



# Queer Crip Enrollments

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# Outline

Why this study? Why us? Why now?

Queer Crip Phenomenology

Queer Crip Experiences

- Failing and lack of support

- (In)voluntary hospitalizations and systems of surveillance

Structural Barriers

- Administrative (mis)trust

- Basic needs

Discussion: Resistance & Belonging

Recommendations: Queer Crip Failure, Crisis Response, Basic Needs

# Why this study? Why us? Why now?

Our Positionality

“Mental Health” in Higher Education

Shifting the paradigm

Queer and Crip Theory as Higher Education Praxis

Queer, Mad, (labeled as) Mentally Ill, Neurodivergent, and/or Disabled (QMMIND)

# Research Questions

1. How do QMMIND college students experience college enrollment?
2. What structural barriers exist that affect QMMIND enrollment patterns?

# Queer Crip Phenomenology

(Dis)orienting lived experiences in relationship to normative cultures.

Queer and crip theories serve as a framework to interrogate the ways higher education upholds cisheteronormativity (i.e. social mechanisms that privilege cisgender and heterosexual identities over queer identities) and compulsory ablebodiedness and ablemindedness (i.e. social mechanisms which encourage/force an 'ideal' bodymind upon individuals, p. 5).

# Co-Researchers

Co-researcher	Location	Institution Type	Enrollment Type	Queer Identities	MMIND Identities	Other Salient Identities
One	Southeast (U.S)	Private, 4-year and above, large	Masters	Gender fluid, Pansexual, Queer	ADHD, Autism, Neurodivergent	
Two	Eastern Canada	Public, 4-year or above, large	Ph.D.	Queer, Nonbinary,	Lived Disabilities, Mental Health Issues, Neurodivergent	Indigenous, Pagan
Three	East Coast (U.S.)	Public, 2-year, small	Community College Student	Nonbinary, Queer	ADHD, Dysthymia, CPTSD, Neurodivergent, Disabled	
Four	Midwest (U.S.)	Private, 4-year or above, large	Undergraduate	Bisexual, Cisgender	ADHD, PTSD, Depression, Anxiety, Neurodivergent	Jewish
Five	Eastern Canada	Public, 4-year or above, large	Undergraduate/Professional Degree	Trans*, Bisexual	CPTSD, Major Depression, Generalized Anxiety	Southeast Asian, QTPOC, Shi'a Muslim

# Co-Researchers

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Six	East Coast (U.S.)	Private, 4-year or above, small	Undergraduate	Queer, Nonbinary	Neurodivergent, Mad, ADHD	
Seven	East Coast (U.S.)	Public, 4-year or above, large	Undergraduate	Trans*, Queer	BPD, dysthymia, bulimia nervosa, Gender dysphoria, FUBAR	Religious
Eight	Midwest (U.S.)	Public, 4-year or above, large	Undergraduate	Lesbian, Sapphic	ADHD, major depressive disorder, Neurodivergent, Mentally Ill	Former Catholic
Nine	Midwest (U.S.)	Public, 4-year or above, medium	Undergraduate	Bisexual	ADD, Depression	
Ten	Midwest (U.S.)	Public, 4-year or above, medium	Undergraduate	Nonbinary, Pansexual	ADHD, CPTSD, B.P.D Neurodivergent	

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# Data Collection and Analysis

3 semi-structured interviews via Zoom

- Past Reflection
- Present Reporting
- Future Dreaming

Hermeneutic analysis with a queer crip lens

- Searching for moments of (dis)orientation (Ahmed, 2006)
- MMIND identification rather than as a symptom of queerness

# Results

## Queer Crip Experiences

- Failing and Lack of Institutional Support
- (In)voluntary Hospitalizations and Institutional Surveillance

## Structural Barriers

- Administrative (Mis)trust
- Basic Needs

# Queer Crip Experiences: Failing and Lack of Support

*There's also an emotional component of [failing out of college]. The emotional impact of these challenges for people and of failure because this is when people chart out a little life path for you, you can go to trades school, you can go to college, you can do the thing, they're not like 'you can go to college and then flunk out. And then, go to college and flunk out again.' That is not on the map. And, it's upsetting, and it really feels bad and introduces a lot of shame and self-doubt and hopelessness... What [support] is there for people who have already fallen through the cracks? (Co-Researcher 3)*

# Queer Crip Experiences: Hospitalizations and Surveillance

*I was psychotic. I did not have any thoughts or threaten or express anything like that I wanted to harm myself or anyone. I did not. I know I did not behave aggressively or anything. My mother was there and I didn't have a choice to go in the hospital....But once we were there, [hospital staff] told me that I can either go voluntarily or I would be put there involuntarily. So it's not voluntary. I guess that's technically coerced.*

(Co-Researcher 6)

# Structural Barriers: Administrative (Mis)trust

Experiences with carceral crisis intervention

Masks and selective disclosure

Mitigating the impact of stigmatized diagnoses (e.g., some personality disorders)

# Structural Barriers: Basic Needs

*And I realized very quickly it didn't seem worthwhile to pay that amount of money for...a sociology degree. Even though it's still a big love of mine...I don't think that as a poor person I can justify having a degree like that. Like study for the sake of study. When it takes so long to get to a point where you can actually study what you want just scares me to have all those years of potential financial instability in front of me. (Co-Researcher 5)*

# Discussion: Resistance & Belonging

The role and impact of Behavioral Intervention Teams

Levels of transparency

Campus Climate Microaggressions (Renn, 2022; Woodford et al., 2018)

Queer Health Rebels (Abrams & Abes, 2021; Kafer, 2017)

Access to Basic Needs support (Rehr & Regan 2022; Hope Center, 2021)

# Dreaming about Accessible Futures

Take a moment, to imagine what an accessible university could be for you, your community, for QMMIND students, staff and faculty?

- What no longer creates unnecessary barriers?
- What, if anything, replaces those barriers and offers care and support?
- What unmet needs are now met?
- What queer disabled bodies and minds are allowed flourish in this queer crip future?

# Recommendations

## Queer Crip Failure

Challenging admissions processes and the role of trauma and failure

## Crisis Response

Question connections to police intervention and invest in non-carceral crisis response

## Basic Needs

Invest in basic needs support (i.e., housing and food) and outreach to students who notify your institution about lack of support

# Selected References

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