Facilitating the retention and success of students with disabilities in health sciences: Experiences and recommendations by nursing faculty members

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Abstract

This paper explores the experiences of 19 Spanish faculty members teaching nursing students with disabilities and their recommendations to other colleagues about how to facilitate their retention and success. Students themselves nominated those faculty members they felt had contributed to their learning at university. We carried out a qualitative study with individual interviews and observations. We conducted an analysis of all the information using a system of categories and codes with different themes: experience teaching students with disabilities, personal and professional impact on the faculty and recommendations to other colleagues. The findings indicate that the participants had positive experiences teaching nursing students with disabilities, although they also commented on negative aspects. The impact of students with disabilities was greater at the professional level, as they had helped them become better professionals. Moreover, these participants gave recommendations to help other colleagues contribute to the inclusion of all their students. The study concludes that it is necessary to engage in inclusive pedagogy that contemplates students' needs and develops practices that allow for their learning and participation. Just like their peers, students with disabilities can successfully complete their degrees providing the necessary support is offered, and this includes sensitized, well-informed and properly-trained faculty.

Keywords: Health sciences; Nursing; Disability; Higher education; Faculty members
Experiences; Recommendations

Introduction

Higher education (HE) should be a setting in which any student can learn and be welcomed (Martins et al., 2018). In the case of young people with disabilities studying health sciences at university, their experience can be positive and they will remain on their course and succeed if there is a welcoming institution that recognizes their rights and provides the necessary support (Gonzalez and Hsiao, 2020; Plotner and May 2017).

Barriers to and facilitators of inclusion at the university

However, despite the progress that has been made in the university setting in terms of inclusion, students with disabilities encounter multiple barriers and drop out earlier than those who, "at first sight", do not appear to have any specific impairment (Frank et al., 2019). Like those in other fields of study, students with disabilities in the health sciences often do not disclose their disability for fear of being stigmatized (Clouder et al., 2016; Ryder and Norwich, 2019). These students tend to suffer more rejection due to prejudice from some of their peers and their experiences in HE are characterized by unsuitable teaching methods, insufficient support and inaccessible resources (Norris et al., 2020; Shpigelman et al., 2016).

This seems to suggest that, in order for students with disabilities to actively and successfully participate in the teaching-learning process, a change is required in health sciences degrees, not only in terms of beliefs about disability but also as regards teaching practices (Meeks et al., 2018). In this task, faculty members play a key role and should feel supported by their institution. Universities cannot just be places for teaching and research, they must also offer an environment that informs and trains faculty members, helping them become more sensitive and develop as professionals (Carballo et al., 2019a). Improving teaching practice means being prepared to recognize and value difference, as well as engaging in inclusive pedagogy and universal design for the learning of all students (Gale et al., 2017).

Health sciences and students with disabilities at the university

In the field of health sciences, there are studies that reveal the multiple barriers that students with disabilities have experienced throughout their university trajectory (Chichaya et al., 2018). For example, a study by Frank et al. (2019) identified inaccessible resources, misguided teaching methods, negative attitudes to helping and the need to expend extra time and effort in order to learn as barriers on physiotherapy courses. Also in this same discipline, Norris et al. (2020) found that the success of students in HE was not helped by a lack of information and staff training, coupled with non-inclusive practices. In nursing education, Neal-Boylan and Smith (2016) highlighted the prejudices of faculty members who questioned the students' ability

to do their job well in the future. Likewise, Horkey (2019) found a lack of knowledge among nursing faculty members about how to make reasonable adjustments to address the needs of students with disabilities. In short, most research reveals that faculty members are not trained, sometimes have negative attitudes and/or prejudices about disability and do not know how to develop a syllabus which is adjusted to students with disabilities (Black et al., 2014; Langørgen et al., 2018; Lyon and Houser, 2018).

Fortunately, there are also studies that have focused on elements which contribute to the inclusion of health sciences students with disabilities. King et al. (2006), for example, concluded that students felt empowered when they encountered a faculty member who used strategies that helped them learn and believe in themselves. Frank et al. (2019) highlighted supportive relationships (being an accessible faculty that encourages peer learning), communication and organizational skills, as well as specific strategies and adaptations (modeling, learning-by-doing and offering extra time). Finally, Plotner and May (2019) also found that students with disabilities viewed their HE experience positively when the support received had been intensive (personal, academic and social), and went beyond what a disability support office can generally offer. These offices, the figure of the student mentor, assistive technologies and the use of a variety of formats in exams have also been appraised positively (Afeli, 2019). Other health science studies value students with disabilities as an enrichment opportunity for the university environment (Yvonne Bulk et al., 2020).

Faculty members as key players for inclusion

In this sense, designing the curriculum on the basis of Universal Design for Learning (UDL) may help eliminate barriers to access and participation for these students and benefit all learners, whether or not they have a disability (Heelan et al., 2015; Meyer et al., 2014; Yusof et al., 2019). Thus, rather than being a problem, having students with disabilities in the classroom can become an opportunity (Lipka et al., 2019; Moriña et al., 2020). It can be a chance to understand that impairment is a condition and a complex issue that prompts faculty to rethink teaching decisions and actions in order to improve the quality of the learning experience for everyone (Symeonidou and Chrysostomou, 2019).

However, although some studies identify aids to inclusion, barriers are still present at the university level (Lourens and Swartz, 2016; Sakiz and Saricali, 2018). Only a few faculty members who have developed inclusive practices and have pointed out the benefit of having students with disabilities in the classroom to their peers recognize that their experiences have been positive (Plotner and May 2019). It is precisely these professionals who must show others the way and help ensure the participation and success of the entire student body.

Faculty members are encouraged to develop methodological, emotional and affective strategies to promote the learning and participation of students with disabilities. Some of these strategies may focus on classroom climate, whereas others may be linked to the use of active, student-centered methodologies, the importance of connecting contents with those things future professionals will need to know, employing a variety of resources and activities, giving feedback, being approachable, taking time to understand students' needs and establishing horizontal relationships (Moriña, 2019; Olave-Encina, 2019; Postareff et al., 2017).

Spanish educational context

Contextualizing the reality of HE and nursing students with disabilities in Spain, the HE system aligns internationally with the right to quality HE and universal accessibility (United Nations, 1948).

In Spain, official degrees at Spanish universities are divided into three stages: undergraduate (4 years), master's (1 or 2 years) and doctorate (3–5 years). A total of 22,190 people with disabilities study at universities. Of the different branches of knowledge, Health Sciences is the area with the second largest number of students with disabilities, representing 21.7% of the total (Universia Foundation, 2018).

In Spain, both in nursing and in other fields of study, any student with a disability (regardless of his or her disability) can access the university, as long as he or she passes the university entrance exam. Registration is free and there is a reservation of places for these students.

Once students have accessed HE, Spanish university regulations recognize that universities must provide support to students with disabilities (Royal Decree, 2020). Therefore, universities have disability offices that provide resources and the necessary accommodations for students (European Commission, 2020).

The students need to declare a disability to the institution in order to get support from a disability office. These offices are responsible for informing the faculty, if the student previously authorizes it, of the presence of a student with a disability in their subject and of the reasonable accommodations that need to be made. Therefore, until the student initiates the request for support from the office, the office cannot communicate with the faculty. Thus, Spanish faculty members, especially in the case of invisible disabilities, do not know whether or not they have students with disabilities until they receive an informative email from the office or the students voluntarily decide to communicate their educational needs to the faculty.

Finally, in Spain, in-service training for faculty is voluntary. It is not obligatory to have any pedagogical qualification, although the universities provide free training courses for the teaching staff on different subjects, among which disability and inclusive education are also found. However, the participation of the academic staff in this type of courses is usually scarce.

Purpose of the study

In general, there is a need for studies in the health sciences field that explore the outlook of faculty who teach students with disabilities, as most research to date has focused solely on the voice of students with disabilities themselves (Chichaya et al., 2018; Frank et al., 2019; Meeks and Jain, 2018; Stergiopoulos et al., 2018). This is the main contribution made by our study, which seeks to give voice to health sciences faculty members who teach nursing students with disabilities and who are recognized by their students as inclusive professionals who contribute to student learning and active participation. Through this study, we aim to help health sciences faculty interested in deconstructing prejudices about disability and engaging in fairer and more equitable practices based on the experiences of their inclusive colleagues. To this end, we posed three research questions:

1) How do faculty members appraise their experience teaching students with disabilities?
2) How does teaching students with disabilities influence faculty, both personally and professionally?
3) What would faculty recommend to other colleagues to facilitate the learning and participation of students with disabilities?

Method

This qualitative study forms part of a broader research project entitled "Inclusive Pedagogy at the University: Faculty Narratives" (Ministry of Economy and Competitiveness of Spain) involving faculty engaging in inclusive pedagogy in different knowledge areas. In this paper, we focus only on the area of health sciences, specifically on nursing faculty members.

Participants

To ensure that the study participants were inclusive professionals, nursing students with disabilities nominated those they felt had contributed to their learning at university. To access these students, we first contacted the disability offices of different Spanish universities, who informed these students of the aims of the study. We also used the snowball technique (Cohen et al., 2000) to contact students with disabilities who were known to the research team from previous projects. To ensure participants' suitability and facilitate nominations, students were given a brief description of what an inclusive faculty member would be like: "they believe all students have potential; they use methods designed to foster activity and participation; they are flexible and willing to help; they motivate their students; they establish close relationships with them, and/or they make their students feel an important part of the class".

When we informed the participants of their collaboration in the study, no specific type of disability was emphasized. In fact, this faculty had experience with different types of disabilities: hearing, visual, physical/movement, poor health conditions, psychological disorders and learning difficulties (this information is shown in more detail in the last column of Table 1).

Once potential participants had been identified (n = 27), the research team contacted each one individually by email and/or over the telephone to request their voluntary participation. Finally, 19 faculty members from four Spanish universities agreed to participate (see Table 1).

Table 1

Participants' profile clases

Participant	Gender	Age	Years of teaching experience	Knowledge Fields	Teaching experience with types of disabilities
P1	Female	40	15	Pharmacy	Hearing, visual, physic, poor health conditions, learning difficulties (LD)
P2	Female	48	15	Pharmacy	Hearing, visual, physic
P3	Masculine	60	20	Nursing	Physic, psychological disorders
P4	Masculine	57	28	Nursing	Visual, psychological disorders, poor health conditions
P5	Masculine	55	22	Nursing	Physic
P6	Masculine	42	13	Nursing	Physic, psychological disorders
P7	Female	32	4	Physiotherapy	Hearing, visual, physic
P8	Female	37	16	Physiotherapy	Visual, physic, psychological disorders, LD
P9	Female	56	27	Medicine	Hearing, visual
P10	Female	57	33	Medicine	Physic, psychological disorders
P11	Female	64	40	Medicine	Physic, visual, psychological disorders, poor health conditions, LD
P12	Female	58	28	Medicine	Hearing, psychological disorders, LD
P13	Masculine	67	5	Medicine	Physic, psychological disorders
P14	Masculine	48	16	Nursing	Physic, psychological disorders
P15	Female	40	10	Nursing	Physic, poor health conditions
P16	Female	55	31	Nursing	Visual, physic, psychological disorders, LD
P17	Masculine	43	15	Medicine	Visual, physic, psychological disorders
P18	Masculine	47	17	Medicine	Visual, psychological disorders, poor health conditions, LD
P19	Masculine	62	38	Nursing	Visual

Data collection instruments

The study was carried out in two phases and different instruments were used. In the first phase, two semi-structured interviews were conducted with each participant. We decided to conduct two interviews on different days, not just one, in order to allow the participants to reflect between interviews, thus preventing them from overloading, as faculty members have a tight schedule. The interviews were previously piloted with faculty members who did not participate in the study. The interview script was used in the study and, as it was semi-structured, it was adjusted according to the flow of the conversation. The researchers conducted the interviews. The quality of data collection was guaranteed by the fact that all members had experience in interviewing and were the ones who designed the script and piloted it. The interviews lasted approximately one and a half hours.

In the second phase, focused interviews were conducted with participants, along with classroom observations and student interviews. In this article we analyse only the perspectives of faculty members.

Data analysis

We conducted a qualitative analysis of all the information (Miles and Huberman, 1994) using an inductive system of categories and codes (Table 2).

Table 2

Category and Code System.

Categories	Codes
1.Experience valuation: Positives and negatives experiences	1.1. Equal treatment of students with disabilities
	1.2 Make reasonable adjustments without effort
	1.3. Ask the students how to help them 1.4. Satisfaction with the attitude of students with disabilities
	1.5. Disability offices as a necessary support
	1.6. Loneliness and fear of not knowing how to act
2. Personal and professional impact	2.1. Empathy, sensitivity and tolerance
	2.2. Be a better faculty member
	2.3. Learning from teaching students with disabilities
	2.4. Lack of institutional support for vulnerable students
3. Recommendations to other colleagues	3.1. Asking students for their needs
	3.2. Keep in touch with disability office 3.3. Be patient, empathize and value disability as an opportunity
	3.4. Know the specific regulations and get informed
	3.5. Monitoring of students'progress

Finally, to facilitate information processing, the qualitative analysis software MaxQDA 12 was used. The analysis was carried out in different phases. The first phase of coding was characterized by a broad and generic inductive category system. From this, new subcodes on the fundamental topics and ideas emerged. Finally, each of these subcodes was analysed in depth for possible breakdown or merging with other codes. All the information was analysed by the two authors of the article. The researchers discussed those textual units that were difficult to interpret in order to reach an agreement.

Ethical considerations

Ethical approval was obtained from the Spanish Ministry of the Economy and Competitiveness. Faculty signed an informed consent document which clearly explained the purpose of the study and their rights as participants. They were guaranteed anonymity and it was made clear that their participation was entirely voluntary and they could withdraw from the process at any time. We used numbers to identify the participants and not reveal their identity (P1–P19).

Once the interview had been completed, participants were emailed a copy of the transcript so they could clarify any doubts and make any changes they considered necessary. Of the 19 participants, 11 gave no feedback and agreed with the transcript. The rest of the faculty clarified some expressions that might be unclear or added new information that completed the one given previously. This guaranteed the rigor of our study. Another contributing factor was our concern for making the research process as transparent as possible by making the interview scripts available to the participants before the interview took place, and by returning the results of the study.

Findings

How do faculty members appraise their experience teaching students with disabilities?

The faculty experiences were mainly positive, although a minority of participants also reported some negative experiences.

Equal treatment of students with disabilities

Regarding positive experiences for all faculty members, impairment, like any other human condition, was seen as simply one more characteristic of the person in question, who they felt they should care for (not overprotect) by being willing to help, treating the process as something natural and making themselves available. Some participants said they believed their experience had helped them realize that students with disabilities were just like any other student in the class. Moreover, they thought that when faculty were friendly and approachable, students felt more confident about informing them of their needs.

A student with a disability is a student; the impairment is a characteristic, just like any other, and you shouldn't attach too much importance to it. With this type of student, what we have done, quite simply, is make ourselves available and try to reach out to them. In this way, eventually, students open up, let you in, help you see what they need, and then you help them as much as you can. (P6)

Therefore, in order to protect the confidentiality of personal data, the faculty did not know that a student with a disability and his or her associated needs existed until the student himself or herself voluntarily decided to identify himself or herself to the faculty or authorized the disability office to inform the faculty. However, in some cases the student with a disability never disclosed his or her condition, thus the faculty tried to act proactively and design an inclusive syllabus from the beginning.

Make reasonable adjustments effortlessly

Other participants stated that their experience teaching students with disabilities had helped them see the need for reasonable adjustments in their subject. These adjustments were defined as actions that did not require an excessive effort and which should form part of the work of any faculty member committed to ensuring the learning and full participation of all students. They believed that all people required some support to learn according to their needs and learning styles and that adjustments made for people with disabilities were equally useful for any other student.

In our study, there was coordination between the reasonable adjustments demanded by the institution and the faculty. In fact, the participants were very sensitive to providing inclusive responses, thus recommendations for reasonable accommodations made by the institution itself were welcome. In this work, most of the participants stated that the support offices had advised them on what adjustments they had to make and how these had to be made. In other cases, the students with disabilities themselves were the ones who directly pointed out the necessary adjustments. Depending on the particular experience of each faculty member, their reality was different, although they all agreed that their pedagogical model had to be accessible to and designed for all students.

For example, they mentioned that they had offered different examination formats (oral, test type and font size) and times, provided students with materials in advance and/or made small changes to the format of the materials provided. They also said they had held individual tutoring sessions with students or simply reflected on and thought about how they communicated with them in class.

Another hearing-impaired student asked me to look at her when I spoke. It took me a while to get used to it, but I eventually learned to look straight at her when I talked to her. So, I didn't have to make any major adaptations and I was able to resolve all the issues that arose without too much effort. (P1)

Ask the students how to help them

Some faculty members said that having students with disabilities in the classroom had made them understand that one of the best strategies was to ask them how they could be of help. Once they had listened to the students' proposals, they set out to provide the resources they really needed.

If I know how I can help him or her from the beginning, I have no problem. Most of the people I've had with disabilities have made good use of the help provided. They've tried very hard and, to tell the truth, I haven't had any bad experiences. (P17)

Satisfaction with the attitude of students with disabilities

Some academics explained that, in general, the experience had been satisfactory because it had allowed them to appreciate the effort and achievement of students with disabilities at university. They said they had become more sensitive and now understood, thanks to the attitude shown by their students in class, the importance of facilitating the process and motivating them to succeed. Participants also stressed that students with disabilities not only contributed to their subject, but also had a beneficial impact on both their classmates and the institution itself.

In general terms, I can tell you that, for me, it has been a highly satisfactory and very reassuring experience. Moreover, I believe that these students also contribute to improving both their classmates and the university in general. (P9)

Disability offices as a necessary support

A final positive aspect highlighted by the participants was the disability office. All participants, regardless of the university they worked at, stressed the usefulness of this service and how the professionals working there informed and guided them on how to act. They highlighted the usefulness of this service to act proactively with their students and know what they need. In fact, this was one of the most positive experiences identified by the faculty.

Well, what I like most is that all the faculty members automatically receive information from the disability office about the student so that we can get to know them and provide that special attention if required. It's great because they also give very specific guidelines about things you can do to help them. (P18)

Loneliness and fear of not knowing how to act

Regarding negative experiences, a few participants admitted that they had been afraid of not knowing how to act with a student with a disability in their class. They were concerned about not having resources, not having human support within the classroom and not knowing enough about whom to ask for help. They were

worried that they would not know what to do to make the student feel welcome and to ensure they were receiving the treatment they deserved. These situations used to happen when students did not identify themselves (especially in the case of invisible disabilities) and disability services could not advise them because the student had not previously requested help from this service or had not authorized them to inform the faculty members.

The first time I had a student with a disability I panicked because I didn't know how to act. I didn't want to make him feel bad, overprotected or singled out by constantly worrying about how he was doing. The student was so overloaded by everything that I didn't know how to interact with him in my subject. (P2)

How does teaching students with disabilities influence faculty, both personally and professionally?

Faculty members stated that teaching students with disabilities had influenced them both personally and professionally. They stressed that teaching students with disabilities, on a personal level, had helped them become aware of the needs of these people; it had given them the opportunity to empathize. However, the impact was greater on a professional level, since thanks to the student with a disability they had been better faculty members, becoming aware of the need for continuous training, acquiring inclusive strategies, and being more open-minded.

Empathy, sensitivity and tolerance: teaching skills needed

On a personal level they referred to the empathy, sensitivity and tolerance they had gained through their interaction with this student body as a result of witnessing first-hand their will to overcome difficult circumstances. This in turn opened their eyes to the importance of helping people with disabilities, since they usually make an effort and can succeed, providing all the necessary facilities are put in place.

It makes you see that there are other people in the world and that, even though you are an academic, you are in a context where you must always try to help others. (P14)

Be a better faculty member

However, the input from faculty was greater at a professional level, since almost all participants highlighted some kind of impact in this sense. First, they stated that teaching students with disabilities had helped them become better professionals. Teaching these students changed their outlook and prompted them to interpret education and the context in which it is provided in a different way. They were also aware of the strategies they had developed to ensure that teaching implied learning for all, not just for the majority.

Having students with disabilities has helped me become better for students without disabilities too, because what I do is useless if I don't reach out to everyone. Until you have a student with a disability, you don't realize how important it is to be good in the classroom. (P2)

Learning from teaching students with disabilities

Faculty also emphasized how much they had learned through teaching students with disabilities. They explained that the experience had increased their patience and had forced them to develop strategies for finding the help they needed in each case. In this sense, it had given them skills and abilities which enabled them to resolve situations with other professionals more effectively.

I think I have learned that in these cases we have to stop a little and look at the different options available. We need to seek help from those who know the student and then get together to come up with a solution and let them know what decision has been made. (P12)

Lack of institutional support for vulnerable students

Finally, a few participants mentioned that having students with disabilities in the classroom made them more aware of their vulnerability, because there is no institutional support for them. They claimed that physical and mental barriers still exist and that this makes it difficult for everyone in HE to succeed.

It has influenced me a lot because one of the first students with a disability that I had saw that there was no way for her to access the classroom or indeed the department within the faculty. When I saw her family, her mother, her sister, "living" for six years underneath the dean's office ... I was astonished. (P9)

What would faculty recommend to other colleagues to facilitate the learning and participation of students with disabilities?

The recommendations made by faculty to colleagues regarding how to be proactive and facilitate the inclusion of students with disabilities were varied, with only participant stating that they did not know what advice to give. In general, five key recommendations emerged from this study: 1) ask the student directly about what they need, 2) contact the disability office, 3) be patient, empathize and see the disability as an opportunity, 4) learn about the specific regulations for students with disabilities and find out what you need to know, and 5) monitor the student's progress on a regular basis.

Ask the students directly about what they need

The first recommendation made by almost all participants was that the first step should always be to ask students directly what they need and how and how much they want to be helped. They stressed that, above

all, it was important to listen to them in order to design lessons and act in accordance with their requirements and suggestions. Faculty underscored that it was vital to consult directly with students before taking any action.

First, communicate with the student and have them tell you what they need to make the subject accessible.(P2)

Keep in touch with the disability office

The second recommendation was to contact the university's disability office. Participants explained that the staff from these offices would contact faculty previously via email and could help by providing advice and guidelines regarding regulations and how to adjust contents, schedules and examinations in accordance with each student's individual requirements.

The disability office helped me by letting me know everything that was in the regulations, which I, for example, didn't know at the time. Moreover, all these experiences have made me see that all students have different needs. (P8)

Be patient, empathize and value disability as an opportunity

The third recommendation was to be patient and empathetic and to view having students with disabilities in class as an opportunity to become a better professional. In this sense, faculty stressed the importance of viewing the whole experience as something natural, because students with disabilities are people first and foremost, and classes are always rich and diverse. Therefore, they advised colleagues to "put themselves in the student's shoes", try to establish a warm and friendly relationship with them, encourage them to move forward and be available to listen to and support them.

I would recommend empathy, because it's vital to sit down with them and let them talk to you about anything they want. The problem is when they fall apart because they think they can't do it and want to throw in the towel. What you have to do is give them confidence, listen to them and make it easier for them. (P13)

Learn about the specific regulations for students with disabilities

The fourth recommendation made by some faculty members was to be aware of the specific regulations which exist for students with disabilities and to find out about their needs based on the reports prepared by the disability office. Knowing the regulations means knowing how to act appropriately with students and who to ask for help.

They should read the reports from the disability office and take notice of them. This way, when they see the student in class, they will know what the problem is and be more tolerant of some things. (P18)

Monitor the student's progress

Finally, participants recommended continuously monitoring students. Although they reiterated the importance of avoiding overprotection, they also said it was necessary to tutor students personally and to accompany them throughout the course. They said that, for them, it was essential that students felt supported during their degrees.

Well, the same thing I do – monitor those students' progress very closely. We must supervise them a little more so that we can really support them on the path to learning. (P6)

Discussion

Ensuring access to university for students with disabilities is not enough and mechanisms are needed to help them remain in HE and succeed in their studies (Meeks et al., 2018; Norris et al., 2020). In other words, access without support is not an opportunity. All students can succeed if they are provided with the necessary support mechanisms. As this study shows, faculty members are a key element and some, through their attitudes and practices, have been sensitive to and proactive towards students' needs. For these faculty members, it is the university that has to adapt and not the other way around. This prompts us to think about the need for HE to be based on the social model of disability (Oliver, 1988), understanding that barriers are generated by the environment and that if these are eliminated, students with disabilities will have a chance to remain on their courses and successfully complete their degrees.

But teaching at university is a challenge that requires not only mastery of the subject matter at hand, but also dedication, pedagogical training and commitment (Carballo et al., 2019a). Students are not selected, everyone is unique, diversity is present in the classroom and faculty must be trained and sensitized in order to know how to act in each case and how to give each student the best possible learning experience (Lyon and Houser, 2018; Olave-Encina, 2019). Reasonable accommodations should therefore be part of the teaching repertoire of any faculty member, as they may be required at any time to adjust their teaching to the educational needs of their students (Frank et al., 2019). Therefore, the issue of faculty training has yet to be resolved in HE, since it is compulsory in only a few universities and it often happens that those who participate are already highly sensitive to the situation and are not the ones who need it most (Carballo et al., 2019b; Gale et al., 2017). Universities should establish training policies aimed at all staff, covering various topics that reflect the current diversity present in university classrooms.

The results presented here also teach us that, for these faculty members, the student's impairment is simply one more characteristic of their general profile. Moreover, rather than a factor which conditions their learning, it is precisely this characteristic that is responsible for their eagerness and determination to learn, with this student body being more motivated than the rest and setting an example of effort and improvement for their classmates (Lipka et al., 2019; Symeonidou and Crhysontomou, 2019).

Several lessons can be learned from this study which show the way forward for other faculty members interested in providing an inclusive response to students with disabilities. Firstly, it is necessary to view the process of supporting students with disabilities as something natural. Just like any other student, those with disabilities have the right to learn and participate alongside their peers in a context characterized by sensitive professionals who offer support when it is required (Gonzalez and ´ Hsiao, 2020; Plotner and May 2017). Students with disabilities should also be appreciated. In many cases, disability is interpreted as a problem rather than a source of enrichment. However, having a student with a disability in class can be an opportunity for both faculty (to become better professionals and learn new methodological strategies, skills and patience) and for peers (to be inspired by their effort and motivation and to become more sensitive to disability in general) (Frank et al., 2019; Lipka et al., 2019).

Another aspect to bear in mind is that, although academic support exists, personal and social support is also necessary. Awareness of the emotional and affective dimension of learning is a prerequisite for effective teaching (Moriña, 2019; Postareff et al., 2019). It is also useful to have direct and fluid communication with both students with disabilities and support services (Frank et al., 2019; Afeli, 2019). In this way, taking the time to understand students' needs and what adjustments they require can help faculty decide what action to take (Moriña, 2019; Olave-Encina, 2019; Postareff et al., 2017).

Finally, we must not forget how essential ongoing monitoring is in relation to students with disabilities. This close supervision is not designed to single the student out, nor does it imply preferential treatment; it is merely a question of justice and must form part of faculty's commitment and responsibility. Thus, if a faculty member has confidence in their students' abilities and takes the time to tutor them and listen to them carefully, their experience at university will be more positive (King et al., 2006; Frank et al., 2019).

Limitations and further research

We would have liked to have had more participants from different faculties in order to gain a broader view. Nevertheless, due to the selection process (nomination by students), we only had access to those identified by students who voluntarily decided to nominate faculty they deemed to be inclusive in their practice, thereby limiting the size of the sample.

It would also have been interesting to hear other voices, not only those of faculty and students. For example, we could have interviewed staff working at the disability offices or those responsible for disability issues at the various universities. Hearing their views on the situation would have enriched the data. Future studies may therefore wish to take these perspectives into account.

Another limitation of this study is that it was carried out exclusively in Spanish universities. It would be interesting to analyse similarities and differences in other international contexts.

In future projects, focus groups could be held with some of the most representative participants from each faculty and joint workshops could be organized to create training courses for colleagues working in nursing and other health sciences university degrees. Support groups could also be set up within faculties to enable inclusive faculty members to reflect on their practice and help and recommend to others how to ensure the inclusion of students with disabilities.

In short, this study shows that when students have the necessary support, their experience at university is successful because they feel they are treated the same as other students and that their rights are respected and their real needs taken into account.

Conclusions

This study shows that disability at the university is an opportunity to rethink syllabi, practices and institutional cultures. Teaching students with disabilities provides a chance to question how teaching is done and that teaching practices benefit all students. The narratives also reveal the urgency of establishing greater networks between the university, faculty and disability services.

In summary, if we truly wish to move towards real inclusion in HE, then we should accept fewer and fewer excuses for not engaging in a teaching practice that includes all students and takes into account the needs of each and every person who decides to study at the university. Just like their peers, students with disabilities can learn, participate and successfully complete their degrees providing the necessary support is offered, and this includes sensitized, well-informed and pmiroperly- trained faculty.

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Anabel Moriña: Funding acquisition, Project administration, Supervision, Writing - original draft, Writing - review & editing. **Inmaculada Orozco:** Writing - original draft, Writing - review & editing.

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