for deaf and dumb with inadequate shape and no attention is given to carry out surveys on disabled so that rehabilitation measures can be carried out through proper channels to proper people (Bashir andZahoor2013).

j) Government failure: The health department is unable to operate its independent operations (plans) in the region of Kashmir and resulting increase in the suffering of disabled. Hence, in adequacy of services and Medicare severely disturbed the effected people in the state (Margoob, et al., 1997)

Models of Disability

There are several ideologies pervasive in public culture, expressed in a multitude of ways, which play into how people with invisible disabilities are treated. The ideologies most crucial to understanding invisible and visible forms of disability are related to the medical and the social model of disability though other models like charity model, economic model, rights based model and various others operating at national, regional and local levels might also be significant in specific times and circumstances. These models serve as an important tool, to understand various aspects of disability and its manifestations at the individual, social and cultural level.

Medical Model To begin with, disability is defined basically as a disease state and absolutely in clinical framework. Essentially a problem focusing on the individual, disability is viewed as a deviation from the norm. So, the role of the medical and paramedical professionals is to cure or ameliorate this problem in order to enable them to be as normal as possible.

Secondly, the medical paradigm holds that there is an objective state of 'normality' which within the medical profession entrusts professionals, a crucial role. This leaves little scope for the disabled and their families to participate in the decision-making process.

Thirdly, according to the medical model, the disabled, individuals are biologically and psychologically inferior to their able bodied counterparts. They are, thus, not treated as fully human and by implication, lack the competence to decide for themselves.

Fourthly, the phenomena of disability are visualized as a personal tragedy which occasionally affects individuals. The medical approach reduced disability to impairment and sought to locate it within the body or mind of the individual while the power to define, control and treat disabled individuals was located within the medical and paramedical professionals. The medical model views disability as a "problem" caused by disease and, therefore, needs to be cured medically. It perceives the disabled as "defective" and "deformed", and so a "cure" is aimed at with the help of medical professionals. It can also guide the affected to make adjustments and to inculcate certain behavioral changes so as to be "normal" and "cured". The physician diagnoses the problem and prescribes treatment to reduce the ailment. It means that the person affected is not „normal“ and, therefore, should be “normalized” with the help of medicine. However, as Mitchell and Sharon put it: “disability defines correction and tends to operate according to its own idiosyncratic rules”. It means that medical intervention is not able to overcome many kinds of disabilities. Its objective is to normalize the person affected, and it keeps on trying to find solutions in the most difficult situations.

People with invisible disabilities are discriminated because they are “defective”, and people with invisible disabilities are usually accused of being attention seekers as they seemingly look normal. In other words, the medical model of disability can lead to misperceptions and misunderstandings that prompt some people to be “insensitive and less willing to accommodate the needs of people whose disabilities are not outwardly apparent” (Definitions of The Models of Disability).

The medical model of disability has been strongly criticized in disability scholarship and praxis in the North since it locates disability on an individual's body/mind. The medical model has, therefore, been replaced by the social model that perceives disability as something that is not intrinsic to the individual but as a phenomenon resulting from the social environment that is not friendly to persons with disability. The social model deems that, even though impairments exist at the individual level, disability is the direct result of society's failure to account for the needs of persons with impairments and their functional requirements. The social model differentiates "impairment" (physical or mental condition) from "disability" (negative social reactions or prejudice with those impairments). This radical change in the way people look at disability has only been possible following a series of movements by persons with disabilities, activists and researchers in different periods and places (World Report on Disability 2011). Especially since the 1960s and 1970s, people's perceptions of disability completely changed, prompted largely by the self-organization of persons with disabilities, and by the growing tendency to see disability as a human rights issue (World Report on Disability 2011, 3).

The medical approach to disability is best represented by the World Health Organization (here WHO). The conceptual framework of WHO is based on the work International Classification of Impairments, Disabilities and Handicaps (Wood, 1981). The ICIDH is a classification scheme created and applied by the WHO. In the aftermath of the success of the International Classification of Diseases (ICD), a classification of the consequences of disease was put forth in the early 1970s. However, by the middle of 1970s ICIDH was basically in its present form, but existed only in internal documents of the WHO, Philip Wood, a British physician was entrusted by the WHO to get the work done up to that point and produce a classification system. The publication of the ICIDH in book form was carried out in 1980 for global use by the health practitioners and policy makers. The same went through several reprints and has so far been translated into several languages.

Furthermore, with a focus on altering the biological condition, this model places less emphasis on the role of society in restricting, enabling and empowering the persons with disabilities. Thus, the inadequacies inherent in this model of disability have been brought into focus. In order to understand disability as an experience, as a lively object, one would require much more than the medical facts, howsoever necessary these are in determining medication. The problem arises when they determine not only the form of treatment (if treatment is appropriate), but also the form of life for the person who happens to be disabled.

Despite these criticisms and shortcomings, the medical and rehabilitation enterprises are regarded as the major human service industries. Both practices are intimately linked to social control and their theories fit with the ideology of capitalism and the construction of the able-bodied identity

Socio-political Model the social model of disability was designed to discuss and defy discriminatory practices faced by people with disabilities. It supports the view that it is the mode of discrimination done in the field of public life, policy that disable individuals from full participation in social life. A person who has an invisible disability may indulge in conflict with the work ethics or social values if he goes for an interview. Social model emphasizes that social attitudes create barriers for a disabled. The conditions might change with shifts in perspective, and as Colin Barnes suggests that when society begins to value principles based on social necessity, obligation and interdependence, people with disabilities will be valued and included in employment opportunities.

The socio-political modal of disability has emerged recently as a reaction against the medical approach to disability. This approach has grown out of deep sense of dissatisfaction among the disabled with the traditional approaches. Like most under-privileged minority groups, their views have been disregarded and suppressed. Consequently, the issue of disability has undergone radical changes during recent years, shifting its focus from purely a medical/climax problem to the human rights and sociopolitical one

This model views the issue of “disability” as a socially created problem and a matter of full integration of individuals into the society. In this model, disability is not an attribute of an individual but rather a complex set of conditions, many of which are created by the social environment. Surrounding society and environment are sometimes more limiting than the disability itself. So, the management of disability needs social help and social responsibility to make necessary changes in the environment so that full participation of the disabled is ensured.

Besides these two significant models which define and shape the attitudes towards disability and the disabled in a crucial way, there are few other models which play their own role in understanding disability and its various nuances and hence require brief discussion. The social model discards the notion of prioritizing government social services for persons with disabilities, demanding opportunities to develop their own independence and skills. This framework maintains that the socially engineered environment and the attitudes reflected in

its construction play a central role in creating disability. Disability does not lie in the body of the person with disability, but in the mindset of the so-called “able” people and the structures created by them. Disability is therefore considered as a social oppression, refocusing the agenda away from cure, treatment, care and protection to acceptance of impairment as a positive dimension of human diversity, and to the rejection of a social norm that results in exclusion.

Economic Model The economic or vocational model to disability tries to establish a linkage between the individual and society. This approach emphasizes the health related limitation on the amount or kind of work performed by disabled people. In other words, this approach is focused on the vocational limitations of the disabled. The Economic model defines disability as a person’s non-participation in work. It also provides us with data which tells us that impairment has different kinds of impacts on an individual’s productivity and has different consequences that affect the economic growth of the state or nation. This model is directly related to charity model in the sense that it propagates the theory of giving some sort of charity, concessions or special assistance to people with disabilities because they are restricted by their disability to participate in various kinds of productive works and earn like individuals with normal abilities. This model also resembles charity in the sense that it too, in a way, propagates seclusion of the disabled so that they do not demand economic independence and remain satisfied with „charities“ given to them by individuals, trusts or State and the Central Government.

The economic vocational approach to disability is associated with several scholars and national as well as international bodies. However, it is with the publication of Public Policy Towards Disability by Berkwitz, Johnson and Murphy in 1976 that this approach got theoretical orientation.

The proponents of this approach tend to suggest that the employment problems of disabled people stem from faulty economic systems and deficiencies on the part of such disadvantaged individuals.

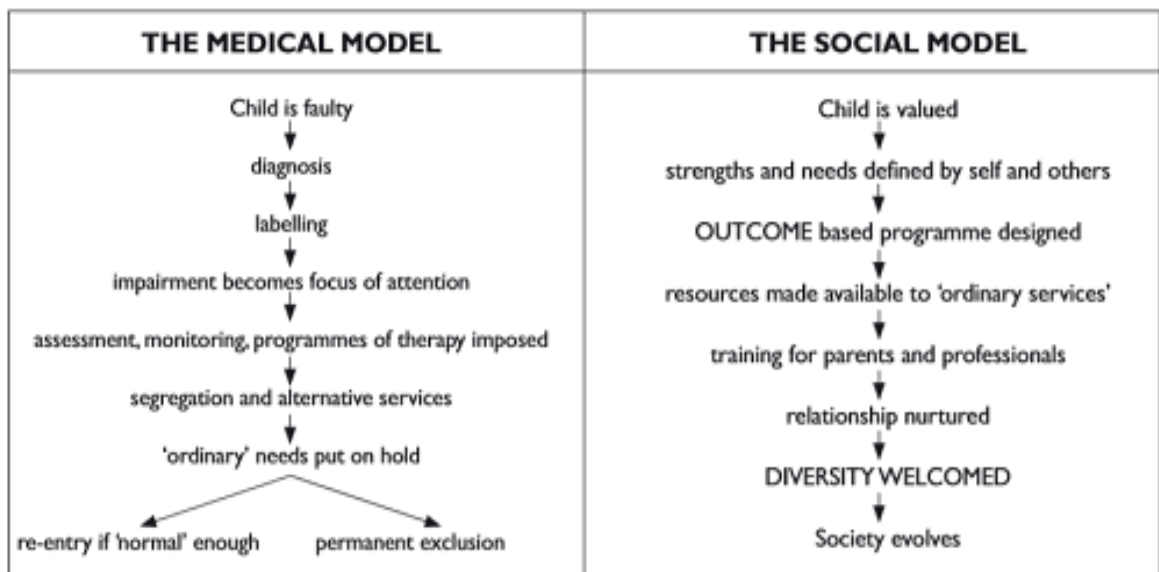
In recent years, the economic-vocational approach has been adopted by various national and international agencies in order to provide rehabilitation to disabled people. But there is quite lack of uniformity in their identification of disability. Generally, two important criteria are pursued in this regard-benefit determination and selective placement. So far as the criteria of benefit determination are concerned, it stresses primarily on the causative factor of disability.

It evaluates disability in terms of percentage basis. On the other hand, the selective placement criteria are focused more on the effects of disability. Thus, both these criteria are centered on the causes and effects of disability.

The International Labour Organization (hereafter, ILO) is the ardent exponent of the economic-vocational approach. The ILO, inter alia, International Labour Vocational Rehabilitation and Employment (Disabled Persons) Convention 1983 (No. 159) and Recommendation 1983 (No. 168) defines the term disabled, as "an individual whose prospects of securing, retaining and advancing in suitable employment are substantially reduced as a result of a duly recognized physical or mental Impairment".

Table 1.2

Social and Medical Models of Disability



Source: Powell, (2011)

Thus, it may be noted that the economic -vocational approach is more inclined to modify the physical capabilities and vocational skill of the disabled persons rather than the environment and the worksite. As a result of this orientation, significant energy has been diverted from the

effort to combat prejudice and discrimination against disabled people in employment and other areas of life.

Spectrum Model The Spectrum model refers to the range of visibility, audibility and sensibility under which mankind functions. Human disability condition can well be classified into seven broad categories which comprise of mental retardation, emotional disturbance, hearing impairments, visually handicapped, physically/orthopedically handicapped, communication disabilities and learning disabilities. Spectrum model takes into account all kinds of disabilities and establishes the importance of variety of human existence due to its genetic and biological reason. And as human beings all are part of a „spectra“ of human variability, different spectrum of human existence has to be acknowledged and assimilated in the scene of human variation. As each disability affects human function in a different way, it has to be dealt with differently and needs different measures to exist in the society. In fact, disability only becomes a tragedy when the society is not able to provide different things needed by different people. Tragedy does not consist in using a wheel- chair, or in being blind or hearing impaired; what is tragic is that one does not find barrier free buildings everywhere and that the system, by and large, is insensitive to the needs of the disabled and often fails to provide appliances which could better the lives of those living with the impairments.

Moral Model the Moral model refers to the attitude that people are morally responsible for their own disability. In the light of this model, disability may be seen as a result of evil actions of parents or people with disability if it is congenital or as a result of practicing witchcraft if it occurs after birth. This attitude may also be viewed as a religious fundamentalist offshoot of the original animal roots of human beings when humans killed babies that could not survive on their own in the world. Echoes of this can be seen in the doctrine of “karma” in Indian religion.

The “diversity model” or the “functional model” looks at disability in terms of functioning—physical, mental, and sensory; human beings are diverse, and all societies should view this diversity as a source of enrichment. Similarly, the “human variation” model argues that “the physical, cognitive, sensory and emotional make-up of the individual was not the problem, but was a problem only because social institutions and human-made environments were created without taking into account the characteristics of all people.” The different versions of the social model remove “some of the pejorative ‘specialness’ and

‘exceptionality’ – some of the ‘us’ and ‘them’ quality – from disability and reminds everyone that human beings come in a variety of physical, mental and emotional make ups.” Overall, disability does not lie on the “body” of the person with disability but on the “disabling” environment created by society.

Perspectives

Post-Modernist Perspective in Disability Studies

Post-modernist perspective was developed based on the philosophy which challenged the concept of objectivity and emphasised discourse (Whyte and Ingstad, 1995; Corker and Shakespeare 2002). Post-modernist theorists view disability as constructed within linguistic, discursive, and cultural practices ‘rather than based in a fixed or objective true ‘characteristic or status of a person with disability (Thomas, 2004). As per this perspective, disability is no longer considered as a definitive physical condition but a condition developed and defined by social norms and perceptions of the able-bodied (Devlieger, 1995). For example, being a person with visual impairment is a condition where a person cannot see, but it is dependent on social norms and discourse to identify it as a disability (Hughes 1999).

Conflict Perspective

The Conflict theory focuses on political, economic, and social forces that influence health and the health care delivery system. Among these issues which are of interest are those such as how race, class, and gender inequalities influence health and health care; power relations between doctors and other health care workers; the dominance of the medical model of health care; and the role of profit in the health care system (Barnes and Mercer, 2003). From this perspective, the social construction of disability took their prompt from Mills (1963) who argued that the definition of social problems must be located within wider material and political contexts, including the power relations and conflicts between dominant and subordinate classes (Conrad and Schneider, 1980).

Materialist perspective in disability studies

Writers like Vic Finkelstein and Mike Oliver, further developed the social model of disability by overlaying a Marxist theoretical perspective (Oliver, 1990). Marxism has had an influence

on the endeavour of persons with impairments to remove them from the oppressive nature of society. Therefore, Marxism can be utilised as a means to better understand the structural disadvantages that exist for disabled people in a capitalist society. Oliver states that industrial capitalism is at the root of the social exclusion of persons with disabilities by non-disabled people (Barnes, Oliver, and Barton. 2002).

Feminist Perspective to Disability

Jenny Morris developed the feminist perspective to disability in the early 1990s. Under this perspective, the feminists remain engaged in the process of building in feminist ideas so as to further understand disability. Disability feminists recognised the importance of personal experiences of disability. They focused on experiences of women with disabilities associated with the inferior status of their gender and social roles. Perhaps women with disability occupy different kinds of social locations in relation to disabled men since they have priorities not addressed in conventional social model thinking (Morris 1991, 1993). Wider feminist thinking had fragmented into several feminisms; each linked to other theoretical ideas, some materialistic and some social constructionist perspectives.

Concept of Education and Higher Education

Higher education comprises all post-secondary education, training and research guidance at education institutions such as universities that are authorized as institutions of higher education by state authorities. The term Education 'has a very broad connotation. It is very difficult to give its exact definition. There is no single objective which can cover the whole gamut of education with its various manifestations. It includes all the activities a given country deems to be higher education - not only those that take place within ordinary universities and graduate schools, but shorter term education and training courses (polytechnics, junior colleges, and various forms of technical specialty schools) that are 2-3 years in length, and even correspondence courses that make use of information technology and are targeted at a broad population of students

According to one view, the term education has been derived from the Latin word *educare* which means to bring up 'or to rise'. According to this view, education is a process of

imparting to an individual certain information and knowledge which society considers necessary. Various philosophers and thinkers—from Socrates to Dewey in the West, and Yajñavalkya to Gandhi in the East—have defined the term education in harmony with their own philosophy of life (Aggarwal, 1981). As a result, divergent concepts and definitions of education have emerged. According to Rousseau, education does not simply mean imparting information or knowledge. For him, education is not an accretion from without; it is a spontaneous development of one's natural powers and capacities. For John Dewey, education is the development of capacities in the individual, which will enable him to control his environment and fulfil his potentialities. According to Gandhi, education is an all-around drawing out of the best in the body, mind and spirit of a child and a man. According to him, education begins from the moment of a child's conception to the moment of his death.

According to UNESCO, the term higher education' includes —all types of studies, training, and training for research at the post-secondary level, provided as institutions of higher education by the competent State Authorities.¶ Throughout the entire world, higher education is considered to be the key to both individual and societal aspirations (Laskar, 2010). For individuals, education beyond the secondary level is assumed to be the way to social esteem, better employment opportunities with good paying jobs, prolonged life opportunities, and intellectual development. For societies, higher education is assumed to be the key to technology, productivity and other ingredients of international competitiveness and economic growth (Altbach & Johnstone, (Eds.). 1963). It is believed to be a major engine of social justice and equal opportunity and democracy. Education is a major institution. It is created by the society to fulfil its task. This institution passes on stored experiences (culture/knowledge, etc.) from one generation to another to develop social efficiency of an individual, which ultimately helps the society to grow. This two-fold relationship between education and society- education being both the product and the producer of the social environment-is quite clear. It has been rightly said that the school is created by society to re-create society'. Further, with the emergence of globalisation, change has become one of the major aspects which societies have required to keep up with, if they want to become developed. In this global neoliberal time, the role of higher education has become very important for economic development. Higher education institutions are now seen as key drivers in the knowledge economy. Consequently, this has led to economic recognition of higher education and brought higher education institutions /universities /colleges into the policy arena as catalysts within the society. Similarly, research on institutions of higher education and higher

education has been influenced mainly by human capital theory. This theory was developed by Schultz (1961). According to him, education should be looked upon as an investment for the individual, as well as for society, rather than being looked upon exclusively as consumption. This theory heavily influenced investments in the education sector as well as education policy and planning discourse. However, this theory was heavily criticised in the late 1960s and early 1970s. Bronchi (2003) states that increasing the level of education in a society can in circumstances lead to the high inequalities in income distribution. Another important challenge in the application of human capital theory is the failure to account for an increasing gap between growth of education people and knowledge base and the diminishing number of job opportunities to apply their increasing knowledge investment, more specifically in developing countries (Olaniyan and Okemakinde, 2008).

Further, research on higher education began to accelerate with the rise of demand for higher education and institutions (Clark, 1984). This demand required researchers and practitioners to look into the need to understand the role that universities play in society as higher education institutions. The research shows that most of the researchers and educators from all over the world agreed that universities play an active role within the society. Stepes *et al.* (2008) state that in the 19th century universities evolved from institutions that were responsible for preserving and transmitting knowledge to institutions that are charged with creating knowledge through research. In the later stage, during the industrial period, universities were seen as institutions that trained technical professionals (El-Ghali, 2011). From the last couple of decades, researchers have started to state that universities have an added role to perform, namely, contributing directly to society through acting as catalysts (Gibbons, 1999). Similarly Seidel (1991) highlighted five important functions of higher education institutions in his study. They: (i) provide training and education; (ii) provide professional training in professions including medicine, law and teaching; (iii) provide regional development, (iv) develop international contacts; and (v) conduct research and social function in fostering the intellectual and social development of society (El-Ghali, 2011). Further, UNESCO (1988) also highlighted the importance of higher education in contributing to the process of national development and progress. In summary, all the researchers have concluded that higher education institutions play an active role in the training of productive intellectual resources for the development of society (Mendivil, 2002). Thus, these institutions are charged with the responsibility of training people and generating knowledge that can, in turn, trigger national development.

Access to Higher Education in India

Higher education in India remained highly inward oriented despite several post-independence reforms in education sector. In terms of number of educational institutions, India has the world's largest higher education system with about 1,000 universities and 40,000 colleges whereas it ranks third in terms of size and diversity, but its presence in the international education system has been abysmally below its true potential that remains unexplored. Higher education includes not only colleges and universities offering professional courses in fields such as law, theology, medicine, business, technology, science, music, and art, but also teacher training schools, community colleges, and research institutes. Higher Education, in recent times, has become the most obvious means to attain material wealth and social privileges. This is possibly one of the most important reasons as to why access to higher education has been monopolised by a few privileged sections and hence the necessity to provide the weaker sections with an opportunity to access Higher Education. The Government of India has been striving persistently towards the upliftment of the socially and educationally backward classes. The extent of higher education is generally measured by enrolment ratio in higher education. Three alternative methods, namely, Gross Enrollment ratio (GER), Net enrollment ratio (NER) and Enrolment of Eligible (EER) are used to estimate the extent of access to higher education. Three alternative sources, namely Selected Education Statistics (SES), National sample Survey (NSS), and Population Census (PC) provide data on the figures of student enrolment. In 1950-51 the enrolment rate was 0.7%, which increased to 1.4 per cent in 1960-61. In early 2000, the GER based on the SES was 8 per cent. The NSS and PC arrived at an enrolment ratio of about 10 per cent and 14 per cent, respectively. The SES data reports gross enrollment rate by 4-5 per cent. For 2003/4, the GER work out to be 9 per cent, 13.22 per cent and 14.48 per cent (Mungekar 2008). Further, a review of studies by Ravi Srivasastva and Amaresh Dubey, based on National sample Survey (NSS) data, estimated for the first time the access to higher education for various groups and brought out the variation and disparity in enrolment rate in 2004-2005, among SC, ST, OBC and others, between male and female and between urban and rural groups (Thorat, 2008). The review of NSS data for 2004-2005 provides us a good insight into the inter-group differences with regard to access to higher education in Indian society. The NSS data for 2004-2005 indicates significant **intercaste / tribe** disparities: enrolment rate was about 11 per cent at overall levels. The Gross Enrolment Ratio among the OBCs (8.50 per

cent), the SCs (6.30 per cent), and the STs (6.33 per cent) was much lower compared with that of the other sections (16.60 per cent). Thus, the GER for the OBCs was about two times and that of the SC/STs was three times less compared with those of the others. Between the OBCs and the SC/STs, however, the GER was higher among the former by about two percentage points (Thorat, 2008).

Table 1.3

Enrolment of PWD students in Higher Educational Institutions of Jammu d Kashmir

Year	Male	Female	Total
2019 -20	334	262	592
2018 -19	660	1675	2335
2017 -18	286	180	466
2016 - 17	358	531	889
2015 - 16	349	223	571
2014 - 15	522	329	851
2013 - 14	412	378	790
2012 - 13	339	229	568
2011 - 12	8	2	10

Source: AISHE Data on Enrolment of PWD students in Higher Educational Institutions of Jammu d Kashmir (2011-2020)

AISHE survey shows that there has been a great shift from 2011 to 2020 in the enrolment of students with disability in higher education in Jammu and Kashmir As shown in 2011 the enrolment stands at 10 where as if we look at the 2018 it has raised to 2335. All India survey of higher education (AISHE) 2019-2020, the enrolment in higher education stands at 3.85crores in 2019-2020 as compared to 3.27 crores in 2018-2019 registering a growth of 11.36 lakh (3.04%). Total enrolment was 3.42 crore in 2014-15. (GER) of the student belonging to the eligible age group enrolled I higher education I 2019 – 2020 is 27.1% against 26.3% in 2018- 2019 and 24.3% in 2014-2015. Gender too indicates an improvement in the relative access to higher education for females of the eligible age group compared to males with 1.01 in 2019-20 as against 1.00 in 2018-2019.

Table 1.4

Disability Literates by Educational level and type of Disability

Type of disability	Literate	Below Primary	Primary but below middle	Middle but below matric	Matric secodary	Graduate and above
Total	100	19.4	24.3	16.7	23.6	8.5
Seeing	100	20.8	24.6	16.3	23.1	8.9
Hearing	100	18.9	23.7	16.2	24.5	9.3
Speech	100	20.8	23.6	15.1	23.6	9.3
Movement	100	16.3	24.6	18.8	25.6	8.6
Mental Retardation	100	28.1	26.9	14.7	15.6	4.6
Mental Illness	100	19	25.6	18.9	21.8	5.6
Any Other	100	17.9	23.3	16.9	24.6	9.3
Multiple Disabilities	100	27.4	26.7	14.5	16.4	4.1

Source: Census, India: 2011(%)

The overall review of NSS data indicates that it ignored the data base for the enrolment rate of students with disabilities in higher education institutions. Similarly, the researcher could not find many studies on accessibility and other major problems of student with disabilities in higher education in India. In this respect, this study aims to provide a framework for policy makers by explaining the need for a special policy for students with disabilities at higher

education. Unless disabled people are included in mainstream educational policies, along with weaker sections of society, India will not be able to achieve overall educational development and will not become recognised as a knowledge society.

Policy and Provisions for Persons with Disabilities in India

The Government of India has enacted various laws for governing different aspects of disability and welfare and empowerment of the persons with disabilities. These include: the Mental Health Act of 1987, the Rehabilitation Council of India Act, 1992, the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, and the National Trust for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999. The main objective of these Acts is to empower and mainstream the persons with disabilities in all domains of life by providing equal opportunities to them. Among all, the PWDs Act of 1995 was the key central legislation that provided certain entitlements in the areas of education, employment and affirmative action, and other privileges in prevention and early detection of disabilities. The PWDs Act, 1995 was enacted to give effect to the proclamation on the full participation and equality of the people with disabilities in the Asian and Pacific region. However, it failed to make any difference in the status of persons with disabilities due to various drawbacks such as narrow definition of disability, confined only to seven types of disabilities, no criteria for identifying posts, lack of implementation of reservation and exclusion of private sector. Therefore, to provide a fillip to the growing needs and aspirations of the PWDs, Indian government replaced the PWDs Act, 1995 by the Rights of Persons with Disabilities (RPWD) Act in 2016.

The types of disabilities have been increased from existing 7 (as defined in the Person with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995,) to 21 and the Central Government will have the power to add more types of disabilities.

The Act covers the following specified disabilities:

1. Blindness
2. Low-vision
3. Leprosy Cured persons

4. Hearing Impairment (deaf and hard of hearing)
5. Loco motor Disability
6. Dwarfism
7. Intellectual Disability
8. Mental Illness
9. Autism Spectrum Disorder
10. Cerebral Palsy
11. Muscular Dystrophy
12. Chronic Neurological conditions
13. Specific Learning Disabilities
14. Multiple Sclerosis
15. Speech and Language disability
16. Thalassemia
17. Haemophilia
18. Sickle Cell disease
19. Multiple Disabilities including deaf-blindness
20. Acid Attack victims
21. Parkinson's disease

The significant changes under the new legislation and the rights and entitlements have been covered in the new Act which are explained as below:

Major Changes under the PWD Act, 1995 and the RPWD Act, 2016

India was the seventh country to ratify the United Nations Convention on the Rights of Persons with Disabilities on October 1, 2007. The RPWD Act 2016 was enacted in line with UNCRPD principles which ensure that rights are fully extended to persons with disabilities in terms of equal opportunities, freedom and non-discrimination. This is evident after the major changes and addition of various provisions in the RPWD Act 2016. An overview of the major changes is as under: Change in Scope and Coverage The RPWD Act 2016 has been enacted to give effect to the United Nations Convention on the rights of persons with disabilities. Unlike the PWD Act, 1995, this new act has been extended to the whole of India including Jammu & Kashmir. The Act has also included public and private institutions within its scope and coverage. Definition of Disability Included in the RPWD Act, 2016 Under the PWD Act, 1995, “person with disability” was defined as a person suffering from not less than 40% of any disability as certified by a medical authority. This Act covered only seven disabilities which include ‘Blindness’, ‘Hearing Impairment’, ‘Low Vision’, ‘Loco motor disability’, ‘Leprosy Cured’, ‘Mental retardation’ and ‘Mental illnesses. However, the scope and number of disabilities has been widened in the new Act, 2016. Under the RPWD Act, 2016, the term ‘person with disability’ is defined in line with a definition adopted by the UNCRPD. The Article-1 of UNCRPD states that ‘Persons with disabilities’ include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others. Subsequently, the new RPWD Act has also defined the terms “person with benchmark disability” and “person with high support” under the Section 1(r) and 1(t) separately.

University Grants Commission aimed at providing equal educational opportunities to students with disabilities in higher education institutions and ensuring their full participation. The Commission has considered the implementation of PWD Act, 1995 in universities and colleges and approved 3% reservation for students with disabilities in admission to all the courses of study offered by higher education institutions. It also recommends that all the university buildings, classrooms, and laboratories, etc., must be accessible for students with disabilities (*See* UGC references No.F.11-5/95 (CPP II) dt.03.02.2000). The Commission has considered the issues concerning students with disabilities and agreed to provide relaxation up to a maximum of five years to the students with disabilities in admission in various courses in all the universities and colleges (*See* UGC references No.F.6-1/2002 (CPP II) Vol. III dt.02.08.2006). The Commission has been providing financial assistance to all higher education institutions for purchase of library books and journals in each Plan Period. It also

requested all the universities and colleges to utilise a part of library grant for the purchase of special equipment's such as Braille typewriter/Dictionary, tape-recorders and cassettes, etc., to enable students with visual impairment to make use of these facilities (*See* UGC notice reference No.F.15-3/80 (CP)). The UGC had started the HEPSN (Higher Education for Persons with Special Needs) scheme during the Ninth Five-Year Plan to assist universities and colleges. The HEPSN scheme is basically meant for creating accessible environment for students with disabilities at higher education institutions to provide better educational and learning facilities and environment which meet their requirements. It has three components to deliver the services to students with disabilities in higher education institutions. These are:

Enabling Unit The UGC recommended to all universities to establish an Enabling Unit to develop awareness among the functionaries of higher education institutions about the needs of students with disabilities and also to provide necessary guidance and counselling to students with disabilities.

Providing access to students with disabilities: The main objective of this component is to create an accessible environment by providing special arrangements in the environment as per their diverse needs as well as for independent functioning.

Providing special equipment: to extend educational services to students with disabilities (*See* Extracts from the XI Plan UGC Guidelines Grants to Universities).

Thus, the universities and colleges are encouraged to procure such devices including computers with screen reading software's, low-vision aids, scanners, readers and scribes for visually challenged students, mobility devices etc. With all these policies and provisional support services of the government of India, the University Grants Commission aims at providing equal educational opportunities to student with disabilities and ensuring their full participation in higher education institutions. Although various steps have been taken in order to improve the higher educational opportunities for learners with disabilities, there are very few explicit signs of progress. According to University Grants Commission (UGC), 6 per cent of the youth population is enrolled in Indian universities and colleges. Based on the most conservative estimates for the disabled youth population in India, approximately at least 3,160,000 disabled youth should be in the Indian universities and colleges. However, just 1.2 per cent of the 3.6 lakh disabled youth are in the universities and colleges. It can be concluded that higher educational system in India is not accessible to 98.8 per cent of its disabled youth. Similarly, a survey conducted by National Centre for Promotion of Employment for Disabled People (NCPEDP, 2005) shows that only 0.1 per cent (male 0.07

per cent, female 0.03 per cent) of the total number of students in 52 universities were those with disabilities. Although 3 per cent seats are reserved for the students with disabilities; this indicates that these students are not able to reach the higher levels of education. This study concludes that most of the institutions obviously did not understand the issue of access and were under the impression that all the places were accessible to all present and future students with disabilities. Generally, the higher education stage demands formation of an independent social and personal identity. Students with disabilities have to overcome various challenges of academic demands combined with their disability. Disability service providers also play an important role in the success of these students at higher education institutions (Reber, 2007). Many of these students, due to fear of being labelled and of stigma, avoid disclosing their disabilities and needs to higher authorities, teachers and friends in higher education. Thus, these students face many problems in higher education institutions due to several reasons. But there is a dearth of research focused on this area specifically in the Indian context. Therefore, the current study aims to explore the educational experiences of students with disabilities in higher education institutions in Jammu and Kashmir.

In the present chapter, the terms disability and education were conceptualised in a global context. A brief discussion of the growth of higher education and status of students with disabilities in higher education in Indian context has been presented. The present study aimed to understand the experiences of disabled students while gaining higher education in Kashmir and also what hinders them to access the higher education in Jammu and Kashmir. Also it focused on factors influencing the educational experiences of students with disabilities in higher education institutions. By using both qualitative and quantitative methods of research the researcher will try to explore the experience of students with disabilities in higher education and also how accessible higher education is to them. So far no such research had been done, there are a no.of works that has been carried out but all those only focus on the trends and change in the population of disables in Jammu and Kashmir; this research will be one of its kinds. This will focus on the students with disability who are perusing Higher education institutions of Jammu and Kashmir

The succeeding chapter, Review of Literature, has been presented in a systematic manner; clarifying the concepts related to these students and issues in higher education. Literature shows that a majority of students with disabilities indicated that they had encountered barriers to their education, including lack of understanding and support from administrators, faculty,

staff and other students; lack of adaptive aids and other accommodations; and inaccessibility of buildings and grounds. Apart from compulsory provisions, students with disabilities need positive socio-cultural, economic and infrastructural conditions within the educational institutions. It is in this context that the present study has attempted to examine policies and support services for students with disabilities in higher education institutions that support access for higher education in Jammu and Kashmir. It is also important to explore the social and educational experiences of students with disability about the availability of support services.

Chapter II

Review of Literature

This study is focused on factors influencing the access to educational institutions of students with disabilities in higher education institutions. The chapter attempts to critically examine and review the type of research studies which have been undertaken and conducted so far on students with disabilities in higher education that indicate significant trends in this field and point out gaps in research. The literature included in this study is based on resources available. A great deal of research has been conducted on various issues of students with disabilities in higher education institutions such as characteristics of students with disabilities, provision of support services, different kinds of problems encountered by them within higher education environment, attitudes of teachers and peer group and, university intervention and its impact on their social and educational experiences. But unfortunately there is a lack of research studies in this area in the Kashmir context.

After understanding the debates in disability studies, the researcher feels still a considerable amount of research and theorising lies ahead in disability studies. Many issues, including impact of globalization; disability in developing societies, information and communication technology, independent living, welfare system change, civil rights and so forth, need to be studied (Barnes and Mercer, 2003.) The discipline of political science offers various theories for understanding the political systems and the political behaviour that govern public policies and societal role related to people with disabilities. Campbell and Oliver (1996) and Shakespeare (1993) agree that the movement was highly successful in uniting and mobilising disability organisations and people with disabilities in political action. As a political movement, the disability rights movement has been analysed through the lens of policy change theory. Here the study have focused mainly on theories of government policy – Human Rights based approach, and disability in theories of justice – Capability approach.

a) Human Rights or Rights-Based Approach to Disability

The emergence of the human rights approach coincided with the downfall of neo-liberal policies as a criticism against economic-centred development policy and practice (Seppanen,

2005). The human rights perspective to disability fundamentally means viewing individuals with disabilities as subjects of law. This approach locates disability within a paradigm of rights, that has been emerging since the United Nations Universal Declaration of Human Rights of 1948 (Rioux, and Carbert, 2003). As per this Declaration, all people have certain political, economic, civil, social, cultural and development rights- regardless of various differences between individuals. Theoretically, this approach builds an analysis of how society marginalises people and how society can be adjusted to eradicate this marginalisation. In United Nations Human Rights Reports, Quinn and Degener (2002) defined individuals with disabilities as subjects and not as objects. It also views them as right holders. Similarly, it locates the problems outside the person and, especially, in the manner by which a range of social and economic processes accommodate the difference of disability or not as the case may be. Therefore, the debate about disability rights is largely linked to one about the place of difference in society.

This approach is closely related to the social model of disability which states that support for individuals with disability is not a question of humanity or charity. Instead, it is a basic human right that any person can claim. Thus, the rights perspective assumes that society is responsible to provide whatever mechanisms are necessary for people to realise their rights. Under the rights approach, persons with disabilities may get the provision of support services, devices, equipment's to enable social and economic integration, self-determination, and the enjoyment of social and legal rights. As per this approach, all people have the right to participate and to exercise self-determination as equals in society. Another important aspect of this approach is that it applies guiding principles to ensure an acceptable development programming process such as participation, accountability, non-discrimination, empowerment and linkages to human rights standards (Martin and Boesen, 2007). It also focuses much on raising the levels of accountability and transparency by identifying them rights holders 'and the corresponding _duty-bearers'. This framework should contribute to the improvement of the capacities of _duty-bearers 'to meet their responsibilities. Overall, it takes into account the duties of the various players 'factors including individuals, local organisations, authorities, governments, aid donors and international institutions (*See Human Rights in UNDP, 2003*). This perspective also provides for the development of adequate laws, administrative practices, and mechanisms of equalisation and responsibilities both regarding entitlements and response to denials or violations of rights.

In spite of the theoretical strength, this approach is not free from pitfalls (Katsui, 2008). The application of this approach to development is criticised as ‘globalisation of policy making with the use of Western power is taking place (Kennedy, 2004). Secondly, it is also criticised for its irresponsibility for intervention. For instance, human rights are inseparable and interdependent in principle. Though, when it comes to practice, the operationalization mechanism is feeble (Seppanen, 2005). For example, the international Covenant on Economic, Social and Cultural Rights states appropriate ‘measure to be taken with available resource’ and in the context of the full use of the maximum available resources (CESCR, 1990). When certain context is taken into account for operationalization process, this weakness becomes the primary challenge right away because situational analysis, identification of structural issues and other significant analysis are all missing thus hindering the implementers. Such analysis is very complex but yet undermined (Alston 2005). Thirdly, it has paid little attention to background social and political and historical conditions (Batliwala, 2007). Further, Kennedy (2004) claims that when changes rely too much on medical professionals and lawyers, the expected ‘emancipator’ impact of this approach cannot reach the emancipation of the concerned people by making necessary changes in practice. For instance, as far as people with disabilities are concerned, legal system and court are too often inaccessible due to illiteracy, lack of information, lack of awareness about rights, shortage of financial resources and or physical condition, and thus is then far from the concerned people who are supposed to benefit from the changes (Katsui, 2008).

b) Capability Approach to Disability

Similarly, political philosophers have developed several theories of justice which are aimed at proposing ideal social structures and processes as the philosophical base of a just society. In current years, theories of justice focus on the issue of disability, defining disability and critiquing earlier theories of justice designed to be universal-based on their failure to adequately account for disability. The Political philosopher Amartya Sen (1992) offers a different theory of justice to address disability and fairness for people with disabilities. Sen proposes his theory of justice, whereby advantage is conceptualised in terms of capabilities. According to him, when deciding whether two persons are equal in the context of social justice, one must reflect on not just resources and rights available to each individual, but also on each individual’s ability to use their resources/goods and exercise their rights (Sen 1997).

Differing personal abilities are important to decide the advantage. It is the fundamental aspect of Sen's interest in equality (Sen, 1992). Further Nussbaum (2003) articulates on how Sen's theory of justice translates into governmental treatment of disadvantaged groups, including people with disabilities. This approach suggests granting a right to a person; the State must guarantee that the person is provided the ability to use that right, which often necessitates the provision of affirmative material and institutional support, not simply a failure to impede. Proactive support and special individualised treatment by the State may be essential to ensure the capability of exercising a government-granted right (Kimberlin, 2009). Consequently, the capability approach directs the government to think what the major barriers there are for full and effective empowerment of all citizens and to develop actions that eradicate these barriers (Nussbaum, 2003).

The capability approach has been taken up by scholars in various fields. Sen formulated the capability approach as a broad framework for disability (Kuno, 2008). This approach reflects a wide variety of factors within one framework, using the concept of capabilities and functioning's. According to Sen, functioning is defined as an achievement, whereas capability is understood as the ability to achieve (Sen 1987). Mitra (2003) stated that this framework helps to improve our understanding of disability and living conditions of disabled people by allowing us to analyse how disability results from the interaction between the personal characteristics (impairment, sex, reading skills, intelligence), available resources and the environment (physical, social, economic, political) of the individual, as well as the person's psychic states. This is particularly important in the analysis of well-being of persons with disabilities because their personal factors are varied and all very much influenced by social and environment factors (Mitra 2003; Terzi 2003). This kind of analysis helps to identify areas of intervention and means of intervention to be decided according to possibilities, appropriateness and preferences of the persons with disabilities (Kuno, 2008). Like any other theoretical approach, the capability approach has various limitations and shortcomings. According to Robeys (2003), there are various disputes around the capability approach whether it is too individualistic or not. Secondly, there is the debate about the critical or conservative nature of this approach, and related to that, the treatment of choice and power; and lastly, the discussions whether it leads to paternalism or inappropriate policies. Out of these perspectives, the researcher believes that the capability approach has the potential to be a comprehensive framework of thought on issues and conditions which are related to students with disabilities in higher education by its provision of various useful

implications. The capability approach offers an alternative space for social justice evaluation related to the notions of capabilities and freedom of choice. It argues that evaluation of well-being, poverty, inequality and justice, and the design of social policies and institutions should focus mainly on the individual's capabilities to function. The Capability Approach will be used to conceptualise and guide this study. The different components of the capability approach and its implication for this study are presented in the chapter on Methodology.

Research on Students with Disabilities in Higher Education Institutions

Students with disabilities symbolize an emerging population in higher education institutions, whose perceptions and experiences of higher education are ultimately shaped by their socio-cultural context and the existing environment and availability of specific facilities required by them in the higher education institutions. Regardless of remarkable progress in legislations and policies for these students in higher education institutions, many of them still face various challenges for successful completion of their studies. A review of these studies shows that there are several factors, or barriers, which affect their access to educational institutions and also their social and educational experience of these students in higher education institutions.

- a) Characteristics of students with disabilities in higher education,**
- b) Factors affecting the students with disabilities,**
- c) Barriers encountered by the students with disabilities in higher education institutions.**
- d) Role of teachers in Accessibility**

- a) Characteristics of Students with Disabilities (SWDs)

For instance the number of students with disabilities is growing in higher education institutions; university management has begun to collect data on the demographic profile of students, along with their special needs. To obtain a greater understanding of the nature of students with disabilities, an exploratory study was conducted by Moisey (2004) at Athabasca University (AU). It examined the cohort of students with disabilities, who enrolled in one or more Athabasca University courses with a starting date between April 1, 1998 and April 1,

2001. The data showed that nearly half of these students had a physical disability. One fifth of them had a learning disability. In addition, 4 per cent students had a visual impairment and 3 per cent, a hearing disability. Of the 604 students with disabilities enrolled at Athabasca University between 1998 and 2001, two out of three (65.4 per cent) were female. Comparison of the age distribution reveals that students with disabilities tended to be older than the general AU undergraduate population during this period. Their overall course completion rate was 45.9 per cent, somewhat lower than that of the general population.

To understand the background of those students with disabilities who enrolled in higher education institutions in the United States, the National Council on Educational Statistics (2002) conducted a research study. The findings indicate that 30 per cent of students with disabilities belong to families with low income background, in comparison with 23 per cent students without disabilities. It was also found that due to special requirements or assistance, they were less likely to live on the campus (11.3 per cent), as compared to students without disabilities (15.5 per cent). The study also found that 28.2 per cent of students with disabilities, enrolled in higher education, were noted to belong to an ethnicity other than white as opposed to 33 per cent of students without disabilities. In this study, the author also collected data on the subjects chose by the undergraduate students with disabilities. The results indicate that 16.3 per cent of students with disabilities chose the field of humanities, followed by 15.7 per cent enrolled in business or management related courses, 15.2 per cent in computer science or engineering related subjects, 10 per cent in social sciences, 8.3 per cent in health, 5 per cent in vocational/technical courses, and 9.8 per cent in others.

It can be concluded that most of the students with disabilities in higher education institutions are male and older than the general population. It was also obvious that there were a larger number of students with orthopaedic and visually impairments as compared with hearing, speech or any other impairments. In addition, it was also clear that these students preferred to choose humanities compared to any other subject. It is interesting to note that there were no studies which focused on the socioeconomic background of these students who are pursuing higher education. Similarly, there needs to be research on the factors which lead to gender differences in enrolment of these students 'to pursue higher education at the university level. After a review of studies related to the characteristics of students with disabilities the subsequent section deals with the factors affecting their educational experiences in higher education institutions.

b) Factors Affecting the Students with Disabilities in Higher Education Institutions

The review of studies in this section indicates that success of the students with disability not only depends on the availability as well as accessibility of facilities, but also on various socio-psychological and personal factors. This section focuses on each of these factors in order to demonstrate how they have an impact on higher education of students with disabilities.

i) Personal factors In general, personal factors are those that are individual to each student and may include self-determination skills, self-efficacy, and self-esteem and the way they (SWDs) experience symptoms of a disability. The review of studies shows that the students with disabilities require a number of self-determination skills such as self-awareness (including self-assessment); self-advocacy (recognising and acting upon one's right); self-efficacy (belief that the person can perform an identified task); decision-making; and independence (initiating tasks and adjusting goals)' (Dowrick, Getzel & Briel, 2004). Self-determination is an important construct for the general population but it is especially important for the students with disabilities who have enrolled in higher education institutions. For Ward (1988), the word self-determination refers to 'the attitudes which lead people to define goals for themselves and the ability to take initiative to achieve those goals'. This definition also includes actions such as setting goals, identifying steps necessary to achieve the goals, and overcoming various barriers to goal attainment. In additions, the definition also includes key components such as choice-making, decisionmaking, problem-solving, and goal- setting and attainment. These kinds of skills must be taught to these students who are enrolled in higher education institutions for the improvement of their living conditions.

Similarly, autonomy and self-determination of students is an important factor which influences their day-to-day life. To understand the level of autonomy and self-determination that students with disabilities exhibit in their day-to-day life, a qualitative study was conducted by Barron (2001). For this study, data was collected from 24 women and men with physical, learning and mental impairments. According to Barron (2001), parents have different kinds of relationships with their disabled children and do not always have the same approach to how autonomy in everyday life should be made possible for their children. In this study, the author focused mainly on mothers 'way of looking after their children. Firstly, some mothers give full autonomy to their children with disabilities in their day-to-day life, whereas some other mothers control their children by denying them certain things which they

wish. The findings of this study show that those who had more autonomy had more social skills and exposure to the society than those who did not have autonomy. The author points out that due to lack of social skills and self-determination in those students, opportunities to make and fulfil the choices of their life are denied.

Some research studies have supported the view that self-determination is an important component for students with disabilities in higher education institutions for their better educational experiences. A study conducted by Gerber, Ginsberg and Reiff (1992) was intended to understand the factors behind the success of the students with learning disabilities. The findings of the study show that the self-determination skills such as control over their lives and surroundings, persistence, adaptability to their environments and social networks, facilitated their success. The respondents also expressed confidence that they were going to be successful long before they actually became successful. It strongly reflects the beneficial outcomes of increased self-determination skills. Mott (2004) collected data from 8 students (interviews with 4 students and a session of email interview with additional 4). The analysis of data suggested that the range of academic success, as measured by the GPA, was the best predictor for academic persistence. Respondents listed the topics that they felt were keys for successful transition: study skills, time management, note taking, academic skills, stress management, classroom tips and how to feel comfortable with a disability. This study also suggested that students need to learn how to cope with college life. They need to have self-autonomy to empower themselves to succeed in whatever they do.

Similarly, it is very essential to explore what are the essential skills required for these students to success in post-secondary education institutions. In order to discover the essential skills for these students, Getzel and Thoma (2008) conducted a study in two year and four year colleges setting. This study mainly focused on identifying: (a) skills that effectively self-advocate the use to ensure they stay in the college and obtain needed supports, and (b) the essential self-determination skills to remain and persist in the college. Purposive sampling was used for this study to select focus group participants. 34 students (53 per cent were female and 47 per cent male) were involved in the focus group. The results of the focus group indicate that self-determination is important to their success in post-secondary education. Many respondents shared their experiences of not disclosing their disabilities and special needs (not advocating for services), failing, and then choosing to disclose their disability and needs to the support staff. Respondents of each focus group identified a list of key component skills of self-determination such as problem-solving skills, learning about oneself (one's

disability), goal setting, and selfmanagement. In this study, the major themes that emerged from the data were: (a) seeking services on campus, (b) relationships with professors, (c) developing support systems on campus, and (d) self-awareness. They also reported that meeting their teachers on a regular basis and discussing their issues or special needs in class or helping the faculty obtain a better understanding of what they needed in terms of support in class, was helpful. They stressed the importance of developing friendships with peers, support staff members of campus, and of joining support groups or other group activities which really helped them achieve success in their studies.

Research studies show that disclosing information about one's disability or special needs depends on person to person, situation and place. For one person disclosing disability may be comfortable and beneficial, whereas it may be awkward and even intimidating for other persons. Disclosure means different things to different people, especially, among students with special needs in higher education institutions, given that there are various costs and benefits associated with disability disclosure (Corrigan & Matthews, 2003). Similarly, Jourard (1971) noted that disclosure is a process where the individual decides the degree of intimacy they want to achieve with other people in the society. Students with disabilities in higher education institutions are aware that the verbal or non-verbal transmission of knowledge about their disability status could improve their learning opportunities and also alter the behaviour of others toward them (Olney & Brockelman, 2003).

For students with disabilities, the process of disclosing is based upon a variety of factors. For instance, a study by Braithwaite (1991) indicates that there are four factors which influence the disclosure behaviour of students with disabilities. These include: (a) their relationship with other persons, (b) dependence on situation, (c) able-bodied persons' response and, (d) their own personal feelings about their disability. Braithwaite (1991) also points out that students with disabilities disclose their disabilities to their respective teachers in order to receive necessary facilities in the classroom such as getting extra time during examination, teaching aids, and other learning resources. But all these factors are based on the assumptions that the disclosure is purely voluntary in nature for them. He also indicates that disclosing disability can be viewed as both voluntary (for example, students who must disclose their disability verbally to be considered disabled) and involuntary (for example, students who use a wheelchair or a cane).

In addition to disclosing about the special requirements, one also needs to understand the factors which might improve the educational and social experiences of students with disabilities in higher education institutions. For instance, the study conducted by Jacklin, Robinson, and Harris, (2007) aims to examine how useful the category ‘disabled student’ is, as a basis for targeting support. For this study 195 questionnaires were returned. The research methods were mixed; drawing on quantitative analysis of educational and social profiles to provide a context for more qualitative analysis of students’ perspectives. Theoretically, the study was concerned with social construction of student identity. It drew upon the conceptualisation of the life cycle of a student’s experience which highlights key stages in his academic career. The majority of the respondents reported that overall their learning and social experiences of higher education were positive. Some respondents reported that they were not happy with both their learning and social experiences. Another important finding of the study was that the universities attempted to identify the number of students with disabilities and difficulties experienced by them, and that helped the university management in understanding how the curriculum and organisation could be improved for the benefit of all students including those with disabilities. The researcher found that the usefulness of the category of ‘disabled student’ seemed to lie partly in the power of the label. From these findings, it can be concluded that the usage of the term ‘disabled students’ has helped the policy makers bring legislative changes, such as enactment of new policies, and provision of more support services to these students in higher education, and also brought reasonable adjustments which could be enabling. Here we should also recognise the fact that usage of a label was not always positive. Sometimes it also leads to stigmatisation as a result students would not like to disclose their identity.

Similarly, self-advocacy and appropriate disclosure are ultimately responsible for management of higher education successfully for students with disability. To understand the role of self-advocacy and appropriate disclosure in coping with experiences of students with disabilities, including physical barriers in the environment, and support barriers, a study was contributed by Adrienne (2006). This study also aimed to understand the management of their impairment such as learning disabilities, psychiatric disabilities or HIV/AIDS which posed unique implications for students with disabilities, often involving labels which carry significant and societal stigmatisation. The author notes that, if accommodation was needed within a college setting, a student was required to disclose the disability and related needs, but multiple dilemmas arose for the students as when to disclose, how to disclose, how much

to disclose and whom to disclose. This is especially a challenging situation for students from multicultural backgrounds who face additional discrimination based on their minority status. The author found that disability of students increased the perception that they were devalued and stigmatised, and sometimes they felt concerned about negative results of disclosing their disability. The researcher has suggested that, in order to resolve this problem, higher education institutions need to encourage the students with disabilities to disclose their disability. Similarly, these institutions should ensure that these students are treated with respect and also work towards addressing and removing all the barriers to their learning within a positive culture. In summary, it is understood that majority of the studies highlighted the importance and role of self-determination, knowing the availability of services in the campus and disclosing their disability and needs to disability support staff to obtain services as per their special needs. This, in turn, helps in improving their educational experiences in higher education institutions. The findings of these studies emphasised how students took responsibility, developed support systems, sought out services, developed problem-solving skills to overcome academic, as well as physical barriers, and worked to strengthen their skills to enable themselves to remain in higher education and achieve success in their studies. Much research needs to be done on students 'educational and occupational aspirations and their motivations to pursue higher education at university level.

ii) Social factors Social factors refer to relations of students within and outside the education institutions, including those with the family, peers without disabilities, teachers and staff (Tinto, 1975). Inclusive programmes can have a number of positive educational and social benefits for these students. For instance, a research study conducted by McDonnell, Thorson and McQuivey (1998) revealed that student with disabilities have additional needs such as living on their own and dealing with the disability in an educational environment. The tasks in the daily life of these students are more complicated than those without disabilities. For example, mobility impaired students face architectural obstacles during their late undergraduate and graduate years. Studying in inclusive schools helps these students to overcome issues. The main benefits of inclusive programmes are: more successful post-school adjustment, significant gains in communication, social and adaptive behaviour skills, increased social interactions with peers without disabilities and the development of friendships with peers/students without disabilities. Further, the findings of the study also reveal that students without disabilities also appear to benefit from inclusive programmes by developing increased sensitivity to and an awareness of the special needs of people who are

different from them, improving their own selfconcept and self-identity and, sustaining social relationships with peers with disabilities.

Similarly, Nunkoosing and John (1997) studied 15 students with learning disabilities to identify factors that both enhanced and hindered the development of friendship and relationship of people without learning disabilities. The results revealed that friendship was facilitated by mutuality and acceptance, whereas poverty, limited transport and absence of physical and emotional support prevented the development of friendship and lead to the experience of loneliness. It also found that participants managed their experiences of rejection and loneliness through the development of various coping strategies such as self-advocacy skills and positive self-image. This study suggests that there should be change in provision of support services from an independent (meaning economic, social, functional and psychological independence) model to a support and empowerment (it is a process which facilitates and maximises opportunities for people with disabilities to have control and authority over their own lives) model which pays adequate attention to the capacities of individuals with a learning disability, rather than their deficiencies.

Along with social identity and relationships, students in general, require self-conceptions for a better quality of life. In a study, Ping-Ying Li, et al (2006) explored the self-conceptions of Hong Kong Chinese students with intellectual disabilities. The main purpose of the study was to analyse and understand the respondents 'self-conceptions in different life domains. Opportunity, or convenience, samples of 135 young adults with intellectual disabilities were interviewed. The findings showed that family self, the social self and achievement in school and work were the most important attributes of the self-conception of the students. Some respondents stated that conflicts with family members and poor relationship with peers and co-workers generated bad feelings in their daily life. The study suggested that counselling services and training in communication skills should be provided which help persons with intellectual disabilities develop appropriate interpersonal skills to maintain a sense of self-worth. The data also showed that these students had higher self-conception than the group of people without disabilities. From the findings of the study, it can be concluded that family involvement in the rehabilitation process, self-enhancement strategies and quality employment service can facilitate the development of positive self-conception of these people and lead to a higher level of community integration and better quality of life.

After a review of these studies, it is better to understand the impact of social support, relations, and friendships of these students on their educational success, failures and stress in educational institutions and students' perceived social support, stress and sense of coherence. The study by Heiman's (2006) evaluated the extent to which 191 university students with Learning Disabilities (LD) differed from 190 students without disabilities. Follow-up univariate analyses of the subscales of social support, success and lack of success, and stress measures revealed that students without learning disability perceived greater support from their family, friends, and significant others. Regarding academic success, students without learning disability reported higher study skills and were more liable to believe that they succeeded due to academic characteristics, such as a good memory, ability to be attentive and to concentrate on their studies; they were also less likely to report that their academic success was due to external factors. Most often than students without learning disability, students with learning disability explained that their lack of academic success was due to external factors. Thus, students with learning disability expressed a higher level of academic stress than students without learning disability. There was no significant difference for stress in the daily life. The perception of lower social support reported by students with learning disability in the Open University can be understood as being a result of the different teaching methods of the distance-learning university, where most the students study on their own, and only a few of them study within a group of peers. Thus, probably, students had fewer opportunities to establish an on-going support-group. The perception of lower social support of the learning disability group highlights the importance of the social setting in supporting and helping students with learning disability to successfully adjust to higher education.

Similarly, Cosden and McNamara (1997) examined the self-perceptions of college students with and without learning disability. Data was collected from 50 college students with learning disability and 50 college students without learning disability. These findings showed that students with learning disability reported higher levels of support from friends, or more social acceptance, than their non-disabled peers. This study suggests that not all students with learning disability have problems with their social skills or in their social relationships. It is possible that students with learning disability who have stronger social relationships are more successful in the school and more likely to attend a college. However, it is also possible that these results are associated with the students' opportunities to develop social supports through campus programmes. It can be further speculated that students with learning disability may

rely more on social support than their non-disabled peers when deciding whether or not to attend a university. Therefore, from these findings, it can be concluded that students with learning disability in this sample differed from those without learning disability not only by virtue of having weaker academic skills, but also by having perceptions of stronger social support.

From the above study, it can be understood that those who had more social support and relations achieved more academic success and vice-versa. In addition, it can also be understood that those who had less social support had less academic success. Further research also shows that lack of support, social skills leads to depression, and anxiety in these students. For example, a study conducted by Hoy et al, (1997) attempted to gather empirical data on the presence of depression and anxiety in only two groups of adults with learning disabilities who receive social support and other services. The results of this study have significant implications both for the diagnosis and the intervention needs of adults with learning disabilities. Interestingly, differences related to depression have been identified in a study among students with learning disabilities classified as successful and unsuccessful. Successful students with learning disabilities reported less depressive symptomatology than those identified as unsuccessful, but more than their peers who are not in special education. Another significant finding of Hoy et al, (1997) was the replication of the increase of anxiety-related symptoms among adults with learning disabilities attending college/university settings. This study supports that anxiety is a significant problem, particularly, for adults with learning disabilities in college and university settings. It also documents that children and adolescents with learning disabilities experience more anxiety than their normally achieving peers in terms of minor somatic complaints, disturbed sleep, and worries. The researchers point out that college/university students with learning disabilities as groups are more negatively influenced by levels of anxiety both in a testing situation and generally. The impact of anxiety on test performance is a significant consideration that professionals must be cautious about during differential diagnosis. Specifically, if anxiety is not carefully accounted for during an evaluation, it would be very easy to mis-identify an individual as demonstrating lower ability, less discrepancy between ability and achievement, and/or over identify attention deficit disorders. They conclude that successful 'adults a variety of coping and stress-reduction strategies that are not always apparent in the _unsuccessful' adults with learning disabilities. This section has elaborated on the importance of social factors and thier impact on educational experiences of students with disabilities in higher education

institutions. The activities or interactions between a student and the campus environment facilitate developmental changes that imply either successful or unsuccessful integration, and adaptation and adjustment to the social and academic aspects of college life. The review of the studies in the section stresses the importance of social support, social relations, and friendships for a successful adjustment to higher education. It is surprising to note that many of the studies in this section focused on learning disability. The researcher could not find many studies on social experiences of orthopedically and visually impaired students in higher education. Further, it is interesting to note that none of the studies explored how gender plays an important role in maintaining social and friendly relation, and how they are coping with their day-to-day activities. Similarly, much research needs to be done on family support received by students 'with disabilities and its impact on their education.

Till now, we reviewed some of studies related to the characteristics of students with disabilities. Let now examine some of the barriers encountered by these students in higher education institutions.

c) Barriers Encountered by Students with Disabilities in Higher Education Institutions This section deals with studies reporting:

- (i) Physical barriers,
- (ii) Academic barriers and,
- (iii) Attitudinal barriers, encountered by students with disabilities in higher education institutions.

i) Physical barriers Physical barriers continue to exist in higher education institutions for these students. The examples of physical barriers they face are: lack of access to buildings, classrooms, restrooms, and public facilities due to non-existence of elevators and parking facilities within a university (Brown, 1992; Schneid, 1992). For a student with disability, two obstacles must be overcome to have a successful and positive experience in the university. The remedy includes: availability of special needs or support services which enhance the student's ability to participate fully in the chosen course of studies and that the campus must be physically accessible. Similarly, a study by Shevlin, Kenny, and Mcneela (2004) reported that students with disabilities experienced variable access within higher education and physical access remains a serious obstacle to full participation. Reports from participants indicate that they encountered access difficulties at every level in the college life. Despite focused support from the Disability/Access Officer, the physical/attitudinal environment was

inadequately adapted to ensure full inclusion. Guaranteeing basic access to teaching and learning spaces appeared to be beyond these institutions. Thus, the prospects of developing the practice of universal access are extremely remote. Generally, there was a low level of awareness of student needs in relation to assistive provision and assessment. A positive and informed staff/ college attitude proves crucial in ensuring access and equitable treatment. Further, Paul's (1998) study indicates that students who use wheelchairs struggled as a result of inaccessible classrooms and restrooms. A study by West et al, (1993) also shows that barriers identified by students with disabilities were inaccessible buildings and classrooms, and lack of other accommodations.

Providing equitable participation for these students poses substantial and farreaching challenges for higher education institutions and requires them to tackle difficult questions around institutional transformation grappling with the structural barriers that exist. Further, Howell and Lazarus (2003) argued that addressing challenges of increasing access and active participation in higher education institutions for students with disabilities in South Africa is essentially about the challenge of responding effectively to meet the special needs of these students. It also suggests that changes are needed to be made, not only in the physical environment in which teaching and learning takes place, but also in the way in which higher education curriculum is organised, delivered and assessed. Similarly, there is a real need to address attitudinal barriers at all levels of the institutions that continue to locate the problem of disability with perceived limitations in the learner, rather than the limitations of the system with its inability to meet the full range of learning needs among the student population. Central to meeting the learning needs of students with disabilities is the development of an integrated and committed response to the provision of teaching and learning support for some students, but most importantly, it includes supporting the system as a whole, including the academic staff to meet a more diverse range of learning needs. From these studies, it is clear that there are inherent limitations in the current piecemeal institutional response to the provisions for students with disabilities. A comprehensive access service that addresses the needs of all marginalised groups and becomes an integral part of the educational institutions, is required. Further it is important to recognise, as shown in the study of Howell and Lazarus (2003), that there should be change in provision of support services and people's attitudes. Thus, it can be concluded that if there is no change in the ideology of the education institutions, its staff and its curriculum, the problem will continue.

ii) Academic barriers: There is an abundance of studies examining academic barriers these students face in educational institutions (West et al, 1993; Vickerman and Blundell, 2010; Bierwert, 2002). These studies show that majority of the students with disabilities had encountered barriers to their education due to lack of understanding and cooperation from administrators, faculty, staff, and other students, lack of adaptive aids and other academic support services and, inaccessibility of buildings and grounds.

For instance, a study by Vickerman and Blundell (2010) examines the perspectives of these students in higher education institutions related to their experiences with course, course delivery, and barriers to their learning. For this study, a survey of 504 students with and without disabilities and interviews with 4 (2 male and 2 female) students with disabilities (1 from each discipline such as sport, dance, physical education and outdoor education) was conducted. Out of 504 respondents in this study, 5.6 per cent indicated that they had a disability. The findings of the study revealed that 25 per cent of the respondents who had disability did not disclose their disability in their university application due to a perceived fear that they may not be offered a place during admissions. Another finding of the study showed that 11.1 per cent of these students indicated that their assessments did not cater to their needs, compared with 3.6 per cent of students without disabilities. One respondent reported that his learning and teaching assessment was restrictive and this tended to be a result of inappropriate learning resources, lack of modification of teaching by teachers, lack of discussion with students with disabilities regarding their problems, needs related to learning and assessment strategies that significantly disadvantaged them in higher education. Another respondent of the study reported, —When I asked my tutor about alternative assessments due to my impairments, he replied that it would not be fair on the others.¶ It may be that perhaps they were not aware of acts of the students with disabilities and the need to make reasonable adjustments. Overall from these findings, it can be concluded that barriers faced by these students reveal both a lack of awareness on the part of legislative requirements and lack of training on how to respond to diversity in learning, teaching and assessment affecting the education of students with disabilities in higher educational institutions. In addition to the problems of disclosing their disability and lack of proper assessments strategies, these students had problems with the teachers' knowledge or information regarding the availability of support services to them. A study by Bierwert (2002) indicates that majority of students felt satisfied with the services they received and felt they were familiar with the referral procedures and support services available; but they felt that professors were

not familiar with their disabilities or available support services on the campus. Majority of the respondents in this study reported that requesting for a classroom accommodation was often stressful to them. Similarly, Holt and Mckey (2000) study identified a number of factors that impacted on students with disabilities and their ability to study successfully at the postgraduate level. These included: a supportive supervisor, full-time versus part-time study, fatigue, medication and stress and anxiety. Quantitative and qualitative data were collected from 53 students through personal interviews and a questionnaire. The results indicate that approximately 1/3 not stated that they did not receive supervision of an adequate standard, while the remaining 65 per cent respondents were extremely positive about the experiences they had with their supervision. Another important finding was that a third of those who completed a questionnaire agreed that their disability did affect their relationship with their supervisors. The researchers suggest that it is important for any supervisor to be flexible to the changing needs of their students and accepting of any changes in circumstances. This is particularly important for the successful study of the students with disabilities at postgraduate level.

Student's experiences in higher education, whether good or bad, depend greatly on the awareness and knowledge of staff of the institution. Some students reported very positive experiences where the staff was well-informed which is often because of personal experience or interest in disability matters, rather than because of institutional training or policies (Hall and Tinklin, 1998). This study concludes that the main challenges for higher educational institutions is to combine recognition of the individuality of students and their needs with policies and actions which are more than piecemeal attempts to ameliorate difficulties. Most of the student respondents said that the professors were accepting and considerate but some of them described the faculty as suspicious, reluctant, or negative. In a study conducted by Norton and Suzann (1997), one student perceived that some professors tended to focus more on disability than ability. Further findings show that several students expressed hesitation about requesting for support services or facilities until after they had attempted a test in the classroom.

The faculty responses indicated overwhelming acceptance of services or facilities; 95 per cent were comfortable with granting extra time, and those who were hesitant would grant extra time unless time was an essential part of the task being evaluated (for example, lab tests). Students' responses show that half of those students who failed were enrolled first time and had not used any services or facilities; second time when they used services or facilities, they

passed the class. In addition, two professors emphasised that having students take examination at DSP&S (Disabled Student Programmes and Services) was more acceptable than granting extra time in the classroom because they believed other students would then want extended time. One instructor who taught at an off-campus site preferred to make her own arrangements for accommodation. Thus, a justifiable conclusion is that those faculties are more interested in discerning what students have learnt than in requiring them to express knowledge through a rigid form of testing. The academic support services can be categorised into four areas: (a) course accommodation (e.g., changes to the content, extended contract time), (b) examination accommodations (e.g., additional time and assistance at the time of examination, providing an especially distraction-free room), (c) external support service (e.g., notetaker, interpreter), and (d) assistive technology (e.g., use of text-to-speech, speech-to-text, and screen reader software). Most of the students with disabilities received some type of service; only 7 per cent received no services at all. Overall, students who received more services had more success in terms of course completions in exploratory study conducted by Moisey (2004) at Athabasca University (AU). The author also examined the type of services that students received over the three-year period through the office for Access for Students with Disabilities (ASD). For example, 69.3 per cent of students who completed one or more courses had extensions to their contract time, in comparison with 65.6 per cent of those who did not complete any course. Similarly, 63.6 per cent of students who completed one or more courses had accommodation made to the time of their examinations (e.g. more time allowed) compared with only 51.5 per cent of those in the group who completed no courses. Moisey (2004) also found that certain type of disabilities appear to be more amendable to assistance. For example, nearly all students with learning disabilities who received assistive technology completed their courses in comparison with about half of students with other types of disabilities who received this type of service. Moisey (2004) suggested that a further study is required to explore the relationship between course completion and type of disability and support services received. 71 It can be understood from these findings that most of academic barriers experienced by these students in higher education institutions are due to lack of proper understanding from faculty and university administration regarding their special needs and problems. It is also clear from these studies that the students who received more academic support had more academic success and better educational experiences than those who received less academic support. Therefore, it can be suggested that, along with providing more academic support services to these students in higher education institutions, university management should ensure that all students without disabilities, teachers and non-teaching

staff are aware of the support available to students with disabilities in their respective universities.

iii) Attitudinal barriers

Students with disabilities who attend higher education institutions often face attitudinal barriers from their peer groups and teachers. Attitudes play an important role in the success or failure of students with disabilities in higher education institutions. Attitudes of teachers, peer groups, non-teaching staff, and the administration as well as student services coordinator can all have profound effect on the social and educational experiences of these students (Nathanson, 1979). Lucas (1999) defined attitude as ‘a favourable or unfavourable evaluative reaction towards something or someone, exhibited in one’s beliefs, feelings, or intended behaviour’. The review of studies shows that most students with disabilities, like other minority groups, desire to achieve acceptance and integration in society. In this section, the researcher reviewed the studies (Dupoux, et al, 2005; Riddell, Tinklin and Wilson, 2004; and Lau et al. (1999) which are focused on attitudes of these groups and how it facilitates or hinders the integration of students with disabilities in higher education institutions.

Dupoux et al (2005) compared the attitudes of teachers towards integration of students with disabilities in Haïti and the United States. A sample of 152 high school teachers in Haïti and 216 high school teachers in the United States was asked to complete a background questionnaire and opinions on integration of students with disabilities scale.

Results showed that teachers in both countries had similar attitudes toward the integration of students with disabilities. Although advanced degree was a significant predictor of favourable attitudes toward integration and, more teachers in the United States had advanced degrees than the teachers in Haïti. Responses indicated that teachers varied in accepting students with different types of disabilities. Teachers in both countries seemed to have created a hierarchy of accommodations to severity of disability, by choosing the learning disability category as their first choice, and the emotional and behavioural categories as their least favorite. In addition, the data in this study suggested that for integration to be a success, teachers with a large stock of pedagogical knowledge and skills are more likely to hold favourable attitudes toward integration. Provisions should be in place for prospective teachers to take courses dealing with the prevalent disabilities and for teachers already in the system to participate in district training and professional development, to alleviate the fears of teachers who lack confidence in providing services to students with disabilities. By increasing the knowledge

base, it is expected that negative attitudes will decrease. This study concluded that despite differences in philosophies, policies and school systems, economies, incidence of poverty and unemployment, teachers in Haïti seem to agree with the general concept of integration to the same degree as reported by their US peers.

Even though there are a number of policies regarding students with disabilities in to policies in a number of areas including admissions, estates and buildings and in some strategic plans in higher education in Scotland and England between 2001 and 2003, student case studies reveal gaps between policy and practice. For instance, Riddell, Tinklin and Wilson (2004) showed that significant barriers related to the participation of these students in higher education, continue to exist. Some students found that adjustment to teaching practice was difficult to obtain. Even where students had received formal agreements to provide reasonable adjustments (as required by law) such as hand-outs (either soft copies or hard copies) of lectures in advance, they often found themselves in the difficult positions of repeatedly having to ask for these, to no avail. Some lecturers, particularly in older universities, felt that adjustments to teaching practices would lower standards and give unfair advantage to these students. In all institutions, academic staff felt that they were under pressure and were unable to devote as much time as they would like to individual students. The researcher concluded that support for individual students remains largely the province of student support service, with emphasis on providing individual support to get round institutional barriers rather than on more fundamental institutional change.

Similarly, promoting interaction with people with disabilities should be a viable educational step to improve the public's acceptance, encouraging those ideal forms of acceptance which would include recognising target people's individuality, mental abilities, reciprocation and constructive life experiences. For instance, a research study conducted by Lau et al, (1999) revealed that public patently expresses significantly higher tendencies of discrimination against people with mental health difficulty than those with intellectual disability. More than 45% of respondents indicated that people with mental health difficulty should stay in their hostels and service centres built for them and that they should be located far away from residential areas. More often, people prefer people with intellectual disability or mental health difficulty as their colleagues, people with whom to talk, rather than as their neighbours. Garvey (1991) investigated higher education institutions which developed accessible environment for students with disabilities. The results indicated that the attitudes of students without disabilities groups towards students with disabilities were more positive and

favourable in these institutions as compared to institutions without services and focused on creating an accessible environment. Similarly, a study by Fichten et al, (1990) also found that staff and students without disabilities used to feel concerned about the needs of these students in the higher education institutions, which created an accessible environment and provided support services in their campuses. Attitudinal barriers should not be ignored when it is determined to provide equal access for students with disabilities in higher education institutions. The attitude of faculty members and peer groups may be an important determinant in the successful completion of educational experiences for students with disabilities. After reviewing some of the studies related to the students with disabilities in higher education institutions let us now examine some studies on teachers' attitudes and experiences of teaching students with disabilities in higher education institutions.

Role of teachers in Accessibility

Teachers' attitude is one of the most important variables in the education of students with disabilities (Smith, 2000). In general, teachers would be most agreeable and happy for integrating students who required only minor classroom accommodations or having minor special needs but less agreeable as the demands for accommodation increase. For instance, Wilczenski (1995) conducted a study to measure the attitudes of teachers towards inclusive education with the help of a new instrument called the Attitudes towards Inclusive Education Scale (ATIES). For this study, data was collected from 301 regular classroom teachers in New Hampshire. In addition, a cross validation of the sample comprising 144 New Hampshire College undergraduates was conducted. The findings of the study revealed that both groups were less willing to integrate students with social deficits than those with physical impairments in general education classes. It was also found that both groups were more willing to accommodate students with physical impairments than those students requiring more academic support services. An important finding of the study showed that both groups were more willing to integrate students with special academic needs than students with behaviour problems. Overall, the findings of the study show that teachers are more willing to accommodate students with relatively minor social problems, such as shyness, than to integrate the students who they considered disruptive in the classroom. Similarly, faculty was more willing to accommodate students with learning disabilities or students with deafness or blindness than students with emotional problems or physical disabilities. The faculty members at the U.S. universities were more willing than the Mexican

faculty to accommodate only one type of students with disabilities. But that, both groups were very similar in their willingness to become friends and accommodate the other students with disabilities, underscores the commonalities between both professional cultures. Wolman et al, (2004) recommended conducting workshops in Mexico and other countries to increase the knowledge of and awareness about needs of students with disabilities, which aims at accommodation of all students, regardless of the type of disability. It was believed that through these efforts the accommodation of students with disabilities at all postsecondary institutions will become an imperative and no longer an option in most countries. A survey was conducted by Kraska (2003) to discover the perceptions of postsecondary faculty members related to students with disabilities. For this study, data were drawn from 106 faculties (62 per cent male and 38 per cent female) at public four-year state-supported institutions of higher education located in south Alabama. The results revealed that there is no statistically significant difference in perceptions among faculty members towards serving students with disabilities based on age, gender, teaching experience, and extent of faculty member's contact with students with disabilities. But it was also observed that academic rank and academic unit were significant variables related to faculties' attitudes towards serving students with disabilities in higher education. Specifically, it was found that professional rank had lower mean scores (83.50) than non-professional rank. The faculty members of School of Education had a lower mean score than that of School of Arts and Science and the School of Business. This is mainly due to the fact there were numerous administrative and curricular changes in the School of Education which could have created a great deal of professional stress in recent years. Overall, the findings in this study indicated that most faculty members had positive attitudes towards students with disabilities at these institutions. If teachers have a poor understanding of the signs and symptoms of depression, it will be more difficult to detect, given their impaired language and conceptual skills. Increasingly, research has shown that not recognising these signs and symptoms at the appropriate time leads to poorer academic performance, an increase in challenging behaviours, school expulsions and social exclusion, possible hospitalization, and greater stress experienced by the young persons in their careers and also service providers (Taggart and McMulln, 2007). Furthermore, the teachers also highlighted a lack of confidence in working with these doubly disadvantaged students. The study suggested that teachers must also receive appropriate education and training in an attempt to prompt early referral to specialists for a detailed and comprehensive psychiatric assessment, rather than continuing to manage such young people's challenging behaviours.

Further, a study by Foundation for People with Learning Disabilities (2002) suggested that by identifying the strengths or deficits of teachers' knowledge, appropriate training can be developed that will enable teachers to play a central role in the early recognition of potential mental health problem. Teachers may also be able to advise the young person and their parents/relatives, and to seek support from the child and adolescent mental health teams and/or the community intellectual disability teams at an earlier age. Such assistance could, therefore, prevent existing problems from getting aggravated and school expulsions from occurring, and also avoid unnecessary hospitalization. Similarly, in a qualitative study exploring the faculty's experiences with students with disabilities, Farbman (1983) explored the experiences of a select group of science faculty members from a large urban university. Analysis of in-depth interviews revealed that faculty members had contact with mostly mobility impaired or visually impaired students. The approaches of the faculty members appeared to be polarised. Some of them were willing to modify their teaching styles to give out copies of their notes and to spend extra time outside of class. Other professors refused to do those things. These students with disabilities rarely used special equipment with the exception of Braille terminals. Majority of academic accommodations involved logistical arrangements, such as more time or scheduling. Based on the findings the researcher concluded that the degree of autonomy afforded to professors may be detrimental to students with disabilities and, preparing these students with advocacy and negotiation skills would best enhance their educational opportunities.

In Baggett (1994), the faculty members indicated that they could identify only students who disclosed their disability. Data analysis showed that the faculty lacked the experience of teaching students with disabilities, and were unfamiliar with the various disability rights and laws, as well as with the various university-wide services available to these students with disabilities. It was also observed that among the students with disabilities, the faculty was more familiar with teaching learning disabilities than the other groups of disabilities such as mental and behavioural disabilities.

Literature showed that faculty members depend on administration and disability service staff for information regarding the availability of support services which has been provided for students with disabilities in higher education institutions (Burgstahler, 2002). This study mainly stresses the importance of the disability coordinators or other staff members who support faculty members by providing information about the available services, provision of accommodations for students with disabilities. In addition, the findings revealed that faculty

members expressed their concern about the challenges faced by students with disabilities due to architectural barriers, inaccessible buildings, classrooms, labs and other facilities. It has also been found that those faculty members who are not willing to accommodate students with disabilities in inclusive education settings, express that their problem is due to lack of time to look after the needs of these students.

In summary, it understood that the teachers' attitude is one of the most important variables in the education of these students in higher education institutions. Most of these studies focused on the factors which have been found to influence faculty's attitude include age, academic discipline, experience of teaching students with disabilities, years of teaching experience and professional rank. Further, it is also clear that most of the teachers prefer to accommodate students with physical impairments than students with behavioural or psychological problems. Since general educators' willingness to include students with disabilities in regular education classes is critical to the success of inclusion, a number of studies have stressed the importance of understanding teachers' attitudes, and their awareness about the needs and problems of students with disabilities in higher education.

After reviewing some studies related to the teachers' attitude, let us now examine some studies on the attitude of peer groups or students without disabilities, and their awareness about the needs of students with disabilities in higher educational institutions.

Peer Group

The quality of life of students with disabilities primarily depends of the peer acceptance. Low acceptance of peer group deprives students with disabilities of _opportunities to learn normal, adaptive modes of social conduct and social cognition and undermines academic progress as well' (Parker and Asher, 1987). A research study was conducted by Perry, et al (2008) to identify the factors which influence attitudes such as gender, age, and disability status, area of specialisation, university programme accreditation status and frequency of interaction with persons with disabilities. The results of the study showed that females had the higher ATDP scores, with a mean score of 119.4, as compared to 111.6 for males. It was also found that factors such as the area of specialization, age, and program accreditation status were statistically significant. The researcher used frequency of interaction (daily, weekly, monthly, and less than six times a year) was significant, using an analysis of variance. The results reveal that the participants those who interacted with persons with disabilities on weekly basis had the highest mean ATDP score (121.33), followed by daily interaction with a mean

ATDP score of 117.90, monthly interaction with a mean ATDP scores of 112.34, and the lowest mean ATDP score 109.93. It was also found that 174 respondents indicated that they had positive interaction ranging from ‘somewhat positive’ to ‘very positive’, while only three respondents had mostly negative interactions with persons with disabilities.

To teach students with special needs, teachers need more experience and knowledge about their special needs and problems. The results of peer groups in Chen, Lau and Jin (2006) indicated that they believed that teachers might not be capable of teaching and looking after the needs of all students because some students with disabilities needed some extra time which would lead to serious management problems for teachers. It was observed that 90% of students from both locations strongly agreed that, in order to teach students with disabilities, the teachers needed more academic preparation for inclusion. The results also reveal that students from both the locations supported the philosophy of inclusive education but they also expressed their concerns about it. The major concerns included: performance of students with and without disabilities in an inclusive setting, discrimination against students with disabilities, worry about lack of professional knowledge, and government support and other safety issues.

In addition to peer understanding about their teachers’ skills in teaching their peers with disabilities, it is important to know the support they provide to peers with disabilities in their respective education institutions. For instance, a study conducted by Copeland et al (2004) attempted to explore the students’ perspectives on their support to the peers with disabilities regarding increasing access to general education. For this study, 6 focus group discussions (one in each school) in 6 high schools in a large metropolitan school district were conducted. For this study, 32 students (78 per cent female and 28 per cent male) were selected to collect data. The focus group size ranged from 2 to 11 participants and the participants’ age from 16 to 18 years. This study collected data on perceptions of students towards limitations faced by students with disabilities in general education, their understanding about the needs and problems of students with disabilities, their interactions, and friendships, benefits of peer support programme and their recommendations for the improvement of their educational experiences in general education. The results showed that participants from all 6 focus group discussions indicated that till attending the peer support programme, they were not aware of the skills needed to communicate with students with limited verbal skills or to support students with challenging behaviour. The respondents reported that peer support programme helped them understand more about students with disabilities and improved their attitudes

towards them. They also reported that they were more willing to interact with students with disabilities after attending this programme. Overall, from the findings of this study, it can be concluded that peer support programme helped the respondents of the study to effectively address the challenges related to the inclusion of students with disabilities and promoted their access to general education.

Cook and Semmel (1999) examined the peer acceptance of students with disabilities in general education based on severity of disability. For this study, data was collected from 285 students. There were 44 students with disabilities in their classrooms, out of which 29 were categorised as having mild disability (MD) and 15 having severe disability (SD). In this study, students with mild disabilities were identified as having specific learning disabilities, severe emotional disturbances and mental retardation whereas students with severe disability were identified as having mental retardation, multiple handicaps, severe orthopedic impairment, severe emotional disturbance and autism. In this study, multivariate analysis of variance (MANCOVA) and analysis of variance were used to measure the peer acceptance. The results showed that students with severe disabilities had more peer acceptance than the students with mild disabilities. It was found that in the absence of interventions, severity of disability might have a positive impact on peer acceptance, particularly for students with severe disabilities. The research in this study pointed out that, although students with severe disabilities were better accepted than students with mild disabilities, further investigation is required to study the quality of their acceptance. It was also reported that non-disabled students were too overprotective or helpful to their peers with severe disabilities. In addition, these results indicated that students with disabilities received significantly higher peer nurturance ratings from their peer group than did students with mild disabilities.

Although students accepted their peers with disabilities, the level of support and acceptance is based on the level of interaction and contact the students had with someone with a disability, and the amount of social anxiety the student had. For Budisch (2004), data was collected from a sample of 163 undergraduate students (52 males and 111 females) at Midwestern University. The Chedoke-McMaster Attitudes towards Children with Handicaps (CATCH) scale was used to measure the students' attitudes in this study. The findings revealed that the more contact a student had with peers with disabilities, the more positive their attitudes towards those with disabilities. It was also found that students who had low social anxiety had significantly higher scores on the CATCH (M low social anxiety = 87.89, SD = 7.73), indicating more positive attitudes than students with high social anxiety (M high social

anxiety = 83.00, SD = 8.64) $F(3, 148) = 9.72, p < .01$. It was also found that the more a student understands the issues of persons with disabilities, the more positive his/her attitudes will be towards people with disabilities. It was also found that there is no significant relationship between the impact of a diversity course and improvement in the student's attitudes towards persons with disabilities. The findings of the study suggest that a student/person may need more than a diversity course to understand the issues associated with persons with disabilities.

It is understood that, in addition to teacher teachers' attitudes and experiences, peer groups attitudes their awareness about the needs of students with disabilities are important factors to understand the educational experiences of students with disabilities in higher education. In this section, studies mainly focused on peer group interaction, their understanding and awareness about their peers' special needs. Further, these findings suggested that those who had more contact with peers with disability made them more aware and enabled them to take on a more sympathetic position towards those with disabilities. Further, it can also be suggested that friendship and social interaction between these students and those without disabilities help both of them to participate in academic and social activities. Therefore, university management should encourage cultural and social programmes which make these students involve together and build their social and personal relationships.

Policy Interventions and Support Services provided to Students with Disabilities in Higher Education Institutions

Internationally, provision for students with disability is gaining some ground. Although it is far from ideal, legislation has been in place for institutions to do whatever is reasonable 'to respond to student's special needs (Shevlin *et. al.*, 2004). Similarly, the study by Howell (2005) was designed to generate knowledge about the different ways in which public higher education institutions work to provide access for disabled students. The investigation probed institutions 'familiarity with policies, and examined instances of the creation and resources of specific structures to deal with the special needs of disabled students. The results of the study highlighted the need to start a process of development of indicators to monitor access and equity in relation to disability. The research findings suggested a number of areas for reflection and intervention. First and foremost, there is a need to develop internal systems to

identify students with disabilities and their profiles to understand their needs and to monitor the extent to which these needs are met at individual institutions. The development of support mechanisms for students with disabilities and academic staff in order to facilitate teaching and learning process seems to be the second area for institutional intervention. It suggested that time resources and careful reflection are required for analysis of the specific policies and the establishment of adequate monitoring systems with a view to evaluate that the impact and to better understand existing practices, including in this process the voices of students with disabilities themselves.

Even though most of the higher educational institutions now have institutional policies for students with disabilities, the ways in which policy implementation was monitored varied greatly between institutions. For instance, a qualitative study by Hall (1998) examined the experiences of these students at a variety of Scottish universities and colleges. This study was intended to provide an insight into what it is like to be students with additional needs and to develop a list of key issues for policy makers. In the first phase of the study, data collected from 27 disability co-coordinators by using survey at selected institutions to sought information on institutional definitions of students with disabilities, their enrollment numbers and provisions for catering to students with disabilities and monitoring systems used by the institutions method. In the second phase, 12 students with disabilities were interviewed about their lives, and experiences at higher education institutions. The findings showed that various forms of advice, guidance and support are now available to these students but more could be done to make people aware of this. The students' academic experience varied greatly between institutions and departments. Most of the respondents reported that they are only looking for equal opportunities. The data revealed that there is still a great deal of uncertainty about disclosing disabilities in certain circumstances. The results showed that promoting non-academic aspects of life such as encouraging sport and cultural programmes in higher education are also important in ensuring that students are successful.

UNESCO (1999) conducted a survey which sought to present information on provision for students with disabilities in universities in the different UNESCO regions. A questionnaire was sent to 50 universities selected on the basis of information provided by UNESCO regional officers and other informed sources. The purpose of the study was to target universities which are likely to have developed some services for these students, rather than to establish a representative picture on the basis of random sample. Responses were received

from 35 universities in time for this analysis. The survey gathered data on availability of services such as support to these students, financial support, social activities, environment and academic support. The study found that some existing higher education institutions were already providing support services for a range of students with disabilities; others were looking into ways of creating more supportive learning environment within their institutions. Universities were also varying in terms of their financial and human resources to respond to this challenge. The researcher suggested that the first step to equal access for all students is the will to address the diversity of needs of students and create a supportive environment to meet their needs. Similarly, a study by Riddell, Tinklin and Wilson, (2004) has identified five key issues for higher education institutions to address:

- (a) Pre-orientation support,
- (b) The commitment of the staff to facilitate a barrier-free curriculum,
- (c) Consultation with and empowerment of students with disabilities views, and
- (d) a commitment on the part of higher education institutions to develop support services for students and planning for their personal development.

These students should be provided with all type of support services for active participation. In Weiss *et al*, (1997) study supports services were classified into seven categories: counselling services, equipment, campus environment, student-centred supports, developmental labs, programme or course flexibility, and unique programmes. It conducted a survey of services and supports provided to students with disabilities in Florida at 28 community colleges and 39 area vocational technical centres. The results indicates that Area vocational-technical centres, often operating with more limited budgets and on smaller, older campuses, tend to offer more counselling supports and special purpose programmes. Community colleges, on the other hand, tend to offer greater access to developmental and learning labs and more accessible campus environments. Both seem to be fairly equal in regard to equipment supports and student centred accommodations. The findings also showed that all schools surveyed offered at least one support in each of the seven areas. In general, community colleges offered a greater variety of supports and modifications for students with disabilities than did vocational-technical centres. This study indicates that post-secondary institutions are continuing to move toward providing necessary individualised support services to students with disabilities. After students with disabilities learn to take full advantage of these support services, they will increase their chances of receiving the training and education needed to be competitive in the job market.

To conclude, it is understood from these findings that most of the higher education institutions have formulated disability policies and established disabled support services for students with disabilities. But results of the study showed that still there is much gap between policy and practice. It also showed that students with disabilities are struggling to receive ad hoc support in higher education institutions. Therefore, higher education institutions and staff supporting these students need to consider several factors if they aim to provide equal educational opportunities to all students. Thus, it can be suggested that those who work towards providing equal access to these students in higher education institutions should have commitment from the policy to practice level regarding the desire to adopt flexible approaches to all aspects of university life.

Out of the estimated 40 million children aged 4 – 16 years with physical and mental impairments, 90 per cent are out of school in India. In terms of enrolment in higher education, less than 1 per cent of students in India had enrolled in higher education in 1950, whereas today it is close to 10 per cent. Nevertheless, this is much less compared with the figures in many other countries around the world. This gives an indication that we need to increase access to higher education for these students (Thorat, 2006). The Planning Commission, in the XIth Plan, has set a target of 15 per cent by 2011-12. This can be done in two ways, firstly by expanding the intake capacity and infrastructure of the existing universities and colleges and, secondly, by overcoming various barriers that create hindrances in their way to higher education (Wiseman, Emry and Morgan, 1988). This section examines the studies dealing with research on students with disabilities in higher education institutions in India.

In India, students with disabilities have a significant lower level of academic achievements in secondary school than students without disabilities. This is mainly due to factors like lack of proper accessibility, awareness, learning and financial resources, and parents and social attitudes. However, Halder (2010) tried to understand the nature of dropout and stagnation in education of women with disability and various constraints faced by them in their way towards higher education. For this study, the author collected data from 100 challenged women by using personal interviews. In this study, it was found that only 24 per cent of the women with disabilities are interested in pursuing higher education. Respondents in this study are on an average older than their peers without disabilities. This is mainly due to late entry into school or college and can often take longer to complete their education. The

researcher also observed that majority of the respondents was first generation learners and lived in rural or semi-urban areas. The author also finds that most parents are not aware of the facilities, provisions, and scholarships provided by different government and non-government agencies for students with disabilities. In some cases, though they are aware of the whole process, it seemed to be too burdensome, very difficult and time consuming for parents as well as their wards.

It was also observed that due to shortage of money, some parents are not keen to carry on with the general education. Another important finding of the study was that even though women with disabilities face mobility barriers as they have to move from one class to another and also from one floor to another for each class, the teachers are unable to help students with disabilities in such restricted environments where they have to manage with many other students. As a result, many of the students are forced to drop out of the college. The author also suggested that students with disabilities need a career counselor at every stage to guide them regarding their career planning, job opportunities, government schemes and referral services for placement officers. Halder (2010) also maintained that translating the policies and training materials in Indian languages in print and non-print media could make the people aware of the policies and provisions.

National Centre for Promotion of Employment for Disabled People (NCPEDP, 2004) conducted a survey on the education scenario of students with disabilities in India. As part of the study, 322 universities in India were sent the research questionnaire. A total of 119 (36.9 per cent) universities responded. In the 119 universities, the number of students with disabilities enrolled was 1,635. This accounts to a meager share of the total student strength. In principle, as per the reservation policy, 3 per cent of the seats in educational institutions should be reserved for students with disabilities. The research findings presented that only 0.1 per cent of the total strength are students with disabilities. This indicated the failure of the state in enforcing the rules vis-à-vis students with disabilities. In all 119 universities, 1,203 students with orthopaedic impairments, 311 students with visual impairments, 38 students with hearing impairment and 22 students with mental disability were enrolled.

Another important finding was that out of 119 universities, only seven universities categorically mentioned that they do not admit students with disability, conveniently ignoring the law. Out of the 119 respondent universities, 47 of them mentioned that they gave

scholarships to students with disabilities, and 29 universities gave financial assistance. It was clear from the minimal number of students with disabilities in these universities that these facilities were being provided in general for all students, and students with disabilities could get them by sheer chance. For example, though 73 universities mentioned that they provided hostel facility for students with disabilities, it was unlikely that any hostel had even a single toilet/ room/ mess area accessible for a wheelchair user. And it is the lack of proper hostels and financial constraints that greatly limit the choices students with disabilities have for higher education. Only 50 per cent of the 119 universities reported being aware of the UGC schemes and only 11 (9 per cent) universities had received UGC grant under the UGC scheme (HEPSN). About 80 per cent of the respondent institutions reported that students with disabilities were easily able to reach the classrooms, offices, toilets, auditorium, sports area, library, canteen, laboratories and the hostels. This study concluded that most of the institutions obviously did not understand the issue of access and were under the impression that all the places were accessible for all present and future students with disabilities (NCPEDP, 2004).

Many of the negative experiences cited by students were not related specifically to impairment, but were more of general concern. For instance, having sufficient time with their personal tutor, availability of books in the library, or feeling under pressure to become part of a student 'dirking culture' in order to feel included'. In relation to the students' impairment, negative experiences tended to result from the absence of, or delay in receiving support: for example, some students felt that the tutors were not aware of, or not acting on reasonable adjustments; some other students reported a delay in funding for identified resources (Mohan and Pazhani, 2008). A particularly notable issue raised was the delay in receiving their Disabled Allowance. Once support was in place, this tended to have a substantial positive impact on their experience of higher education. However, it was not always the support itself that was of prime importance.

Gaps identified in Research on Students with Disabilities in Higher Education

The analysis of studies clearly showed that these students in higher education institutions face challenges not only in terms of gaining physical access to buildings, but also in relation to much wider access issues concerning the teaching and learning, availability of support

services including accessibility to classrooms, learning resources in the campuses, and also perceptions of teachers, peer groups and their own attitudes towards disability. In spite of growing interest in higher education as an important area in the distribution of life chance very little is known about the social and educational experiences of students with disabilities and the ways in which higher education institutions act as sites which reproduce existing inequalities. Also, little is known about the interaction of policies focusing on these students in higher education institutions and those promoting widening access and inclusion. This research seeks to address these gaps in the existing literature.

In the absence of authentic empirical probe, it is proposed to undertake the study in the state of Jammu and Kashmir. There is a growing need now to focus on these issues. With this study, the researcher aims to provide a framework for policy makers forwards enabling the students with disabilities to receive a better education by accessing available resources, making friendly environment, etc., to achieve good results at higher education.

Chapter III

Research Methodology

The disabled people are often omitted from many social, educational, financial and cultural opportunities and are among the underprivileged and most marginalized groups universally (Groce, 2004). Although education is exceptionally significant for all individuals in spite of one's age, sex, ethnicity, financial standing as well as one's ability or disability, disabled persons are usually perceived as underprivileged groups in this area (Block, 1992). Therefore, they are in a situation of missing several social, financial and political benefits together with the right to access good and quality education (Barnes et al., 2010).

Rationale of the Study

During the last three decades, there has been a movement from segregated education through integration to a point where inclusive education is central to education of children and youth with special needs (Hegarty, 2001). Several recent United Nations policies have proclaimed that the rights of all persons are to be valued equally and provided with equal educational opportunities in mainstream institutions (Avramidis, Bayliss, and Burden (2000). It includes the UN Convention on the Rights of the Child (1989), the UN Standard Rules for the Equalization of Opportunities for Persons with Disabilities (1993), and the UNESCO Salamanca Statement (1994). All these policies have brought about significant changes in the provision of more educational opportunities to children with disabilities in regular schools as well as rise in the number of enrolment of students with disabilities in higher education institutions. In order to assist these students, the University Grants Commission has already attempted to facilitate better accessibility of higher education to achieve better results by giving special grants. But not all the universities have taken the initiative or responsibility to create an enabling environment for students with disabilities. The reasons are: lack of coordination within the university management, inadequate financial support, and ignorance about the policies and needs of students with disabilities.

Higher education was identified as a useful tool for development in this context. Given the broad nature of the research problem, any attempt at dealing with it would require the delineation of relevant issues, exploring which would help in addressing the research problem. Further review of literature shows that a majority of students with disabilities indicated that they had encountered barriers to their education, including lack of understanding and cooperation from administrators, faculty, staff and other students; lack of adaptive aids and other accommodations; and inaccessibility of buildings and grounds (West *et al* (1993) and Adrienne (2006). Apart from mandatory provisions, students with disabilities need positive socio-cultural, economic and infrastructural conditions within the educational institutions. The Persons with Disabilities Act, 1995, has stated that higher education institutions must make provisions so that disabled persons would have access to education at all levels. According to University Grants Commission (UGC), 6 per cent of youth population is enrolled in Indian universities and colleges.

To summarize, the rationale of the present study is based upon the following issues:

- 1) The researcher could hardly find relevant (only one found) studies on this subject from the Kashmir context.
- 2) Thus this study will throw more light to our understanding of the situation in the Kashmir context.
- 3) The present study is an attempt to explore the problem of students with disabilities, their experiences.
- 4) It is also important to explore the social and educational experiences of students with disability about the availability of access to higher education.
- 5) Also how far present policies have helped the students with disability to access their higher education.

Conceptual Framework

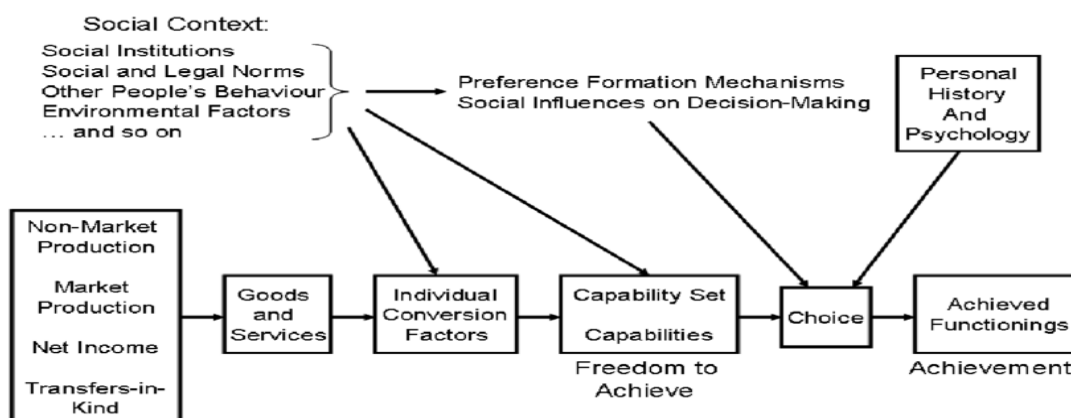
The researcher believes that the capability approach has the prospective to be a comprehensive framework of thought on issues and conditions which are related to students with disabilities in higher education by its provision of various useful implications. The capability approach offers a substitute space for social justice evaluation related to the notions of capabilities and freedom of choice. It argues that assessment of well-being,

poverty, inequality and justice, and the design of social policies and institutions should focus mainly on the individual's capabilities to function.

A functioning is an achievement, whereas a capability is the ability to achieve. Functioning's are, in a sense, more directly related to living conditions, since they are different aspects of living conditions. Capabilities, in contrast, are notions of freedom, in the positive sense: what real opportunities you have regarding the life you may lead (Sen, 1987: 36).

The use of capability approach to the study makes a clear difference between means, functioning and capabilities, indicating that capabilities are the real space of concern for social justice (Nussbaum, 2000; Sen 1992). The means are composed of resources and endowments which are helpful to the achievement of additional ends. It includes individual resources such as education, health, income, and collective resources such as healthcare, public infrastructure and the education system etc. People use these inputs influence in order to achieve fundamentally valuable ends, understood as functioning's such as beings 'and doings'(Roche, 2009). However, the conversion of these inputs into functioning is affected by individual (physical condition, gender, reading skills), social (public policies, social or religious norms, gender roles, societal hierarchies, power relations) and environmental factors (climate, infrastructure, institutions, public goods).

The capability set is represented by the potential set of functioning's from which people can choose one particular set in relation to their availability of resources and conversion factors. This is the real opportunity set available to the people from which they can choose. Based on their priorities and requirements, people choose a particular set of functioning, which is considered to embrace a particular way of life. The outcome is that a person enjoys the actual set of achieved functioning, which, in turn, include different beings 'and doings', from educational attainment to self-respect. The underlying characteristic of this approach is making a choice at any given time which obviously influences a person's set of opportunities in future. Despite paying attention to inputs and outcomes, this approach considers that for evaluation purposes; the focus should be on actual capabilities and substantive freedoms (Roche, 2009). This is in accordance with the true sense of 'entitlements': the freedom to achieve within the agency space.



Source: Adapted from Robeyns, 2005: 98

Capability Approach

Therefore, to understand the education experiences of these students, it is not enough to know only the availability of services and resources but it is also required to understand them personally and the circumstances in which they live. According to this approach, the functioning of a student with disabilities are the set of things that he/she actually is and does in life, whereas the capability of that student is the alternative combination of functioning what she/he could achieve and from which he could choose. Thus, capability is closely related to the idea of opportunity. The key difference of the capability approach from the human rights and the ICF is that it reflects other personal characteristics rather than impairments in its analysis. In addition, it considers resources as an important factor resulting in the actual potential and opportunity of disabled people (Mitra, 2003).

Another important feature of this approach is that it aims at the potential of a person to realize a variety of functioning or aspirations as opposed to expectations foisted upon them by society. This is against Nussbaum's capability approach in which she developed a list of capabilities. Although the revision of ICIDH2 has been developed to understand disability, it cannot reflect other social and environmental factors and issues in its framework (Ustun *et al*, 2003). Similarly, the Human Rights Based Approach was also criticized mainly because it

paid little attention to the social background, political and historical conditions of the disabled people and other deprived sections (Batliwala, 2007). But, on the other hand, the capability approach is able to reflect all these factors in single framework.

Using Capability Approach for Conceptual Framework of the Study

The present study derives the theoretical concepts drawn from the capability approach. In this approach the concepts of functioning and capabilities allow for a comprehensive understanding of the entire spectrum of educational and social experiences of students with disabilities. By using capability approach for this study, the situation of students with disabilities is better understood with the combination of various factors. These factors include:

- 1) The nature of students 'impairment and their other personal characteristics, for example, age, gender, educational and occupational aspirations, self-determination and advocacy skills, etc.
- 2) The availability of support services including academic, financial, etc., and the social and environment factors.

For instance, if a student with visual impairment is provided with assistive devices (commodity) but she/he does not know how to use these devices (personal factors), or, if the academic buildings or computer centres are not accessible or the university administration holds a negative attitude or are not aware of the special needs of these students (social and environment factors), the functioning of these students in higher education may not achieved.

These students in higher education institutions face various challenges and barriers not only in relation to impairment, but also with reference to other issues just as their students do. Challenges related to impairment may not be necessarily be major problems to them. Other issues such as discrimination, lack of self-advocacy skills due to one's poverty, ethnicity, gender or social and economic background may have more impact on the person. Regardless of impairments, these students are not free from the cultures and the environment of their higher education institutions as factors such as policies, support services; social and environment restrictions play a significant role.

The framework has been derived from theoretical perspective, literature review, and depicts the lines of enquiry for this research. Despite the existence of many policy provisions for students with disabilities, the students have been facing problems in receiving higher education. In order to understand what are the favourable and hindering factors affecting the educational experiences of these students in higher education institutions, the researcher collected data from different stakeholders including teachers, students, and university management. The characteristics of these stakeholders influence the educational experiences of these students directly or indirectly. If the favourable factors are less than the hindering factors, it leads to a negative experience and vice versa. Based on their experiences, as well as the perceptions of the other stakeholders, the researcher will draw out the favourable and the hindering factors which influence the creation of inclusive environment in higher education institutions. The framework below helps to understand the positive and negative factors as perceived by the different stakeholders, which enable the students with disabilities to have better educational experiences.

Students with disabilities are the main stakeholder in this study. The characteristics of students themselves would affect their educational experiences. An attempt is made here to present some aspects of their academic life. Achieving success in higher education institutions for students with disabilities not only requires an ability to manage academic challenges but also administer challenges faced by their impairment. To manage the academic and social demands of higher education at the university level, students need to understand their disabilities, develop effective coping strategies to manage them, accept their own strengths and limitations, be aware about the policies and facilities available as also the procedures to access them when needed, and support services available on and off the campus.

Similarly, the characteristics of teachers and students also have an impact on them educational experiences of students with disabilities to a large extent. Research studies conducted by Wilczenski, (1995); Wolman *et al*, (2004); Kraska (2003); and Taggart and McMulln (2007) suggest that knowledge, assumptions, beliefs and attitudes of teachers influence their teaching practices, and their interaction with students with disabilities, in turn, influences the educational experiences of these students. There have been hardly any studies which have focused on the attitudes and experiences of students towards students with disabilities in higher education institutions in the Indian context.

Another important stakeholder of this study is the university. Each university has its own specific characteristics, which include awareness of the needs of these students and their commitment to provision of support services, financial resources, and establishment of the disability cell and also appointment of a coordinator for the cell. The primary challenge faced by higher education institutions at present is to actively put procedures in place for facilitating the admission of students with disabilities who have historically been marginalised at this level as also providing them with opportunities to receive the education and training required to enter a variety of job markets. Alongside this is the challenge to develop the capacity of the institution to address special needs and barriers to learning and development. This includes not only learners with disabilities, but also all learners. This requires that adequate enabling mechanisms be put in place to ensure that appropriate curriculum and institutional transformation occurs, and that additional supports are provided where needed.

Characteristics of Students with disability
Type of disability
Socio-economic background
Gender, Stigma, attitudes, Special Needs
Special accessibility & arrangement (Exams & scribes, special evaluation)

Characteristics of higher education Institutions
Providing facilities, Disability Units/cells
Implementation of policies & Action plans

Characteristics of fellow students
Interaction, Participation, Relations, Social networks

Characteristics of teachers
Providing learning resources
Awareness of special needs
Attitudes, Cooperation

Hampering factors
No support from Administration
Severity of disability
Lack of friendly environment & accessibility
Financial & learning resources
Negative attitudes
Lack of training (computers, software's)
Implementing Policies

Favourable factors
Disability cells, Learning Resources, Support services
Positive attitudes & relationships, Academic support
Self-advocacy
Extra-curricular activities

Positive experience
Easy accessibility
Academic advancements
Independent life (with com.Assistance)
Social exposure

Negative experiences
Facing problems in accessing facilities (Buildings, library, toilets), Dependent life (On friends), under utilization of resources, (Scholarships, reader allowances) and funds

OUTCOME
Policies & facilities for meeting the Higher Educational Needs of Students with Disabilities



Using Capability Approach for Conceptual Framework of the study

An exploratory study by Riddell, Tinklin and Wilson (2004) shows that access to higher education by disabled students is part of policy statements related to a number of areas including admissions, estates and buildings and also in some strategic plans. However, student case studies have revealed gaps between policy and practice and have showed that significant barriers, which hinder the participation of disabled students in higher education, remain. Wilson concluded that support for individual students have remained largely within

the province of student support services, with an emphasis on providing these students support to get round institutional barriers rather than on more fundamental institutional changes to create enabling environments. The conceptual framework, in conjunction with the study objectives, guided the methodological considerations of this research.

Research questions

- 1) What are the social factors due to which student's with disability did not advance in their studies?
- 2) What are the barriers encountered by these students in higher education institutions?
- 3) What kind of strategies are the students using to cope their experiences in higher education institutions?
- 4) What are the factors affecting the attitudes of teachers and peers towards students with disabilities in the general educational setting at higher education level?

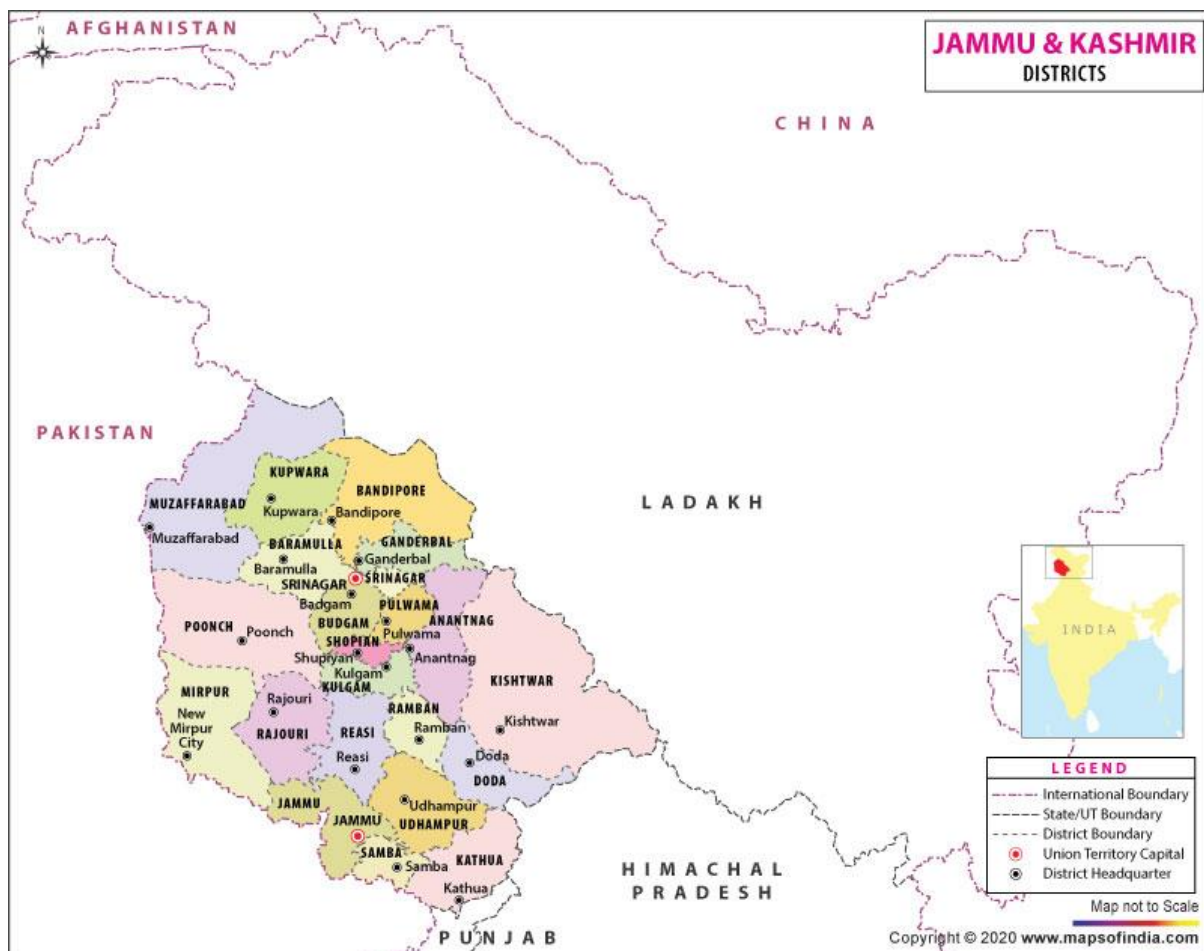
Objectives of the Study

- 1) To explore the social problems faced by the students with disability that hinders their access to higher education institutions of Jammu and Kashmir
- 2) To review how far the existing policies and schemes have helped to provide access to students with disabilities in higher education.
- 3) To analyse the encouraging and hindering factors in the process of formation of inclusive environment in higher education institutions.

Area of study

Jammu and Kashmir is a region administered by India as a union territory and consisting of the southern portion of the larger Kashmir region, which has been the subject of a dispute between India and Pakistan since 1947 and between India and China since 1962. The Line of Control separates Jammu and Kashmir from the Pakistani-administered territories of Azad Kashmir and Gilgit-Baltistan in the west and north. It lies to the north of the Indian states of Himachal Pradesh and Punjab and to the west of Ladakh, which is also subject to the dispute as a part of Kashmir, and administered by India as a union territory. The union territory of Jammu and Kashmir consists of two divisions: Jammu Division and Kashmir

Division, and is further divided into 20 districts. Jammu and Kashmir's economy is primarily services-based and agriculture-oriented. The gross domestic product of Jammu and Kashmir is estimated at ₹1.76 lakh crore (US\$23 billion) in 2020–21. According to the 2011 census, literacy rate in Jammu and Kashmir was 67.17%, male literacy was 75%, while female literacy was at 56.43%.



The scenario of the disabled population in Jammu and Kashmir registers a distressing picture. The total dis-abled population of the state of Jammu Kashmir was 3,02,670 lakhs in 2001 of which visually impaired constitute 2.8 lakh followed by the physically handicapped (0.38 lakhs), disability by speech (0.17 lakhs) and hear-ing disability (0.13 lakhs). Besides, a substantial number of 24,879 individuals were estimated as mentally re-traded in Jammu and Kashmir. There has been an in-crease in disabilities in the state according to Census 2011; the total disabled have risen to 3, 61,153 with an increase of more than fifty thousand disabled persons in the state. Out of which disable person in hearing are (20.5 per cent), seeing (18.3 per cent), speech (5.1 per cent), movement (16.0 per cent), mentally retarded (4.6 per cent),

mentally ill (4.3 per cent), other disabilities (18.5 per cent), and Multiple Disability (12.3 per cent) (Census of India 2001 and 2011).

Research Design

The present study is exploratory in nature. To answer the research questions posed in this study, the researcher used a mixed method approach which is a procedure for collecting, analysing and mixing or integrating both quantitative and qualitative data at different stages of the research process within a single study. The combination of the two methods provides the researcher with multiple ways of looking at a complex problem. On one hand, the quantitative method allows for deductive thinking, scientific testing of hypothesis, standardised data collection from a large number of respondents and statistical analysis. On the other hand, the qualitative method puts emphasis on inductive thinking, an exploration of complex issues in depth and breadth, building of models and theory, using descriptive materials from different types of data (e.g. in-depth interviews and focus groups) and analysis.

The main rationale for mixing both types of data in the present study was that neither quantitative nor qualitative methods are sufficient by themselves to capture the trends and details of situations such as the factors which facilitate or hinder the educational advancement of students with disabilities in higher educational institutions in Jammu and Kashmir . Quantitative and qualitative methods complement each other and provide a more complete picture of the research problem. When used in combination, quantitative and qualitative methods, multiple methods, or triangulation, reflect an attempt to secure an in-depth understanding of the phenomenon. Triangulation is not a tool or a strategy of validation, but is an alternative to validation (Fielding and Fielding, 1986). Using multiple methods, empirical findings, perspectives and observers in a single study is best understood as a strategy that adds breadth and depth to any investigation (Flick, 1992)

Data Source and Methods

For this study, data was collected by using both qualitative and quantitative techniques such as in-depth interviews, telephonic interviews. For telephonic interviews a questioner was framed. The *first section* of the questionnaire focused on understanding of the concept of

disability & awareness about the policies and its implementation for educational access. The *second section* focused on provision of support services to students with disabilities. The *third section* focused on the facilitating and hindering factors affecting higher education institutions to support students with disabilities. The *final section* focused on the implication of conflict over the education of disable students.

Similarly, *in-depth-interviews* were also conducted with students with disabilities. The interviews were conducted with the help of semi-structured in-depth interview schedules. The *first section* here presents the personal profile of the respondents, and their family and educational backgrounds. The *second section* discusses their experiences about being a part of the university system, the barriers they have encountered and the support services provided to them by the university. The *third section* analyses the manner in which these students manage their life at the university. Participants were recruited through following inclusion criteria:

1. Having any disability
2. Currently studying at higher education level
3. Residents of Kashmir
4. Ready to participate in the study

Sampling Strategy

For selecting the collages & universities, the researcher used purposive sampling. The criteria for selecting the universities were based on inclusion and exclusion criterion. The researcher selected one collage and one university of Jammu and Kashmir. The researcher used purposive sampling to select the students with disability from college and university. The criteria for selecting the students with disability were based on Snow ball sampling. Also it was also taken into consideration whether the students with disabilities is in the current academic year in their respective universities and colleges.

Data Collection`

Data was gathered through interviewing and observation guided by the research objectives. The data was collected in between December 2021 and February 2022. Consistent with the qualitative content analysis approach, this research then performed qualitative content

analysis using the English translated interviews, in order to identify themes that emerged from collective perceptions and experiences shared by the participants during the key informant interviews. Reading all of the transcripts independently and then reviewing each of the interviews. The review of the content of the interviews resulted in the development of a large set of overarching concepts. Consolidated and arranged these concepts into codes. Once all the codes were generated within the interview data, this research reviewed the codes and discussed any discrepancies and the extent to which the codes were related to each other. Once the coding process was completed, this research then on the bases of codes, decided on the main themes that were related to the guiding research objectives. The identified themes were based on collective perceptions and experiences shared by the participants. The researcher collected data from students with disabilities from each university To get the diverse results, the researcher collected data of respondents by using purposive and random sampling

A total of 22 participants, between the ages 20 and 35 years, participated in this study, falling under only 2 to 3 types of disabilities. Few were physically impaired and few were having vision impairment. Based on the analysis from this study, major themes were emerged.

Limitations of the Study

The researcher collected data from one collage & one university which have diverse characteristics. The nature of these institutes might have influenced the findings. These institutes have taken the initiative to provide equal educational opportunities for all their students, including students with disabilities. Their acceptance and provision of support services may also have affected these findings. Likewise, the characteristics of others stakeholders may also have affected the findings because other than policies and support services students requires self-advocacy skills, social life and emotional and social support from teachers and students. Therefore, the results of the study are not intended to be generalised for other higher education institutions.

In addition, several limitations must be considered when reviewing the results of the study. These are:

1. Preferably, it would have been correct to study a sample covering all the universities and different types of students with disabilities in Jammu & Kashmir. But, considering the time and non-availability of different types of students with

disabilities other than orthopedically and visually impaired students to carry out a complete account of all such students and then not collecting data from other stakeholders, there would have been a problem of limitation and therefore the universe has to be restricted to few higher education institutions.

2. The researcher touched the social aspects such as a student's social life and relations, participation in social activities, their own attitudes and other people attitudes towards them. But there is still need to focus on issues such as gender, body structure, stigma, cultural, and psychological aspects. The intention of the whole study is to explore the availability of support services and its impact on social and educational experiences of the students.

Chapter IV

Analysis of Data

The number of students with disabilities attending higher education institutions has improved dramatically with the development of disability laws and provisions. These laws and provisions assist higher education institutions to eliminate obstacles that hamper students with disabilities from participating in higher education. Despite these developments, higher education of students with disabilities may be unsettled due to the effects of their disability, which may harm or delay social and emotional development at a time when major changes typically occur. Although all students go through this process while pursuing higher education, students with disabilities may experience more difficulty conveying the changing role requirements. In India, hardly any research has been carried out to understand the educational experiences of students with disabilities in higher education institutions. An important goal of this chapter is to provide an intense description of the inner and outer social and educational experiences of students with disabilities in higher education institutions in Jammu and Kashmir. The researcher has characterized and analysed the narratives of students with disabilities as associated to their social and educational experiences, while studying at the university & collages. Findings address the main purpose of the inquiry which seeks to comprehend the factors affecting the educational development of students with disabilities in higher education institutions.

Selection and Description of Students with Disabilities

For this study, the researcher has collected data from one university & one collage in two different parts of Jammu and Kashmir (see methodology chapter). These two institutions of higher education have different characteristics such as:

- a) Located in two different regions (Pulwama & Srinagar)

- b) One is a State university and the other is a District collage. Both have a disability cell as well as a coordinator to look after the needs of students with disabilities in their respective institutions.
- c) Finally, the collage has higher total enrolment and thus has greater number of students with disabilities, as compared to university.

After selecting the institution of higher education, the researcher interviewed all students with disabilities from each institution by using snowball sampling. It was very difficult to get details about students with disabilities due to lack of data base regarding the number of students with disabilities enrolled. That is why the researcher used snowball sampling. In this method, the students with disabilities with contact had already been made used their social networks to refer the researcher to other students who could potentially participate in or contribute to the study. Students were interviewed with the help of semi-structured in-depth interview schedules. In all 22 students were included in this study (19 from collage and 3 from the State University)

Analysis of Students with Disabilities: Interview Findings

Analysis of students with disabilities Interview Findings were divided into 4 sections. The **first** section presents the personal profile of the respondents, their family and educational background. The **second** sections discuss the experiences of the respondents about being a part of the university system and the barriers they have encountered in accessing the higher education in Jammu & Kashmir. Section **third** analyses their perceptions on the support services provided to them by the institution of higher education.

Family & Educational Background of the Students with Disabilities

Apart from the social background, other details such as parental income, parental education and occupation, rural and urban background were also collected. This section provides a profile of the students' social origin and a brief analysis of relationship between social origin and access to higher education at the institution of higher education level.

Respondents Gender and Nature of Impairment

In India, literacy rates have shown a significant progress in the last two decades. But if we look at educational level of persons with disabilities, the picture is much more depressing. We may appreciate that education has much more meaning for a disabled person as it can, to

a great extent, reduce the impact of disability and improve his/her living conditions. In recent times, greater number of students with disabilities has chosen to attend institutions of higher education due to accessibility laws, legislation support, disability advocacy groups, and developments in technology. The below tale provides a brief description of the gender of respondents by nature of impairment.

Table 4.1: Students’ Nature of Impairment and Gender

Gender	Orthopaedic Impairments	Visual Impairments	Total
Male	11	6	17
Female	2	3	5
Total	13	9	22

Historically, a variety of factors, such as gender based inequality, social discrimination, or keeping girl child tied to domestic household tasks, have been found to be responsible for women or girls having poor literacy rates. The decrease in the number of enrolment of girls students with disabilities are due to many reasons. Negative attitudes towards girl’s education, as well as differential treatment, expectations and reinforcement, especially coupled with over protection of girls and under estimating their talents by their parents, may have more effect on the figures of enrolment of girls with disabilities than that of boys with disabilities. As shown in the tale were 17 male and 5 were female students. Therefore, we can conclude that less number of female students with disabilities manage to attend university level education.

Similarly, this also shows that 13 of the respondents were orthopedically impaired and 9 were visually impaired. Representation of orthopedically impaired students is higher than that of visually impaired students. The researcher could not find students with other type of impairments during data collection time. The fact was that some of the students actually didn’t want to disclose their disability. The researcher found that few students with disability did not disclose their nature of impairment at the time of admission. They wanted to be treated like any other student in the university. When the researcher asked them to be

respondents in this study, they did not agree to do so and simply stated that didn't have any major problems related to their impairments at university.

Similarly, when the gender of the students was related to nature of impairment wise, it was found that there was more number of male students with orthopedically and visual impairments. However, it was found that there was no significant difference between the gender and the nature of impairment. In summary, the data indicates that more male students have orthopaedic impairments and visual impairment.

Area of Habitation

Parents 'place of residence is responsible for the model of living and modern exposure to the society. It is true that there are rural and urban differences in the availability of educational institutions and their accessibility in India. Jammu & Kashmir is not an exception to this. The table indicates the representation of students from rural and urban backgrounds.

Table 4.2: Area of Habitation

Parents Place of Residence	Total
Rural	8
Urban	14
Total	22

Occupation and Income of the Household

The significance of occupation as a social background variable can hardly be exaggerated. Like education, the occupation of parents has also been examined in terms of the occupations of the father as well as the mother. In this study, the occupation of father has been divided into three categories, namely, agriculture (including manual labour); government service (including teaching, bank, and railways services); and private jobs (including teaching, shop keepers, finance, auto and taxi drivers). Similarly, family income constitutes a significant indicator of economic status. It has been found that respondents have different socio-

economic conditions. In this study, the income of the households was also taken into account with all types of earning received by the households collectively. Table provides a brief description of the income of the household by occupations of fathers.

Table 4.3: Occupations and Income of the Household

Occupation of fathers	< 50000	50000 – 100000	100000 +	Total
	17	5	-	22
Agriculture	6	3	-	9
Government jobs	2	2	1	5
Private jobs	4	2	2	8

Table displays the results of parents ‘occupation and income of the household. It shows that the more number of parents had, agricultural followed by private jobs and Government jobs. Similarly, when annual income of the father was looked at occupation wise, it was found that more the half (17) of the respondents ‘fathers income is less than rupees 50000, 5 of respondents fall in the group of Rs 50001-100000 per annum, and only none of the respondents father income is more than Rs 100000 per annum.

The above mentioned data reveals that majority of the students pursuing higher education in this study hails from households with an income of less than Rs 50,000 per annum. Most of the students fathers, engaged in relatively low ranking occupations, tends to be paid less, compared to the government jobs. Therefore, it can be concluded that those in government jobs earned more than the fathers who were farmers. Similarly, like parents ‘low occupational background, the majority of students came from families with a low economic family.

Barriers Encountered by Students with Disabilities in Higher

Education Institutions

In this section, the researcher tried to find out from the students their thoughts on their educational experiences and to know what were the barriers affecting their educational access and advancement in their universities. The respondent's narratives exhibited that many issues affected their active participation. The factors that emerged as themes from the interviews are classified into three broad categories. These are:

- a) Lack of Awareness
- b) Attitudinal Barriers
- c) Physical Barriers
- d) Poverty

a. Lack of Awareness

The Government initiatives cover a wide range of policy formulations, programs plans, execution of schemes and legal enactments related to persons with disabilities in country. While the zeal is appreciable and welcome for a long neglected section of society, but the implementation of the policy programs and various schemes for the person with disabilities both before and after the Persons with Disabilities Act 2016 have been characterized by ad hoc and sporadic efforts on part of the state. The persons with disabilities has usually been treated as a compartmentalized being, with different aspects of his/her existence coming under the purview of different wings of the State apparatus, with little or no coordination among themselves. The requirements for providing of aids/appliances, which are essential for the social, economic and vocational rehabilitation of persons with disabilities are inadequate. The persons with disabilities in Jammu and Kashmir are not fully getting benefit of these schemes to purchase aids/appliances because of lack of awareness, extra formalities and lack of professionals to train persons with disabilities on mobility aids. While interviewing the disable participants or even the abled participants it was clear that both of these were not having any knowledge about laws or policies which were there for the disabled people. While interviewing one of the participants he told that

“I had never ever in my whole life heard about any laws or any policy except government provide us thousand rupees which we get every month that is it nothing more than that”

When he was asked about any NGO which works in Kashmir for disables then he further adds

“I had never heard of any NGO or any “Tanzeem” had ever helped me”

There are number of rights, laws which has been established in order to provide the disabled people an atmosphere where they did not feel that they are different from the population but it is really sad to see that these people did not have any knowledge and awareness regarding these policies. State approach towards implementation of programs has varied from being neglect to complete dependence on nongovernment organizations for delivering different services in remote parts of the state, which has reached only 2% of the persons with disabilities. The reservation of jobs in identified government departments also has not been implemented properly and the posts filled are mostly in the lowest ranks.

Furthermore, coming to the role of NGO's, they play a vital role in the lives of not only a disabled but to every person who is lacking some basic facilities. In Kashmir there are various NGO's which are working for the welfare of disables: Disabled care foundation, Kashmir friends welfare society for disables, Hope disability centre and other such NGO's are there present who are working for disables in Kashmir. Despite of the presence of these NGO's, no one among the participants was aware of any of the NGO's. Few of them mentioned about the NGO's that are working for disables but outside Kashmir.

“No, I don't know about any organization which is working for disables in Kashmir. I know NGO's which are working outside Kashmir but I am not familiar with any institution in Kashmir.”

b. Attitudinal Barriers

Attitudes are a complex collection of beliefs, feelings, values and dispositions which characterize the way we think or feel about certain people or situations. People's attitudes are a product of life experiences, including the relationships we build with the people around us. Attitudes are transient and change from person to person, from group to group and even within groups over time. Nonetheless we do tend to see patterns in people's attitudes. People with shared characteristics or common social experiences may well develop similar attitudes towards disabled people or disability in general. The fieldwork helped to collect hands on information and knowledge about their day to day life and how the differently abled tend to deal with them. Majority of them are educated and employed. Many of them are unmarried

and dependent upon their families. The respondents expressed that they felt awkward in social circles as they were depressed, could not express themselves, felt neglected and irritable. Differently abled demanded of a life of respect and dignity. The society has created such kind of an environment where person with disability feel so excluded that they even did not come outside their houses. In one of the interview participant express how he face problems and even at some point his family members were not in a position to support them.

“Yahh... Yes, I agree with this particular social modal of disability were society construct a disability the pains related to the disability aa...yes being a disable person I have come across a lot many difficulties as far as my socialization, education and you know going up to any kind level in my life because one my family members themselves to some extant were not supportive because they were illiterate they were no in a position to understanding the kind of abilities that I have to go ahead at the same time the society was very unfortunately treated me that I cannot do anything to my life. It is therefore whatever the problems that I had in my pervious life it is this because of my disability only despite that I was able to make to this level”

The negative attitudes affect every area of their lives – in the playground, at work, in shops, on the street. Society looks down towards disables which should not be there. This kind of environment will not help in the overall development of person with disability and there will be no space left to bring a change in the attitudes and perceptions towards them.

“I had meet people different kind of people some will say one thing in front of you other thing after you. When people see me they will start questioning how did this happen, when did it happen, did it happen because of bullet I was many times stopped by military and they asked me, now I am used to it and now I don't give any damn about it. They have their own thinking can't change that, I am happy the way I am but at the end you have to suffer no matter what. Let them talk they have to because they do have any other work than this.”

Almost all the respondents indicated that they had come across diverse attitudes. While some said that they face kind attitudes towards them in their day-to-day life wherever they go, others especially, students with both legs affected and totally visually impaired students have encountered attitudinal issues. Respondents encountered this problem not only with their friends or peer group but also with their family members, neighbours', and even with the non-teaching staff in their universities. They assumed that their family members had low expectations and they used to be over protected. They also expressed their concerns about

those who are helping them in their studies and day-to-day activities. They added that even though the intention of students, teachers were to help them, but their attitudes made them feel guilty. Respondents were also concerned with the usage of terminology, pointless questions on their way of living and day-to-day activities. The following quotes represent their experiences:

“I wanted to do masters after my bachelors but for that I had to go out of my district and have to stay in a hostel. But my parents did not accept that. They said that you cannot go out and do your further studies. Due to their overprotection and low expectations on me, I am deciding to quit studies.

“People used to crack jokes on my eye sight. Even though I know that they were joking, it still hurts”

“I had decided to drop my studies after my bachelors because I can’t take the taunts of my classmates anymore “

c. Physical Barriers

The most important factors in successful attendance of students with physical impairments is physical access. The physical barriers experienced most often include: long distances; heavy doors; steep ramps, staircases, and rough surfaces, such as uncut curbs and thresholds (Hemmingsson and Borell, 2000). Natural spaces were also a challenge in areas with uneven terrain and unstable weather conditions. In the current study, physical barriers were faced by both visually impaired and orthopedically handicapped students. Majority of the students with physical impairment stated that their impairment did not affect their academic life, but they had problems with accessing computer centres, libraries and attending classes on the first or the second floor without the minimal physical support of lifts, elevators and transport facilities to and from classrooms, restrooms and hostels.

Both the institutions did not have good access and the distance between classrooms, library, restrooms, and academic and administration buildings. Some of these students stopped going to the library for issue of books due to their physical and accessibility limitations. Issuing of books in library was not an easy task for them. Even if any of their friends agreed to help them, there were other issues such as selecting a book from the catalogue, or tracing out the

book and also restrictions such as the card holder should be present at the time of issuing of the book. It was a big process and took lot of time for them.

“Being a wheel chair user, I could not access the library and computer terminals in my campus since computers in my department and the computer center were situated on the second floor so it was not easy for me go there every day. I rarely go and work on the computers.”

“If I need any book from the library, I usually get it from my friends. If they have the book or material they usually get me the same. Sometimes teachers give me some books.”

“I (student with visual impairment) didn’t go to my library because the way to the library was not accessible for me.”

d. Poverty

Financial stability is necessary when it comes to basic necessities of life. It has been seen that students with better financial position is capable of receiving good quality of education. While interviewing the respondents the researcher came to know that most of the students with disability were not have a sound financial background which leads these students to quit their education halfway. Most of the students’ parents were having yearly income of less than a lake. While talking to one of the student;

“My father is a famer he hardly earn 500 a day how cam expect him to provide me a good education without having any financial stability “

Further, the girls with disability consider themselves a burden. They believe that being a girl is one burden for their respective family and that too with a physical disability makes the burden heavier. They were more considered with their marriage then their education.

“The first thing is I am a girl who is considered as a burden over her parents, my parent doesn't have enough money for my marriage forget about education”

“I want to go for higher studies after my bachelors but at the same time I am aware of the fact that I will not be able to get it because I belong to a poor family”

Students Perceptions on Support Services provided at their respective Institution of Higher Education

Academic support services are a very significant source of support which helps students with disabilities to succeed academically by ensuring that the students recognise their strengths and compensate for their weaknesses. Moisey's (2004) study also show that those students who received more academic support services had more success in terms of course completions. In this section, the researcher is interested in exploring what kind of academic support was provided to them in their respective Institution of Higher Education and their insights on the quality of support.

Structural Accessibility refers to the availability of ramps on all of the buildings, lifts or elevators in each of the buildings, wheelchair accessible rooms, transport facilities, and cafeterias. The table shows that, all the respondents stated that their universities had provided ramps and made modifications to the existing buildings. This Table also shows that 40 per cent and 25 per cent of students reported that their universities provided transport and footpath facilities respectively. On the other hand, it was also found that these students were not provided with any lifts or elevators and special parking areas to keep their wheelchairs in their respective universities.

Academic accessibility is measured by the on campus accessibility to physical support to classrooms, libraries/labs. Every Institutions need to make sure that the classrooms/labs are arranged in such a way that these can accommodate the students with mobility needs. Academic accessibility is important, not only for orthopedically impaired students, but also for students with visual impairment for their active participation at higher education. In this study, the researcher categorised student's responses into two categories, such as friendly and not friendly. Here the term friendly means those who are having disabled friendly environment or easy access, whereas not friendly means those who faced physical barriers due to absence of ramps, lifts and elevators. Table depicts the perceptions of students, both with orthopedically and visually impairment on academic accessibility in their respective universities.

Table 4.4: Students' Awareness on Structural Accessibility by Type of the Institution of Higher Education (N=22)

Type of the Institution	Classroom		Academic and admin buildings		Computer centre		Library		Total
									22
State University	Friendly 1	Not friendly 6	Friendly 2	Not friendly 5	Friendly 0	Not friendly 7	Friendly 7	Not friendly 0	Total 7
District Collage	Friendly 0	Not friendly 15	Friendly 2	Not friendly 13	Friendly 0	Not Friendly 15	Friendly 0	Not friendly 15	Total 15

Table 4.5: Awareness of Students on Academic Accessibility by Type of the Educational Institution

Type of the institution	Ramps		Transport facilities		Footpaths within the campus		Lift/Elevator facility		Special parking areas		Total 22
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
State University	7	0	4	3	7	0	0	7	6	1	Total 7 (100)
District Collage	15	0	11	4	15	0	0	15	15	0	Total 15 (100)

Financial Support Services Enrolling in higher education institutions at university level can be an exciting and enriching experience. It can also be an expensive one. In addition to the tuition fee, there are other expenses like books, room rent, boarding expenses, health insurance, transportation and pocket money. In order to help these students financially, the UGC and the government have introduced many scholarships such as Social Welfare Scholarship, and UGC fellowships. Under the Ministry of Social Justice and Empowerment, the government of India providing Social Welfare scholarships to improve the educational status of OBCs, SCs, STs, minorities and persons with disabilities, whereas UGC is providing fellowships to the students those who cleared JRF / CSIR. In addition, UGC is giving financial assistance to all the students who enrolled in Central Universities in India. These kinds of financial resources helps the students pay for or supplement payment of educational

expenses in higher education. The most important point we need to recognise is that financial aid results in a partnership of the student, parents, higher education institutions, State and Central governments. Such a partnership requires cooperation, communication, and an understanding of each other responsibilities within the financial support services process.

Tale 4.6: Sources from which Financial Aid was received by students in the two Institutions

Type of the Institution	Social Welfare Scholarship	University Fellowship	Not receiving fellowship	NSP scholarship	Total
State University	7	0	0	5	Total 7
District Collage	13	0	2	11	Total 15

In this study, almost all respondents were getting financial assistances from Social Welfare scholarship in their respective institutions. Table shows that more number of students with disabilities was financially supported by the same and very less number was getting university or UGC/CSIR fellowships. It was also found that around 2 of them were not receiving any kind of financial support, since they are hailed from General Category and good economic background.

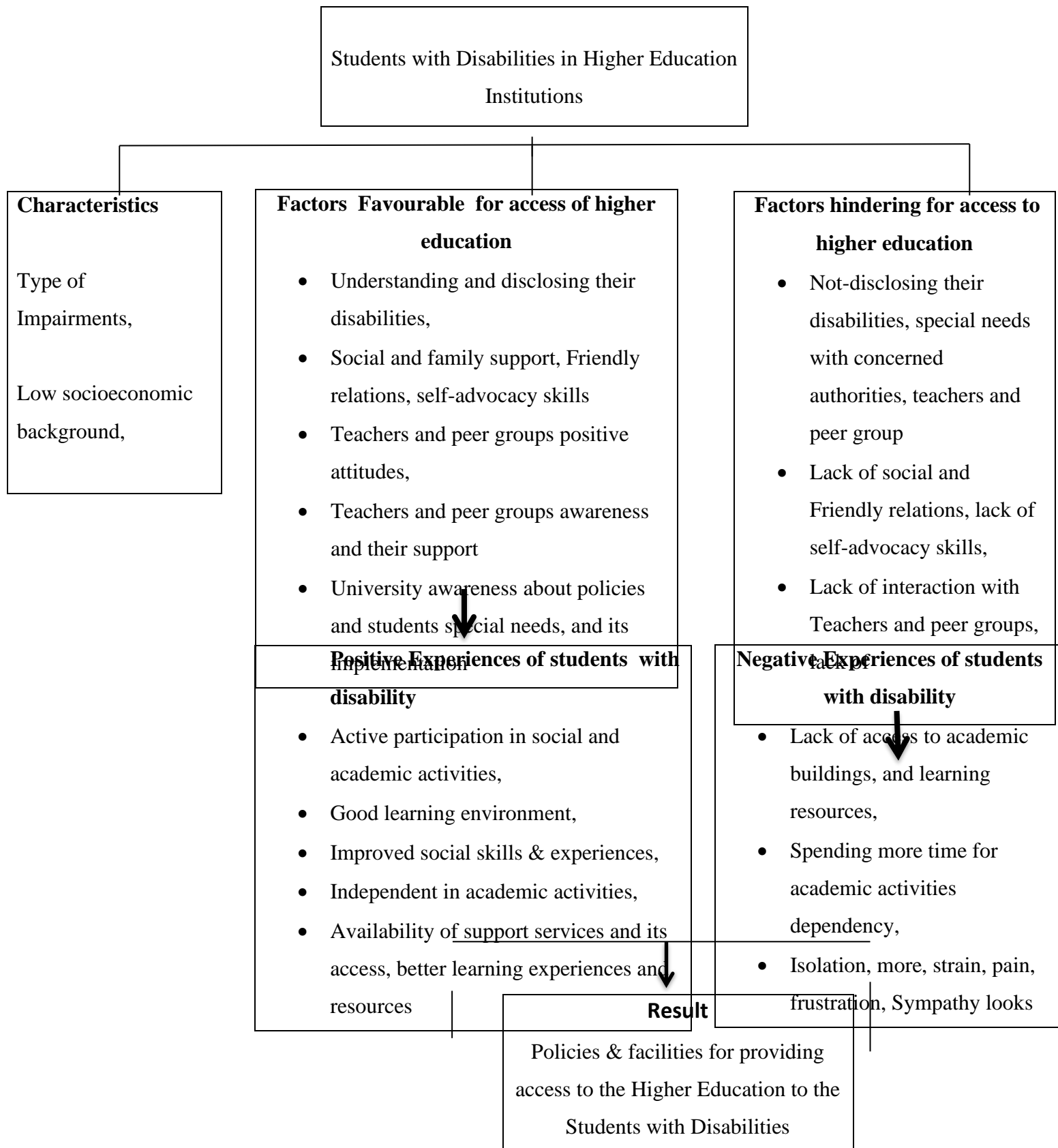
Chapter V

Encouraging and Hampering Factors in providing access to Students with Disability in Higher Education Institutions

In this chapter, the objective is addressed via the findings from all the stakeholders. The purpose of this study was to explore social and educational experiences of students with disabilities in the pursuit of, and participation in, higher education institutions and what hinders their access to it. The need for this study was due, in part, to the lack of research studies on the topic of education of students with disabilities in the context of higher education and teachers, and students attitudes towards students with disabilities within the context of higher education in Jammu and Kashmir. This lack of research studies results in a need for both knowledge regarding educational status of students with disabilities, and policy implementation or provision of support services.

The conceptual framework has been derived from theoretical perspective, findings of the current study, and depicts the lines of enquiry for this research. This framework gives clear a picture for understanding what are the favourable and hindering factors affecting the educational advancement of these students in higher education institutions. The researcher has collected data only from students, but there are different stakeholders including teachers, and university management which play an important role in providing a favourable condition for the access of higher education. The characteristics of these stakeholders influence the educational experiences and access to educational institution of these students directly or indirectly. If the favourable factors are less than the hindering factors, it leads to negative experience and vice-versa. Based on their experiences, the researcher will draw out the favourable and the hindering factors which influence the creation of an inclusive environment in higher education institutions. The framework below helps to understand the positive and

negative factors which enable the students with disabilities to have better educational experiences.



Findings in the Approach

Characteristics of Students with Disabilities

At the core of the study are the students with disabilities. To begin with, the characteristics of student with disabilities selected for this study are discussed. The enrolment number of male students is more as compared with their female counterparts. Similarly, the percentage of orthopedically impaired students is more than visually impaired students. It is interesting to note that the enrolment number of SC students is almost the same as that of the general category students. Predictably, the enrolment of students with severe disabilities is less as compared with those with mild and moderate disabilities. More number of students came from urban then rural background. Similarly, it was also found that they came from low occupational as well as economic background and were mostly first generation learners. A high number of students with orthopedically impairments opted for disciplines of Social Sciences and Science and Technology while a high number of students with visual impairments opted for disciplines of Social Sciences and Humanities. Interestingly, gender and nature of impairments did not influence the occupational, as well as educational, aspirations of these students.

Factors Favourable to Access Higher Education

Majority of the students managed their academic and social demands of higher education at the university level by understanding their disabilities, developing effective coping strategies to manage their impairments, accepting their strengths and limitations, some were having awareness about policies and support services on and off campus available to them in their respective universities, and having access to them and utilizing them when needed. Some of these students had a lot of confidence and believed that they are bestowed with multi-tasking skills. Similarly, it was noticed that good control over their problems, which could be the reason for their logical thinking process. It shows that overall some of these students had favourable attitudes and understanding about the term disability and impairment. They also

perceived that the extent to which their impairment became a disability, depended on the availability of support services and the role played by the university, which affected their day-to-day educational experiences. Their educational experiences were also influenced by support received from their family members, friends or teachers on their decision to pursue higher education and their choice of course. Making new friends and becoming very close to them were also important favourable factors which influenced their social and educational experiences. The respondents believed that they received unconditional support from their family members. For some of them, their parents were very clear about the importance of education and the role that it plays in making their lives successful. They always got encouragement, guidance to success in education and motivational support.

Support services are other important favourable factors which influenced students in both their social and academic participation in higher education. These students received various types of support which included guidance, emotional support, encouragement, and academic support, assistance with problem solving and financial and transportation assistance. In addition, good friendships and cordial relations with the nonteaching staff, teachers, peer group, and university management contributed as favourable factors to these students. Another most predominant favourable factor which influenced students with disabilities was disclosing their disabilities. It was also obvious that disclosing disability to teachers and higher authorities depends on the severity of students' impairment and their special needs and the student's own acceptance of his/her impairment.

The educational experiences of students with disabilities were also influenced by the other stakeholders, including, teachers, students and university management. In addition, many of the policies and support services of the government of India, the University Grants Commission, and assisted universities have facilitated providing of equal educational opportunities to these students with disabilities and ensuring their full participation. Similarly, disability coordinators also played an important role to assist students from time to time by offering information about the available services, facilities, guidance, support and advocacy wherever necessary, and worked with them throughout their course period. These findings also indicate that which have disability unit have set up committees with representatives from administration, teachers and students with disabilities. These committees play an active role as an advisory group, probing the students' needs, getting them involved in decision making and development of policy.

Factors Hindering Students with Disability to Access Higher Education

Some of the factors which hinder access to education and educational experiences of students with disabilities in higher education institutions were identified in this study. For instance, some of the students, depending on the nature of their personality and disability, found making and developing friendships challenging. Some of the respondents reported that disclosing their disability to others may be constructed as soliciting pity or making an excuse for themselves. That was why they had not disclosed their disability. Participants in this study faced some difficult decisions about disclosure on a regular basis. Some of the students with visual impairments lacked time to spend with friends or to make new relations. They believed that they needed to put more hard work to get good academic qualifications for better employment opportunities and also desired to be independent in their studies. Impairments, physical barriers, lack of social exposure, however, have hindered their participation in certain extra-curricular activities. Therefore, it can be concluded that participation in extra-curricular activities is not equally common for students across disability groups.

Apart from that one more hindering factor which emerged from the students' narratives is lack of accessibility. These students with disabilities did not have easy access to classrooms, libraries, and academic and administrative buildings in their respective institutions of higher education. Similarly, they were not provided with any kind of learning resources including assistive technology and arranging separate learning centres for students with visual impairments.

Nonetheless, majority of the hindering factors were mainly related to the absence of implementation of UGC schemes; lack of support services; and lack of awareness about disability issues and needs of these students among the general higher education community. Similarly, it was also found that there was much variance in the provision of support services, mainly due to lack of awareness about the availability of UGC schemes, lack of sufficient funding and lack of common procedures with regard to identifying students with disabilities and their needs effectively.

Positive Experiences of Students with Disabilities

The effect of understanding and labelling as a disabled person is likely to be accountable for altering their world and their educational experiences, the way others perceive them as well as how they perceive themselves. Likewise, those students who informed or disclosed their disabilities and special needs to their teachers and higher authorities, benefited more by getting their requirements fulfilled. These needs included: reservations, rights and special provisions, support services, extra time during exams time, reader and scribe allowances, fees refund, arranging scribes. The positive side of having disclosed their disability was that this facilitated access to support services and reasonable adjustments to enable the students to succeed in their studies in higher education institutions. These students highlighted the importance of social support and positive relationship with their family and friends in helping them to continue their studies successfully. Having a good number of friends or network also helped the students to manage their studies more easily. Specially, support from classmates/roommates/other peers in the form of physical assistance such as carrying books, pushing the wheelchair/tri-cycle, reading and recording material at the time of exams and getting books from the library has been a form of encouragement to them to pursue higher education and this has significantly influenced their active participation in social and academic activities. Their active participation in sports, student union activities, social events and other cultural programmes has significantly influenced their social experience in higher education and strengthened their integration. In addition, they got the opportunity to work with students without disabilities in a positive environment where everyone actively contributed in one way or the other. Similarly, support from family members, friends and university management helped them to cope with their problems in higher education institutions.

Negative Experiences of Students with Disabilities

Those students who did not disclose their disabilities and special needs did not get proper support services which significantly influenced their participation in higher education. Some of the students were found to lack social skills, and felt more challenged in developing and

maintaining friendships. Some of them did not feel comfortable while interacting with new people. They had more difficulty making friends while also dealing with manifestations of their disability and tended to be more isolated. It was also found that attitudes of these students, as well as their peer group, also affected their social relations and friendships. It was observed that due to their severity of impairments, specially students with visual impairments, could not enjoy social life with their friends, and it was also found that they did not have much time to enjoy since they needed extra time for studies, if they wanted to be independent or to achieve their goal in academics.

On the other hand, lack of proper academic support services such as readers, scribes, learning resources and assistive devices significantly influenced the education experiences of students with visual impairments. Also, physical access also remained a serious obstacle to ensure full participation of students with disabilities in higher education institutions. They had problems with accessing computer centres, libraries and attending classes on the first or the second floor without any minimal support including lifts, elevators and lack of transport facilities from classrooms to restrooms. Some of these students stopped going to the library due to physical and accessibility limitations. Since universities have huge campus area, hostels, academic buildings and library were placed in different corners and it was very problematic for these students to attend classes regularly without transport facility and accessibility. On the other hand, the problems of student impairments were also striking, and participation in educational activities was complicated by excessive effort, fatigue, pain, and tiredness, occasionally leading to disengagement or withdrawal. Further, it is obvious that students with disabilities, specifically students with severe impairments, encountered various types of attitudinal barriers from parents and peer group, including low expectations from friends, teachers, and parents, usage of terminology, sympathy and unnecessary questions regarding their day-to-day activities, at their universities.

Conclusion

Present study was intended to make contribution to the literature in this field. More specifically, this study was deliberate to contribute to educational knowledge related to

profile of students with disabilities in higher education institutions in Jammu and Kashmir and university policies and provisional support services currently provided to them. This study was also designed to fill in a gap in the literature on social and educational experiences of students with disabilities in higher education institutions in J&K.

This research shows that most of the students with disabilities used different services and strategies for balancing the demands of higher education and their impairments. Therefore, it is recommended that students take advantage of opportunities to learn and understand their disabilities, develop effective coping strategies to manage their impairment, accept strengths and limitations, become aware about available policies and support and have access to, and seek when needed, support services on and off campus to manage the academic and social demands of higher education. .

Almost all of the respondents opined that disclosing their disability had helped the authorities to improve the facilities and learning resources. Consequently, these students got more support from teachers which included course material, arranging scribes, extra time during exam time, etc. It is recommended that students with visual impairments should meet teachers on a regular basis and discuss their issues in class so that teachers gain a better understanding of what they needed in terms of support in class. Likewise, it is very important to remember that, although there are many support services available to these students, it is the students' responsibility to take full advantage of these support services. The findings of this study show that State University students were active and deliberated their problems with concerned authorities compared to those students from District College were not able to share it. To get a proper access to the educational institutions, it is recommended that students can form a group and secure their rights as persons with disability or they can discuss their special needs and problems with concerned authorities including disability coordinators, Dean of Students Welfare or Registrars. However, in order to fight for their rights, they should be aware of the policies, and availability of support services. On other hand, in addition to the institutional support, these students received support from multiple sources such as parents, teachers, and friends. The findings of the study stressed the importance of social support for the improvements of social and educational experiences at university level.

Social and educational experiences regarding the access to education of these students in higher education institutions are determined through negotiation of policies and practices

including awareness of and attitudes of other stakeholders towards students with disabilities. Therefore, policy makers, institution management and teachers have key roles in encouraging more meaningful participation by these students with disabilities in higher education. A better focus on the nature of involvement in higher education institution settings would help towards developing individuals 'well-being freedoms and expanding capabilities among these students. The Capability approach may be able to inform policies and practices that can enhance the ability of students with disabilities in higher education institutions to determine, follow and attain their aspirations.

Suggestions for Future Studies

In this study the researcher has touched the barriers encountered by the students that hinders their access to the education institutions, availability of support services and also social aspects such as student's social life and relationships. But there is still so much space to focus on issues or factors which influence the outcome of these students such as cultural, psychological, body image and stigma of these students in higher education institutions.

Secondly, the researcher was fascinated in issues of gender among students with disabilities in higher education institutions. Even though findings of this study did not show any significant difference in the educational experiences between male and female students may be due to the less numbers of participants but there were slight differences in social relationships and seeking behaviour. Thus there is need for a further in-depth study on their social experiences in university life in-depth. Third, further research should focus on to see impact of family support, research should also focus on over protection or regulation of parents 'impact on their children's social skills and relations and whether the family support helped these students to become self-determined. Finally, additional research is required because till, now, the studies have focus on students with disabilities who have not had access to higher education. Further research is needed focused on students who enrolled in higher education and the factors influencing their social and educational experiences taking the situation of Jammu and Kashmir into consideration.

To conclude, research on students with disabilities in higher education institutions in the context of Jammu and Kashmir is unexplored. Hence, the opportunities for future research are unlimited. The results of this research study have highlighted several areas for future

research in the context including influencing factors such as cultural, psychological, social, family support, gender and also on students those who are not pursuing higher education. Research studies in these areas would help policy makers; improve the educational progression of students with disabilities in higher education institutions in the context of Jammu and Kashmir.

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