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Disability and Accessibility at Bryn Mawr

Introduction: Access Intimacy and the Limits of Accessibility at Bryn Mawr

Disabled students at Bryn Mawr College face many barriers to access in academic, residential, and healthcare settings. In addition to a campus that is largely physically inaccessible, and a difficult process for accommodations which are often denied, students face an institutional culture that does not embrace disability as diversity and instead views it as a problem. This is deeply harmful at Bryn Mawr for physically disabled students, students with learning disabilities, and students with mental illness. Even at a small institution like Bryn Mawr, it is difficult to create an environment that can meet everyone's access needs; it may not be possible to anticipate the needs of each student within the establishment of higher education. However, it is important to think about what a fully accessible college would look like and to continue trying to achieve those goals, even if this happens in small steps. In "Access Intimacy: The Missing Link," Mia Mingus writes that "sometimes access intimacy doesn't mean that everything is 100% accessible. Sometimes it looks like both of you trying to create access as hard as you can with no avail in an ableist world."¹ Bryn Mawr College has a responsibility to strive for this access intimacy, to continue working with students to create access and to accept that making Bryn Mawr a safe and welcoming place for disabled students is not impossible but will require major work and an embrace of change.

In working on this project, I drew from institutional history, participation in campus wide conversations about disability and accessibility, formal interviews with students, informal conversations with peers, and personal experience. After completing this informal research, I have determined that Bryn Mawr successfully becoming accessible for disabled students and

¹ Mia Mingus, "Access Intimacy: The Missing Link"

striving for access intimacy would require a complete rethinking of Access Services as it currently exists. I would like to devote more time to a complete survey of access at Bryn Mawr, including conducting formal interviews with students faculty, and staff, to more fully understand the barriers to access and how they might be resolved. However, the scope of this project did not allow for such a complete investigation; instead I have chosen to focus my project in two main areas: a case study of Bryn Mawr's swim test requirement and an exploration of some of the access problems related to insurance and costs of disability at Bryn Mawr.

Part I: The Swim Test and an Institutional Culture of Ableism

Introduction and Background: What is the Swim Test?

As part of a physical education requirement which Bryn Mawr undergraduates must complete in order to graduate, all students must pass the “Swim Proficiency Requirement.”² Students are tested on swimming, treading water, and floating. The swim test has looked different through the years: in the 1950s students were required to swim for twenty consecutive minutes.³ Students in the class of 2021 were required to swim for ten consecutive minutes, while this year (for students in the class of 2022) the time requirement was switched to a distance requirement, and students were required to swim three laps.⁴ Students who do not pass the swim test or do not know how to swim have the option of taking a beginner swim class to fulfill the requirement.

The origins of the swim test have become somewhat lost in the Bryn Mawr community. Many students believe that the requirement exists as a form of emergency preparedness; one student assured me that the swim test exists because some Bryn Mawr student drowned sometime in the past, and her parents endowed the test to ensure that no Bryn Mawr student would drown in the future. This legend is common at the few institutions that continue to have swim tests, but there is no evidence that it is true anywhere.⁵ The swim test at Bryn Mawr actually emerged for a different reason: the test was a part of the greater “physical culture” requirement at Bryn Mawr, a program started amidst beliefs that higher education would cause women to become physically unhealthy, and would specifically destroy their reproductive

² Bryn Mawr Athletics Department

³ This information is from a conversation with my grandmother, Alice Baer Bernstein ‘55

⁴ Bryn Mawr Athletics Department and conversations with students

⁵ Joel Rose, “For College Seniors, One Last Lap Before Graduation”

systems.⁶ Physical culture was an aspect of Bryn Mawr education since its foundings, with specific requirements dating back to at least 1899, with the swim requirement beginning around 1908.⁷

The Swim Test and Physical Accessibility

For some students with physical disabilities, completing the swim proficiency requirement is not a viable option. Students who have physical disabilities that prevent them from swimming told me that they faced obstacles when seeking exemption for the requirement. This is in line with multiple complaints about Access Services creating a long and arduous process for students to receive accommodations. When disabled students are exempted from the swim requirement, they are given an alternative: a requirement to complete a CPR certification course. In this case, students are required to pay the \$20 certification fee, essentially adding an extra fee to the tuition of physically disabled students, as this requirement is mandatory for graduation. If the swim test is understood as an emergency preparedness and survival measure, the CPR certification requirement, despite the extra fee associated with it, makes sense in theory as an alternative for physically disabled students. However, since this is not the true origin of the swim test, considering accommodations for disabled students reveals a problem: the swim test was conceived in order to prove the physical ability of Bryn Mawr students. This is a requirement that physically disabled students will not be able to fulfill.

M. Carey Thomas and the Relationship Between Racism and Ableism

“We did not know when we began whether women’s health could stand the strain of college education... we did not know whether colleges might produce a crop of just such

⁶ Bryn Mawr Special Collections, “Building Muscles While Building Minds: Athletics and the Early Years of Women’s Education”

⁷ This date is derived from archival research; the first mention of the swim test requirement is found in 1908.

invalids....Now that we have tried it... we know that college women are not only not invalids, but that they are better physically than other women in their own class of life.” - M. Carey Thomas, 1907

Speaking to the Association of Collegiate Alumnae in 1907, M. Carey Thomas referred to Edward Clarke’s 1873 book *Sex in Education*, which argued that the female body could not withstand the demands of higher education; specifically he wrote that women who studied could not simultaneously use their brains and their reproductive systems, and this would lead women to become fragile and bear frail children. Clarke’s descriptions of the deformities that educated women and their children would suffer used language that was deeply rooted in racist and white supremacist ideals about the body. Additionally, a tenet of Clarke’s argument was that if upper class women continued to be educated, they would have fewer children, while the children of lower class women and immigrants would be healthier and stronger, which Clarke believed would be devastating for the future of America.⁸ Clarke’s ideas were not far removed from popular eugenic beliefs of the time, which sought to control who could reproduce and led to the forced sterilization of thousands of disabled people.⁹

Thomas’s 1907 comments do not condemn the racist and eugenic basis of Clarke’s argument; her fear of producing “a crop of just such invalids” indicate that she is ideologically aligned with Clarke despite disagreeing with his insistence that women should not be educated. Thomas’s racist and anti-Semitic beliefs were intimately related to her support of eugenics.¹⁰ Recent conversations at Bryn Mawr have explicitly sought to confront the college’s past and M.

⁸ Bryn Mawr Special Collections, “Building Muscles While Building Minds: Athletics and the Early Years of Women’s Education”

⁹ Kim Nielsen, *A Disability History of the United States*

¹⁰ Bryn Mawr Histories Working Group

Carey Thomas's history of racism and anti-Semitism. In recognizing the ways that M. Carey Thomas's legacy has harmed the college, conversations have centered on the experiences of students of color and Jewish students, and the college's failure to accept and support these groups. It is crucial that the Bryn Mawr community also unequivocally acknowledge the eugenic and ableist views held by M. Carey Thomas, and the harm that they have done and continue to do to disabled students and community members. The swim test, which was first referenced in Bryn Mawr publications a year after this address, is a critical example of this harm. The continuation of this practice, which was formed to promote an ideal female body in response to eugenic beliefs, contributes to an institutional culture in which physical ability remains highly valued.

Abandoning the Swim Test

To become fully accessible, Bryn Mawr must work to dismantle a long-standing culture that devalues people with disabilities. The swim test, which is usually scheduled for first-year students to complete during their first few days of orientation, both subjects disabled students to a difficult bureaucratic process for exemption as their first impression of Bryn Mawr and informs the entire student body upon arrival at the college that physical ability is important for success and acceptance. While Bryn Mawr has a strong relationship to history and tradition, its traditions are consistently rethought and reassessed when they are causing harm to students, as evidenced by the recent rethinking of WTF week and the removal of M. Carey Thomas's name from the building now known as Old Library. The swim test harms the Bryn Mawr community by promoting an ableist institutional culture rooted in eugenics, and eliminating it would send a

powerful message to students that Bryn Mawr is not interested in preserving these eugenic infrastructure.

Part II: Health Insurance, Accessibility, and Affordability

Intersections of Accessibility

Though my use of the term “accessibility” refers to the maintaining of a campus that meets the needs of disabled students, this word can also refer to economic accessibility, the maintaining of a campus that is not closed to students from low-income families or without considerable funds. The two types of accessibility are fundamentally related; disability status and socioeconomic status do not exist in a vacuum, and many disabled students are also financially disadvantaged. In some cases, disabled students will be less likely to afford additional costs, due to outside expenses related to their disability. In creating a campus that is fully accessible it is important to be cognizant of this intersection, and remember that no resource is accessible if it is not affordable. At Bryn Mawr, there are several barriers to economic accessibility in the areas of healthcare and insurance.

Costs of Care at Bryn Mawr

Domestic students at Bryn Mawr receive insurance through United Healthcare Student Resources. A major problem that students face is lack of information about insurance. Students who approach the health center with questions about insurance are often directed to various sources before receiving the relevant information. One student that I spoke to went to the counseling center with a question about confidentiality; she needed to access care without the knowledge of her parents and wanted confirmation that she could do this using student insurance. This student was referred to another counselor, who informed the student that they were not the right person for that, then interrogated her desire for confidentiality. After searching for information online the student returned to the health center, where she was given the phone

number for an employee of the college's insurance broker. This is the resource that students are automatically referred to when seeking information about insurance; the employee, who is Baltimore-based, is the director of speciality coverage for the broker and manages insurance for several colleges and universities. When asked questions specific to Bryn Mawr's coverage, he frequently gives answers that are unclear, incomplete, or inaccurate. As in the above example, this can be dangerous if students are given false information about insurance coverage.

In some cases, the broker employee refers students to the United Healthcare website. This website is not frequently updated and sometimes lists providers that are not actually covered under the network. While Bryn Mawr is not directly responsible for shortcomings of the insurance company, it is notable that these problems exist. My personal experience illustrates the problems with insurance at Bryn Mawr. After seeking care at the counseling center, I was advised to seek care off campus as the counseling center could not meet my needs. The counseling center gave me their prepared list of off-campus providers; none of these providers were covered by student insurance. When I independently found a counselor through research on the insurance website, she informed me that many providers choose not to be covered by United Healthcare because the company is difficult to work with. This story both indicates both Bryn Mawr's assumption that students will not need to use student insurance to pay for off-campus services, and evidences that Bryn Mawr may not be providing students with the most beneficial insurance.

The assumption that Bryn Mawr students will have the ability to pay out-of-pocket for health costs is extremely prevalent at the Health Center. For unclear reasons, the Health Center is unable to directly bill student insurance; they can only bill student accounts, meaning that

students who need healthcare costs covered by student insurance must complete the complicated and tedious claims process. Additionally, students at the Health Center often incur minor costs without being informed of them. For example, one student was given an ice pack, then informed upon leaving the health center that \$5 would be billed to her student account. While this is only a minor charge, visits to the health center are free for undergraduates, and improper communication about fees may lead students to inaccurately believe that there will be no charge for supplies such as these. Finally, students are occasionally referred to specialists or sent to off-campus labs, without discussion or acknowledgement of the costs of these services. Even when the health center covers costs for specifically ordered procedures, costs of transportation are not addressed.

Addressing Detriments to Access

Each of these significant costs work to lessen the accessibility of Bryn Mawr college. While it may not be possible to find perfect solutions to each of these issues, Bryn Mawr must acknowledge the ways that costs of care create difficulties for disabled students. One possible way to address these issues would be the existence of a designated college employee whose role was to provide students with information about using student insurance and navigating healthcare. Students also proposed an access services employee whose role was to be an advocate for students getting accommodations. The creation of a role that encompassed both of these roles is a potential solution to some of the issues, as ease of information would allow more students to successfully access healthcare, and a student advocate role may transform the difficulty that students encounter in access services. While institutions like Bryn Mawr are

inherently inaccessible due to extremely high tuitions, the college has a responsibility to be aware of the way that these costs are specifically preventing disabled students from attendance.

Conclusion: A Changing Culture

There are many barriers to access at Bryn Mawr, and the college has a responsibility to actively work to stop disabled students from being harmed by policies, procedures, and institutional culture. These problems are not all easy to solve, but acknowledging that they are problems and working to solve them is crucial for disabled students and the entire Bryn Mawr community. Some steps are simple, such as eliminating an archaic swim test that explicitly values physical ability. Others are more complex, such as rethinking the way that students get information about health insurance. The existing system of higher education consists of countless obstacles to the success of disabled students. By putting in the necessary work to address its own issues, Bryn Mawr can contribute to a rethinking of higher education that includes the experiences of disabled students.