KATE RAFFERTY: In our final session before we break for afternoon tea, I would like to introduce Jacquie Tinkler who is going to be talking to us about UDL technology and disability support, we influence UDL by being around the table. I'm really, really interested in this one. I think it's going to be a highlight for me, and Jacquie, you're presenting with colleagues Ella Dixon and Jean Hodgins.

JACQUIE TINKLER: Thank you. I've just figured out how to make the slides turn. I'm so smart because I had it around the wrong way. Thank you for coming. I'd like to start by acknowledging the Traditional Owners of the land on which we meet and pay my respects to any indigenous colleagues who are here today. I've just moved to Wotjobaluk country I'm still trying to get the pronunciation right in western Victoria. I've moved and now I've got to get into that kind of space.

I want to talk to you today about a study that I've been working on with my colleagues, a research project I've been working on. I'm trying to move my research to UDL. I come from an Ed tech background and sort of discovered myself in UDL land, if you like, as a result of that. I'd also like to say hello, before I go on, to everybody who is watching the recording and those of you who are online as well.

Okay. The background to this study. I'll give you an overview of the study and then the findings, and then what I'm thinking about now moving forward. So we started exploring the use of UDL for online learning space. I'm from Charles Sturt University and we do lots of online learning. I was particularly interested in students who had poor mental health or a mental illness. I'll talk about those terms in a sec.

Our previous study looked at online students and they were interviewed and surveyed, online students who were experiencing living with poor mental health, diagnosed mental illnesses, and undiagnosed poor mental health. So we left that up to them. So building on that work, we wanted to then look at the people who support them because they talked about disability support staff a lot when we were asking them about their experiences, what helped and those sorts of things. It's got a lag. Sorry. Right. Sorry.

The aim of this project was to investigate how educational technology and UDL if you're doing online learning, you're using technology, right, and some of it becomes a bit invisible so we wanted to focus on that, and how it was used by disability liaison officers and disability liaison managers. Sorry for the typo there. So we can assist online students who have poor mental health and how technologies can then be integrated in their subjects in a useful way.

A note about that terminology. As you probably know, talking about mental health we've got mental disorders, psychiatric disorders, mental conditions. There's a whole lot of language in this space. Some of it is really medicalised and fraught. We've settled on poor mental health. That doesn't need a diagnosis in that sense. But in the study we talked about mental illness because people we talked to in this space in universities need a diagnosis. That student has to have a diagnosis to access that service. So they're used to that the language of mental illness, as fraught as it can be in terms of stigma and the like.

We also are using the term "disability support officers" and "managers". And some of the other terms, when we surveyed these people, some of the terms that they used, accessibility advisor, disability, access inclusion, accessibility, disability. There's a whole lot of terms, but these are people we talked to in we put the invitation out to Australian universities to talk to these people.

So we all know pretty much now that particularly post COVID Australian university students have significantly higher levels of poor mental health than the general population. It's getting worse. Students don't always recognise they have poor mental health. They think they're somehow a failure or they can't cope or they're not good at university. They don't realise they're actually unwell. Individual adjustments are usually made because this is the system that we're in, and we don't know a lot about their needs of students with the sorts of cognitive impairment that comes with mental illness and how UDL works in that space. It's starting to appear, but we don't know a lot. And we don't know very much at all about the experiences of disability support staff and how they manage that.

Okay. The research questions. We asked about what learning technologies they used, and what was helpful and what was not helpful, and what sorry, I've lost my place in what ways could learning technologies be integrated into learning design in the way that we were talking about before, how can they just be in there, we don't have to add them as an accommodation, that we design learning with those things and those sorts of technologies, and to what extent does successful use of learning technologies reflect or utilise UDL.

Sorry, it's very laggy. We surveyed 33 participants filled out a survey and we interviewed 7 disability support officers and managers from 22 different Australian universities. And the findings here mainly there's a couple of graphs I'll show you are from the qualitative data, so the interviews and some of those sorts of responses. We'll do more unpacking of the survey data a bit later. 80% of the participants had support roles and 20% had managerial roles.

We asked them about the types of technology they used to support their students, its purpose, and we didn't say, you know, "Are the students you're supporting, do they have depression or anxiety?" We weren't looking for diagnoses in terms. We asked about the type of impairment or the type of difficulty. So technology that helped with memory, or organisation, or note taking, and those sorts of approaches.

Okay. What we found and I'll go through these findings in a little bit more detail the accommodation model was really good at finding out what technology support is, what works, what is useful for particular kinds of student needs, but of course, as we know in the UDL space, it excludes students who don't have that diagnosis, and one of the things we learnt from our previous work, it is particularly difficult, particularly in rural and remote areas, which a lot of our students are because we're an online regional university, can't access that support anyway, or a diagnosis, or afford it even, and it's 12 months to see a psychiatrist in some places.

There was concern amongst some of those participants that technology can take the place of things that students need to do. And we've seen this really come up with the AI space. And that they need to learn how to take notes and if the software does it for them they're missing out somehow. I want to unpack that as well. And that people in these roles really are vital to the way we consider UDL in organisations. They spend a lot of time advocating for students and staff and for UDL, and, yeah, it can be very difficult, stressful work because they're underfunded, of course. And they're really keen to use UDL, and they can find all these ways of doing that, but then at the next step of that uptake is what is difficult.

So access to effective technologies is one of those areas. So one of the things they highlighted was that the technologies that are really useful and Glean was one that came up a lot as really terrific in this space but can only be given to individual students. They can only get a licence for one student so that excludes a whole lot of students and that goes to the way we procure technology.

We asked them what software they used most of the time. Readers, the reading text to speech, and speech to text captions, the sorts of things were used for different purposes came up a lot as something really helpful for students who have got are dealing with cognitive symptoms, which is interesting, and note taking tools was another one and particularly that comes up in the neurodivergent space as well, that note taking, the overwhelm that can happen there.

A lot of common software that we have already has a lot of accessibility functions in it, that a lot of us here will know, but not a lot of academics know and not a lot of students know either.

This is the concern I raised before, and this is a quote. I'll read the quote for the purposes of transcribing and those listening: "I think one of the barriers is how easy it is for students to access some of these assistive techs in terms of not having that engagement and it's difficult because for some students it's really valuable, and then for others they're not necessarily then building those skills...having access to notes...means they're never having to take their own notes and I'm not sure how valuable that is." That came up a bit and that's really interesting. "Sometimes that need to learn, students need to do group work and need to learn to do this. It's actual professional gatekeeping. Not all students wants to become a professional there, and it's not a learning outcome. They don't have to do group work. You're choosing to do that. You can inadvertently be exclusionary that way. You don't need to do that. Advocating for students, as I said before, they've spent a lot of time advocating for individual students with individual academics, which was horrifying for me, some of those stories, where academics go, "No, I'm not doing it. They've got a study access plan. No, no, they're not getting an extension, they've got to learn." Some of that. Not a lot, but they're in there batting for students and batting for this organisational change.

One quote here from a participant: "We've allocated what we call assistive technology appointments where we look at the presenting issue. Is it access or learning? Often it's note taking. So are there assistive technology options to assist there or is it more around skill development?" Having that individual support means they can go, "This is an accessibility issue or this is someone they need to learn this issue." That's harder to figure out when it's a cognitive issue than a physical one, and they've got to do some of that work which can be tricky. They can make recommendations to individual academics, and sometimes they find something that works really well and some academics will go, "This is great." They put it across their subject and some will go, "No, I'm not doing that, that's more work" or "I don't do it like that", or whatever. That's part of the advocacy.

The other important element, some are able and asked to be around that table to give their thoughts, opinions, getting a new learning management system, so is it going to be accessible? They're invited at the start, not having to fight once it's been decided that it's not actually the best for that purpose. So there's a whole lot of work and energy they have to spend there to get around that table.

Okay. I'm going to rush through these because of the time, but there's a slide I'm showing here, and there's a graph on this slide and the question is how aware of the principles of UDL are you? I think one or two said not aware at all because they were new in that role. We've got 20% said they're somewhat aware. 45% said they're quite aware and 30% said they're very aware of UDL principles in their role.

The next question, another graph, to what extent do UDL principles guide your use of technology to help students with mental illness? And 10% said a little. 20% said somewhat, 45% said quite a lot and 25% said completely. So their approach to these things is using UDL from the start.

So technology can be really beneficial but they need support as well. Another quote here: "We find discussion posts are the ones that students get the most distressed about" this was interesting to me "because there's not a lot of guidance around what a discussion post needs to be. They're concerned about peer feedback that happens with discussion posts and if we're working with students who may be socially anxious, who worry about their communication skills, they can often cause a lot of worry and concern for students."

So technology can be great, you can have these chats, but if the student is not comfortable to use that, so training how to use things and why things are there and why they've been chosen is really important. Sometimes text used to mix things up, let's do group work because do you need to do group work? Is it a learning outcome? What are they learning there that they can't do by doing it individually? Group work came up a lot in my previous study about the things that students hate, as you can imagine, students with poor mental health.

Technology has enormous potential for that creative, accessible, inclusive UDL aligned ways of helping these students. One of the participants said, "Within the sort of teaching and learning space, that oral presentation aspect of it." And we know through the work that we do that there's some really creative things you can do about that. You know, recordings, deliver ways to deliver information, and that's what we sort of encourage, that sort of multi modal style of presentation. Technology has given us enormous capacity to do creative things, but some are not always accessible and we need to know that early on.

They work hard to be advocates for UDL and have, as I said before, really mixed results with individual academics and university administration. It's really mixed.

What next? This is where I'm going now with the where this has got me to. The strength of that accommodation model, in this space is that individual and tailored support that DSO and DSMs provide, and what's learned there can really be powerful in terms of informing approaches to UDL across a university, and that's a resource we have, the skill and experience of these people. But the burden of that advocacy often falls to them when they're already really busy and usually understaffed as well.

Then how to incorporate that knowledge and that experience into that wider piece across a university and how to tap in all of that expertise and knowledge.

Nearly done.

The other thing that came up that was really interesting, that need to learn, and that came up in various ways. What do we mean by they need to learn that? Do they need to learn to take notes at university for their profession or later? Is it enough to have those notes and they use them a different way? Who decides that? It came up a bit too that they need to learn how to communicate with other people, which is that, yeah, they're socially anxious and they don't want to go into a group and they don't want to speak out, but they need to learn that. But do they? Says who? Is it a learning outcome? Who does that? Is that academic now they've got to teach someone with sometimes acute social anxiety that they need to get into a group?

This came up, and it was kind of subtle, and it doesn't come up when people talk about physical disabilities, but it came up in this space, "I need to learn how to...and that doesn't happen." That was really interesting to me. I'm going to unpack that a bit later in my next study. I've covered that there.

This is the last quote about the technology. The data I collected for this is that these things take time, of course; it was about 12 months ago but this comment was interesting because we did ask about AI because it was only just appearing but this was interesting. The quote is, "The use of AI technology, especially ChatGPT, has been transformative for students with mental health challenges and ADHD especially in writing emails to their lecturers or rephrasing assignment briefs in simple language as well as assisting and planning assignments. Our universities' approach to these tools are to create awareness with students in the tool's limitations and ethics of use rather than a ban on its use and it does help students in surprising ways."

That's where I've got to now. Now I'm in a world of "what is it" with AI, because it's sort of led to this and the strength of things like AI, I think, are in this space and how students use them and how we can use them to help students in those ways.

So we need to get back around the table. And this quote finishes that off nicely: "So I kind of feel like the way that we win is to get in early on things. And that's about relationships and about being known and being seen as a competent team. So I think that's kind of how I see that we influence UDL and I suppose, you know, being around the table for conversations about many things helps to get a better outcome for our students."

Huge thank you to those who participated in this study because we asked them lots of questions, but they don't get asked a lot and we got such a wealth of knowledge and experience there. So thank you to all of the people who participated here, and to those who didn't participate but are doing all this work anyway, you really from my first study know that you change students’ lives, you help them stay at university, you save their lives sometimes. So thank you.

KATE: Jacquie, thank you for also elevating voices that are extremely important but rarely heard in research. I think that's just it's really outstanding. We have time for one quick question before afternoon tea. Yes?

>>: When can we read your research?

KATE: When can we read your research, was the question? JACQUIE: When I start writing. When I have started writing it. It's in a sort of nearly final draft one but then there's a survey which the survey unpacked much more detail about which technology was the most helpful and all of that. This piece is a bit more about the role of the DSOs and managers. The other one unpacks the technology focus a bit more. Getting there.

KATE: We will all look forward to that. Thanks again, Jacquie.