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Missed opportunities? Accessibility in ‘post-pandemic’ academia

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ABSTRACT

The dramatic increase in the use of online platforms for work and socialising during the early stages of the COVID-19 pandemic supported greater access for disabled people. However, three years in, online options to participate have dwindled or even disappeared entirely in some spaces. This article discusses the changes in online access and their impact, using personal experiences and reflections focused on the context of academia in the UK.

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Introduction

Disabled people who enjoyed much greater access to social and work events during lockdowns are now finding they are being left behind again. Access has improved in some respects (e.g. with increased acceptance of and competence with videoconferencing), but in many areas of life, remote and accessible options, briefly the norm, are now moving back into the periphery and the domain of special accommodations. This is particularly striking in UK research and higher education institutions, where access measures are often denied to disabled staff and students who require them but granted to those with the most power and privilege. In some ways, disabled people must now work even harder to fight for accessibility because they now must also contend with the added risk to their safety of COVID, with protective measures largely abandoned and vulnerable staff and students left to isolate themselves or face life-threatening illness (Moss 2021; Sample and Weal 2022).

Flexible working

Before the pandemic, the needs of disabled people working in higher education were not adequately considered. While there now seems to be greater

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willingness on the part of some institutions to allow remote working, this can still be hard won and not without its challenges. Three years in, and disabled academics remain at a disadvantage when it comes to networking and career progression – as before the pandemic, much again relies on ‘being there’ day to day in the office and participating in peripheral events.

Being allowed to work from home full-time can be the difference between working and not working, and the sudden requirement to work from home during COVID-19 lockdowns improved access for some disabled people. In my own case, commuting into an office daily and being surrounded by stimulation would (and used to) absorb much of my available energy for the day, leaving little left to devote to productive work and forcing regular burnout. It was a source of tremendous frustration for disabled people that a practice previously frowned upon, particularly for junior academics, became acceptable because it was necessary for non-disabled colleagues.

Teaching and learning access in higher education has also become problematic again, with vulnerable staff and students forced onto campus and virtual classes removed as a knee-jerk reaction to complaints about virtual learning in lockdown. What seems to have been forgotten is that measures taken during lockdowns were sudden and not prepared for; as a result, the infrastructure was not in place, and educators made the best of a difficult situation with very limited resources and support. This is in stark contrast to the experiences of those engaged in work or learning with institutions designed for that purpose. The [2022](#) report ‘Going back is not an option’ from Disabled Students UK describes mixed experiences from students in higher education in 2020–2021. While some found that access worsened, new measures such as maintaining online recordings of lectures were a boon to many, and 84% of students surveyed said that they would benefit from the continuation of online/distance learning options. The key word here is *options* – the report is not suggesting a return to lockdown online-only conditions. What is needed is an evolution of teaching and learning contexts to better support the needs of disabled staff and students without compromising on quality or safety.

For staff, the expectations of teaching can be challenging for disabled academics, even when fully virtual. Having to return to teaching in person has forced clinically vulnerable staff to either suffer through it and make themselves more ill or leave the academy and move into industry work. The exodus from academia indeed appears to be growing rapidly, with limited disability accommodations sometimes ‘the straw that breaks the camel’s back’ (Sang, Calvard, and Remnant [2022](#)). This is not a one-sided issue, either – the recent alarming rise in chronic illness, driven largely by long COVID (Hereth et al. [2022](#)), cannot be separated from the intensive working hours, stresses, and infection risk that are now endemic in universities.

The key issue at play here is privilege – before the pandemic, working from home and remote access were far more easily granted to those in

senior positions with established contracts, and this imbalance is gradually returning. Junior academics, tutors, administrators, and students are still often required to be on campus, and despite the clear evidence we have from the last three years, there is still an assumption that these types of roles cannot be effectively performed partially or fully online. This is not to say that online or remote should be the default, but rather that the privilege embedded in academic hierarchies is harming those who would benefit from a more flexible and equal system.

Socialising and networking

I am fortunate to be able to continue working from home, but it does come at a price. Those of us in this situation, with chronic illness, often forego the social benefits of being 'in the office'. A 2018 article from Olsen reflected on the issue of loneliness among disabled people, an unsurprising problem given the sheer number of access barriers that must be negotiated daily, such as the increased costs (monetary, physical, and psychological) of travelling and trying to attend live events. Pre-pandemic, the labour involved in trying to participate in work-related socialising was considerable – with a chronic illness, I was never able to 'just' go out for evenings without consequences for days afterwards. We then run the risk of being seen as anti-social when we don't 'join in' events or the office chat because fatigue or pain are overwhelming that day.

In this way, the early lockdowns were levellers in some respects – all suddenly felt isolated, and every effort was made to connect people remotely to ensure that everyone felt supported and had opportunities to have both collegiate and social discussions on virtual platforms. This was a welcome support while finishing my PhD at the time, and I was fortunate to participate in a virtual writing retreat with researchers from across the globe when an in-person conference was inevitably cancelled. However, despite this, there still seems to be a belief that you cannot be fully 'part of the team' in a department or research group if you are not there day to day in person. Once official lockdowns ceased, encouraging staff to return to the office for part of the week was a priority; as time went on, this 'encouragement' in some cases became insistence, with little regard for the vulnerability of some staff. Rather than institutions being creative with adaptations and expanding options to include flexible online and safe in-person social and work events, once lockdowns were lifted, exclusion became the default once again in many places.

Conferences remain a particularly contentious issue when it comes to accessibility. Many events that were not cancelled entirely were successfully held fully online between 2020 and 2021, and many since have been hybrid, offering both in-person and virtual options. The online model is far from perfect, and there are concerns about its capacity for building social and collaborative

connections (Grove 2022), but this is a reason to continue developing this format, not abandon it entirely. While some events have opted to remain online or hybrid, it is alarming to see the number of conferences opting to return to fully in person. This is no more disappointing than in the field of health research. Removing virtual options for attendees and presenters sends a clear message to disabled academics and stakeholders that we are less valued. The divide is stark, and despite the positive rhetoric of many organisations, when it comes to practice, there is still an assumption that researchers and clinicians are completely separate from the people with the conditions being researched, so there is 'no need' to make events accessible or offer virtual options. Whoever heard of a disabled health researcher, anyway?

Being invited to present my work at a recent conference, I was struck that while invited speakers were permitted to present virtually, all other presenters and attendees could only do so in person, reinforcing the ever-present hierarchy in academia. This obviously impacted on disabled researchers like myself, but it also reinstated a barrier for many others who had also briefly benefited from being able to attend or present virtually, such as those with caring responsibilities. The decision to allow only invited or keynote speakers to present remotely further reinforces the divide in academia between those at the top with the most privilege (usually white, male, and non-disabled) and those who are marginalised and need to fight for access. There is a resistance to accepting that flexibility is actually best for all – not just disabled people – and should be right rather than a privilege. Though the concept of Universal Design has its flaws and is often brought out as an ill-fitting catch-all for accessibility (no single measure can be 'universal' because there is no 'average' person), the core spirit of it remains relevant: designing societies for a range of different needs does no harm to non-disabled people and can even benefit them.

It may be the case that the infrastructure required for making events like conferences hybrid is time-consuming and costly, but this cannot continue to be an excuse when the same organisations successfully used this infrastructure when there was no choice. In 2023, with the huge leaps in technological capabilities and infrastructure in these last few years of the pandemic, the game is up: we *know* it is possible now. The existing structures in place before the pandemic, that have now returned, are disabling, and institutions do know how to change this. Disabled people have waited decades for the provisions required by law to be actually put into practice – accessibility is not an 'optional extra'. There is surely no adequate reason to wind back what we gained when flexibility became, so briefly, the norm.

Disclosure statement

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