**June 26, 2020**

**Disparate Impact**

This morning, I sent out the last lesson in the Pandemic Pop-Up Restaurant class, focused on preparing folks for the uncertain reopening of school in the fall, during this unprecedented time in our history.  As I looked back over the information shared in the last month, I was pleased with the broad coverage of the topics we set out to discuss – and troubled by what we didn’t talk about.  We spoke, in depth, about how the pandemic may impact on students with disabilities and on disability service providers.  But we DIDN’T speak about how the pandemic is impacting differently on people of color and low income individuals.  And I worry that without acknowledging that differential impact, I may have encouraged (or, at least, not questioned) the implementation of policies and procedures that help students with disabilities without regard to their impact/usefulness for all populations.

There is ample evidence to show that COVID-19 is not an equal opportunity disease.  It isn’t that the germs can tell who they are infecting, but rather that, in a funny way, this is an “opportunistic infection.” The dictionary defines an opportunistic infection as “an infection in which pathogens take advantage of an opportunity not normally available, such as a compromised immune system.”  Oh, we talked about THAT a lot in the class – what to do for/with students who are immunocompromised.  What we DIDN’T talk about was the fact that people of color and people from the lower socioeconomic groups are more likely to be susceptible to COVID-19 because they are more likely to be exposed to COVID-19.  They are more likely to have limited health care options, less access to protective measures, and to be working in jobs, or in living situations that bring them into contact with more individuals (thus, more risk of exposure).

All of this is complicated by the inequities that existed before the pandemic.  I read an article this week that spoke of the significant problems experienced by students who are also parents.  A frightening 69% of parenting students in community colleges report housing insecurity in the past year, and 54% report food insecurity.  *Before* the pandemic, folks at the campus food pantries indicated that the item that disappeared off the shelves faster than any other was infant formula.  Can you imagine what kind of issues these parenting students may be facing now, along with their peers from low income backgrounds, with unemployment figures tripled, largely in the restaurant and low-end retail jobs that often were critical in providing needed income?

But we didn’t discuss any of this in our class.  We were focused on ALL students at the college level, and the implications for students with disabilities when considering what rules were being implemented for ALL students.  That was the body of information we agreed to discuss, right?  Aren’t these issues of economic and social inequities systemic issues that need to be tackled at the institutional level?  We can only impact on those policies and procedures that we have some control over, and those don’t impact differentially on students of color or students from low income backgrounds.  OUR policies are neutral, right?  Wrong.  At least, potentially wrong.  Our policies are facially neutral (a law, regulation, or rule that does not, as written, discriminate against a particular group).  That doesn’t mean that they don’t impact differentially on students of color and students from low socioeconomic groups.

Early on, in the class, we made passing reference to the inequities that may exist for students who don’t have ready access to adequate technology, a stable broadband connection, or a functional workspace in their home environment to support remote learning. We spoke about those as institutional issues (which they are), and suggested that disability service providers check out how the institution is responding to those issues for all students, to make sure that students with disabilities have equal access to the institutionally-sponsored solutions.  But I don’t think we talked about it again.

Later, we talked about adaptive testing programs and issues of students with disabilities taking tests remotely.  We discussed the problems of lock down browsers for students trying to use adaptive technology.  But I don’t remember discussing the problems of students with disabilities who may be trying to take their tests on their smart phones, in their cars, out in a parking lot someplace.  We talked about extended time for testing for students with disabilities, but we never talked about the problems that some students may have in finding TWO hours of uninterrupted time to use the available technology and broadband capabilities from home, much less three or four hours for that final exam.

In the class, we talked about the difficulties that students with disabilities might have this Fall in getting access to their health care providers, and therefore getting access to the kind of documentation we would typically want to see.  But there was no discussion of what can/should be done for students who couldn’t afford to see a health care provider, even before the pandemic.  We talked about students with disabilities who won’t want to come to face-to-face classes in the fall.  We never talked about the possibility of students with disabilities who would *prefer* to be in face-to-face classes because it provides them with a stable learning environment.  We talked about altering the systems we use to produce and distribute alternate media for students with disabilities in our new, contact-less world.  But I don’t remember there being much discussion about whether all students with disabilities had an equal opportunity to USE that alternate media.

In short, we started and ended with two basic assumptions: (1) students with disabilities are a part of a larger grouping of STUDENTS on our campuses, and they should be treated with the same courtesy and consideration as is given to all students on campus; and (2) we can expect that students with disabilities will benefit equally from the planning and preparations we are making to support their equal access to opportunity.  BOTH are bad assumptions.  To treat students with disabilities as part of the larger group of STUDENTS on our campuses is to ignore the inherent, *systemic*, problems that impact on that group of “all students.”  And to assume that all students with disabilities can benefit equally from our planning suggests that they are all starting from the same place.  They are not.  It is time that we acknowledged that.

We didn’t create the problems of racism or the socioeconomic schism that exists in our society, any more than we created the COVID-19 pandemic.  But to suggest that *because* we didn’t create it, there is nothing we can or should do to fix it seems… negligent.  We cannot resolve the problems of our society by acknowledging these inequities for students with disabilities, but I think we compound those problems when we ignore them.

It is time we stepped up and did our share, in our little corner of the world, to recognize that it is time for change.

OK.  I’m done.

Janie

*Actions speak louder than words.  We can apologize over and over but if our actions don't change, the words become meaningless.*

*Actions speak louder than words, but not nearly as often.*

*Let the shameful walls of exclusion finally come tumbling down.*

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