NO DOGS ALLOWED: A QUALITATIVE STUDY ABOUT INVISIBLE BARRIERS FACED BY THOSE WITH DISABILITY

by

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DEDICATION

This is dedicated to my loving parents for constantly supporting me and for encouraging me to go to Grad School. Without their constant love and their enthusiasm towards my studying I would not have been able to have made it through school.

This study is also dedicated to all of those that utilize Service Animals or train Service Animals. You all are a part of something so much bigger than you realize by living your everyday life. Thank you for being so willing and so brave to conquer each day.
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ABSTRACT

Service Animals (S.As.) are becoming more common throughout the United States and are seen more frequently on college campuses. This study uncovers the lived experiences of S.A. handlers on college campuses nationwide, to further understand the exclusion or inclusion that S.A. handlers experience throughout their everyday life. Utilizing Critical Disability Theory and Organizational Communication lenses through a series of open-ended questions, this study analyzes a handler’s experience with their S.A. Adopting a qualitative lens, I conducted one on one interviews. It filled a need for academia as present research on S.As. typically focuses on quantitative research. I was able to uncover moments where dialogic practices occurred or where dialogue would make a difference. The three main themes that emerged were: 1) Faced Barriers, 2) Need to Educate, 3) Felt Support. Through these themes, I was able to uncover that the real problem that is being faced by S.A. handlers is microaggressions. The goal of this study is to help mitigate the amount of exclusionary practices that S.A. handlers experience on college campuses. I discovered two actions that can be taken: acting as allies against microaggressions and advocating how universities can better train their staff on how to handler interactions with S.As.
# TABLE OF CONTENTS

DEDICATION ........................................................................................................................................ iv

ACKNOWLEDGMENTS ......................................................................................................................... v

ABSTRACT ............................................................................................................................................. vii

CHAPTER 1: INTRODUCTION .................................................................................................................. 1

CHAPTER 2: LITERATURE REVIEW ......................................................................................................... 7

  Service Animal ..................................................................................................................................... 7

  Microaggressions ................................................................................................................................. 9

  Organizational Communication .......................................................................................................... 10

  Critical Disability Theory (CDT) ....................................................................................................... 12

CHAPTER 3: METHODOLOGY ................................................................................................................ 19

  Dialogue ........................................................................................................................................... 19

  Qualitative ......................................................................................................................................... 24

  Participants ......................................................................................................................................... 25

CHAPTER 4: ANALYSIS .......................................................................................................................... 27

  Theme 1: Faced Barriers ...................................................................................................................... 28

    What Does Your S.A. Do? ................................................................................................................. 29

    Why Do You Have An S.A.? .............................................................................................................. 32

    Produce Your Papers ....................................................................................................................... 34

    Mistaken Identity ............................................................................................................................ 40
Avoidance .................................................................................................................45
Theme 2: Need To Educate .........................................................................................48
  Educate Non-Handlers ............................................................................................49
  Teaching The Importance Of Consent .....................................................................54
Theme 3: Felt Support ...............................................................................................59
CHAPTER 5: DISCUSSION ..........................................................................................66
  Accessing CDT ........................................................................................................66
  Macroaggressions Versus Microaggressions ............................................................70
  How We Help ..........................................................................................................72
REFERENCES ..........................................................................................................77
APPENDIX .................................................................................................................81
CHAPTER 1: INTRODUCTION

Service dogs are becoming more prevalent in today's society that confronts the divide between ideals of institutional inclusivity and the reality of discrimination. This is evidenced by court cases occurring with Service Dog discrimination all across the United States: California, North Carolina, Arizona, and New York (Honan, 2019; KTAR, 2020; Teauge, 2019). Imagine for a moment that you are one of the people in one of these cases; for example, you are Bill Larson, a retired Air Force veteran who now lives in Phoenix, Arizona, and suffers from transient ischemic attacks often called mini-strokes (KTAR, 2020). You received a Service Dog that would help detect when these attacks are going to occur and allow you to get yourself to a safe place to help you minimize harm to yourself. Having this peace of mind would make you feel like you have a whole new approach to life because you can confidently move forward, knowing that your Service Animal will help you out. So you decide with this newfound confidence of your Service Animal to go out to a sports bar to watch the local game, but upon the arrival, a wait staff member tells you that you are not allowed to bring your dog into a restaurant. So you ask for the manager, and the owner comes out, you continue to explain to him that your animal, Whopper is not just a dog but is a working Service Dog. The owner still refuses to serve you because of your "dog" that you have. Larson was turned away because he is reliant on a Service Dog, this is just one example of discrimination for utilizing a Service Animal.
These small forms of discrimination are the starting points of how we can begin to understand the lived experiences that individuals who utilize Service Animals experience. Individuals that rely on these Service Animals should not be questioned so extensively about their Service Animal, and they should be allowed to go about their life as they please.

Continuing with issues of Service Dog discrimination on campuses, think about being diagnosed with post-traumatic stress disorder, major depressive disorder, attention deficit hyperactivity disorder, and a learning disorder. You begin to do research and understand that you can train a Service Animal, specifically a Service Dog to help detect when these panic attacks are about to happen. This example is the story of Krya Alejandro, who was diagnosed with the previous conditions and decided to train her 8lb. Pomeranian to detect her panic attacks (Alejandro v. Palm Beach State College, 2012). Upon trying to utilize her S.A., she was met with opposition from Palm Beach State College Disability Services when they said her documentation was not adequate to allow her to bring her S.A. to class with her. Alejandro continued to bring her S.A. to class with her. She was promptly escorted off of campus by security and subjected to multiple court hearings to try to prove her need for a S.A. This caused her to experience much more psychiatric strain because of the stressful nature of the court proceedings. It should not take multiple court proceedings to be able to utilize your S.A. on a college campus.

According to Mark Trainer with ShareAmerica.Gov, in 2016, approximately 500,000 Americans utilized a Service Dog (2016). To further define what a Service Animal is it is defined by the Americans with Disability Act (A.D.A.), is an animal that is trained to perform a specific task or function to help their handler (Brennan, 2019). In the
state of Idaho, they recognize two categories of Service animals: Service Dogs and Service Dogs in Training, which are being trained through a Service Dog school but are required to have an identification card and visual markers that state the dog is in training (Idaho Statute Title 56 Chapter 7, 2019). The state of Idaho just recently changed the law on Service Dogs in Training after understanding the need to revisit the language used to define these animals. Service Dog handler refers to an individual that identifies as having a disability requiring the use of a Service Animal. Conversely, Service Dog trainer relates to individuals who do not need a Service Animal but train them.

The three major universities in Idaho: University of Idaho, Idaho State University, and Boise State University have differing policies in regards to Service Animals. Boise State and Idaho State both resemble that of the A.D.A. fairly closely and allow free access to their campus towards Service Animals (Boise State University, 2017; Idaho State, 2018). They do not put many stipulations on individuals that utilize a Service Animal. They only ask for some additional paperwork for those that are staying in the dorms. The University of Idaho allows Service Animals on campus; however, they ask that individuals with disabilities clear this ahead of time with Disability Support Services (University of Idaho, 2018). This is technically a violation of A.D.A. laws. Also, any employee that has a Service Animal in Training is not allowed to bring it to campus while they are working. Two out of the three large universities in Idaho are up to date on Service Animal laws; however, one is still falling behind.

Society and individuals alike still have a lot of questions on how to identify and to treat those who utilize a Service Animal to function. One area that warrants our attention is confusion regarding organizational support of service animals. Organizations are still
unsure how to treat individuals that rely on Service Animals (S.As.). One can capture this uncertainty within an organization's policies. With the change in landscape, ambiguity functions within the enforcement of rules and procedures. Looking at these policies reveals effects on the individuals utilizing a service animal. Specifically, how organizational policy shapes their experiences.

Through this literature review, it should become more apparent of how we address those with disabilities in academic writing, as well as further understanding how they interact within an educational organization. To address this intersection, I turned to disability studies literature as a foundation for the theoretical lens of this project to examine how persons with disabilities fit into organizations and I also uncovered how those same organizations fail them in the face of inclusivity. To make this connection, I utilized dialogue, as it can either help or hinder an individuals' ability to be a part of the organization. I used interviews to capture the experience of this marginalized group in an effort to better connect with them with the support and resources that they need.

The scope of Critical Disabilities studies understands how different individuals identify their disability and how they choose to accommodate their disability. I am very interested in focusing on the lived experiences that these individuals have and how their S.A. has helped and hindered them. I utilized dialogism because when individuals communicate about their relationship and or experiences within organizational structures, this produces dialogical wisdom. This study can benefit those with S.As. and organizations. For those with S.As. interviews open a space for them to be heard and to help influence the policy that affects them. This project also benefits organizations by providing them more support for those with S.As. and making sure they are more in line
with legal standards. I conducted one on one interviews with individuals that rely on S.As. to function and navigate through their life to account for lived experiences. Through interviews, I found moments of strong support or moments of discrimination. I utilize these qualitative interviews to uncover further the experience of individuals with a disability and how they navigate life with an S.A. Qualitative interviews allowed for personal accounts of experiences instead of assuming their experiences. Through qualitative interviews, it also fostered the creation of dialogue by having meaningful conversations with these individuals.

I am at a unique vantage point for this study as I am both a Service Dog trainer and involved in academia. It presents a perfect position for me to help showcase the voice of those that are marginalized and may not be able to help show their needs to organizations. There is currently a massive gap in academia on Service Dog literature and coverage, since it is a new emerging category. During my initial research, I only found quantitative studies coming out of psychology departments. These studies focus on quantifying identity construction instead of rich lived experience. Through this research, I better articulate the experiences of those that rely on a Service Animal and how organizations can be more inclusive of those individuals.

I analyzed the experience that disabled individuals have had when trying to utilize their service animals in public places. The A.D.A. clearly states that there should only be two questions that should be asked to S.A. handlers; however, in my own experience as an S.A. trainer, I have been asked many more questions and almost forced to provide unlawful articles. I wanted to understand better how individuals with S.As. are either included or excluded through different organizations. I am curious about this subject in
particular for a few reasons. The first reason is that Service Animals are a relatively new
medical aid that is only now starting to become more popular. With this increase in
presence, it brings me to my second point that a lot of organizations are unsure how to
include individuals that utilize S.As. It is crucial to study and research this topic because
the amount of literature on Service Animals is not currently significantly developed. The
underdevelopment in writing on S.As., especially in academia, presents a lack of focus on
the handler or their lived experiences. Instead, it takes a much more quantitative
approach, which brings me to my reasoning for wanting to approach the topic of S.A.
inclusion through a communicative approach while grounding it in qualitative research.

I conducted qualitative interviews that analyzed the lived experiences of those
that utilize a S.A., to see how they have either been included or excluded by the
institution that is academia because we do not always question the institution. This
thesis engages with Service Animals, Organizational Communication, Critical Disability
Theory, Dialogue, and Qualitative interviews furthering our understanding of their lived
experience. Through this understanding, I can pass this information along to
organizations to help them make more inclusive efforts towards individuals that rely on
S.A. as my goal is to make the barriers to entry non-existent. When beginning to analyze
those that rely on a S.A., it is essential to base it in theory that helps not only situate those
that identify as disabled but also helps to define it. Critical Disability Theory (CDT) is
culturally and historically situated, which is very important for the new place that we are
with changes in policy beginning to be made. CDT is a great way to analyze the
experiences of those that rely on S.As.
CHAPTER 2: LITERATURE REVIEW

When I first became interested in the field of Service Animals (S.As.), this prompted me to analyze what research is currently out there. Once I familiarized myself with what research was out there, I realized that there was a significant gap in our academic discussion; thus I situated my thesis within this gap. The gap that I am referring to is the amount of academic literature about S.As. There is little to no research on S.As. from a communicative approach that is based on a qualitative approach. A majority of research that exists comes from the department of sociology or psychology, and it is quantitative. This is not problematic, but it is limiting. Through this study, I created a platform to make positive changes for those that rely on a S.A.

Service Animal

The first place to start is to better understand the definition of a Service Animal (S.A.), which is commonly known as Service Dog. According to the Americans with Disability Act, a Service Dog is "any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability." (Brennan, 2019). This definition helps the general public to understand the term Service Dog. Also, the use of a S.A. is not limited to a dog it could also be a miniature pony. However, a dog is the most utilized form of a service animal. S.As. should not be confused with emotional support animals (E.S.A.). According to the A.D.A., an emotional support animal is "used as part of a medical treatment plan as therapy animals; they are not considered service animals
under the A.D.A.” (Brennan, 2019). These definitions help clarify the difference between the terms Service Animal (S.A.) or Emotional Support Animal (E.S.A.) within this paper. This separation of words must be differentiated, so it is clear to the reader what is being referred to, as well as have a better understanding of what the Americans with Disability Act considers the differences to be.

In a study conducted by Mills (2017), approximately half of Service Dog handlers report experiencing discrimination due to their use of a Service Dog. Service Dog handlers with invisible disabilities are more likely to experience discrimination than those with visible disabilities. Visible disabilities are some visual indicator that shows that the individual is disabled, i.e., wheelchair, cane, etc. Invisible disabilities include but are not limited to anxiety, PTSD, seizures, and diabetes. These lists are not all-inclusive, so they are missing some visible and invisible disabilities; however, a vast majority of disability is represented within the categorization. Service Dog handlers with invisible disabilities are more likely to be questioned about the legitimacy of their disability and the need for a Service Dog. In some cases, the adverse social effects of a Service Dog may outweigh its benefit as a type of assistive technology. There is a need for education on the vital role of Service Dogs and Service Dog etiquette – how the general public should behave around someone using a Service Dog.

Through this education, organizations, specifically, universities, can make more thoughtful inclusive efforts towards those that utilize S.As. To indeed be inclusive of this marginalized, underrepresented group, there needs to be more understanding. One area in which S.A. handler's face discrimination is through microaggressions.
Microaggressions

Microaggression has often been looked at through a lens when dealing with racism in the modern-day world. These are brief interactions that result in degenerating messages sent to those that belong to a racial minority group (Sue, Capodilupo, Torino, Bucceri, Holder, Nadal & Esquilin, 2007, p. 273). Augie Fleras describes it as, "microaggression platform is no longer framed as intent but about impact; not something inherent in an act but reflective of situational circumstances; not the 'out there' but the 'in-between here'; not the formal and abstract but people's lived experiences;" (Fleras, 2016, P. 3). If the lived experience has an impact upon the other, it is a microaggression. It could be done unconsciously through the culture surrounding the individual.

Microaggressions, while usually applied towards racial experiences, can also be expanded to analyze experiences of those that are disabled because of their minority group status.

The shift of using microaggressions started to occur in a few different studies throughout the years. It was used to look at women with visible and invisible disabilities, "When we study experiences of microaggressions against women with disabilities, we are examining how stereotypes, prejudice, discrimination, and ableism combine against the stigmatized, generally by persons with more power (able-bodied) against persons with less power (people with disabilities)" (Olkin et al., 2019, P. 758). They can begin to look at how disabled people are experiencing these microaggressions, much like people of color in racial minority groups (Keller & Galgay, 2010) (Timm, 2002). All three of these studies identified that disabled individuals, whether they have a visible or invisible disability, experience microaggressions. It is a modern-day, subtle form of
discrimination that disabled people experience. It can take many different forms from a joke to an overt comment. Kristin Conover and Tania Israel found that those with disabilities experience microaggressions in their everyday life (Conover and Israel, 2019). They identified that these microaggressions fell in line with prejudices and discrimination towards those with mental or physical health disparities. Shanna Kattari explored more about microaggressions induced by ableists, "One way in which ableism is perpetuated is through microaggressions, or acts of aggressions that occur at the more interpersonal—or micro—level." (Kattari, 2019, p. 1). Microaggressions are created at the interpersonal level in these one on one engagements. Microaggressions can lead towards handlers that utilize S.As. being excluded from their college community. This could then lead to more microaggressions occurring because of the lack of education that faculty or peers receive on S.As.

**Organizational Communication**

Looking at Organizational Communication identifies that we live in an age where communication and organizations are interdependent upon one another. This means that they cannot be separated because one will affect the other no matter what situation occurs. The organization that members belong to shapes their identities (Keyton, 2011). Organizations directly form the way that persons interact with others and help create new normative practices. When better trying to understand the methods that occur within organizational communication, it is crucial to include collaboration within this definition. Joanne Keyton defined collaboration as a "Type of interaction in which individuals, or teams or organization members, work together to reach a common shared goal, activity, or production" (Keyton, 2017, p.1). Collaboration is an essential practice that exists in
organizational communication. It helps to demonstrate the ability that persons of various backgrounds have to work together.

Now adding in the critical element of organizational communication helps to change the focus a little bit. Mumby describes critical organizational communication as the "discourse of suspicion" (2013, p. 21). Critical theory focuses on analyzing power structures that are set into place; however, these systems remain hidden. That is why the focus is on trying to understand what power structures are affecting communication and creating discursive closures. As I will discuss in depth later, discursive closures are the way that dialogue becomes limited by practices that set forth to limit the communication within an organization. Discursive closures impact the way persons operate within an organization because of the static social systems.

To help lead into Critical Disability Theory (CDT), which will be talked about more in-depth later on, Ashcraft (2000) made the comparison of feminist studies to critical organizational communication studies. She analyzed the way that critical feminist scholars have more personal identity within their organization and use this to help define who they are. The feminist addition can be carried over to how we look at members who operate under CDT and are within an organization. They need to find inclusion and help to establish a piece of their identity to be established within the organization.

If we are aware of these attempts, we can start to be more inclusive of those that are being marginalized. Using Critical Organization Communication Studies leads us back to our primary purpose of the study of being critical of the Academy, which is often overlooked because we are so focused on critiquing things outside of it. To ground this study theoretically, it is essential to use a theory that accepts and engulfs the relative and
historical aspects of the participants, as well as the lived experiences of the participants of this study. That is why the need for Critical Disability Theory (CDT) is imperative for this research.

Critical Disability Theory (CDT)

Disability studies is a growing field that emerged in the academic and professional world during the 1970s, inspired by those with a disability wanting to have a voice (Meekosha and Shuttleworth, 2009). Disability studies provide an excellent platform for other areas of study to grow as it gives a frame for interdisciplinary work to occur. Additionally, CDT allows for new fields to emerge from it. CDT was a new way of starting to give those with disabilities a better voice in society, highlighting autonomy as opposed to historically focusing on institutionalization. Disability studies is a social model to analyze disability; this sometimes is overlooked by other departments trying to use terms such as rehabilitation or specialized education departments that badge themselves as disability studies (Meekosha and Green 2004). Scholar's identified a need to take this social model of looking at disability and to add a more communicative approach to it (Corker, 1999; Leonard, 1997). Through looking at this more communicatively, we can further ourselves from the discursive closures that are being created and focus on the individual with the disability instead of championing them. Corker began to use a post-structuralist critique to challenge the dichotomous and limiting ways of thinking about disability (Corker, 1999). The call to turn disability studies (D.S.) into a more critical approach is what created a paradigm shift from D.S. to Critical Disability Theory (CDT). Disability studies provided us with the social model and recognized a previously marginalized group of people. However, without the ability
to critically analyze the field, it creates challenges for those who are disabled and limits the voice that they have. Meekosha and Shuttleworth (2009) see CDT as something that needs to keep being reevaluated and tweaked for it to remain productive and to be useful in helping those with disabilities. This focus on trying to help better the individual that identifies as disabled is why there needs to be a shift towards critical understandings to help change the fabric of human societies and to create a better social world for all people to operate and function within.

In 2008, Critical Disability Theory (CDT) conceptualized a way to analyze disability theory better while applying a critical lens or tradition towards it (Hosking, 2008). Through this critical lens that CDT takes, it helps better explain oppression while also still transforming society. It allows a new way to understand better how society defines what a disability is instead of using a 20th-century definition which defines disability as a medical condition or something that was prescribed by a doctor. CDT presents disability as being a current characteristic that an individual has that puts them at a disadvantage to a non-disabled person.

As a model, CDT helps to be inclusive by presenting a definition that takes into account normalization. Hosking's description of CDT, "CDT is based on a social model of disability which recognizes disability not as the inevitable consequence of impairment but as a complex socially constructed interrelationship between impairment, individual response to impairment, and the social environment . . ." (Hosking, 2008, p. 16-17). It allows for persons who don't feel that they fit in with that is normalized in modern society as being able to identify as disabled. It is a social construct rather than the result of an unavoidable impairment that persons must endure. Hosking defines it as "the social
disadvantage experienced by disabled people is caused by the physical, institutional and attitudinal (together, the 'social') environment which fails to meet the needs of people who do not match the social expectation of 'normalcy' (2008, p. 7). This definition helps to bring awareness and power to those who are disabled in some capacity, yet it does not limit their ability of what these persons can do.

Multidimensionality is a way that Hosking allows for CDT to be all-inclusive of many different types of people. Persons who rely on a service animal must jump through hoops to function as "normal" in society. The concept of normalization is a discursive closure that occurs when we try to create a dialogue with one another (Deetz, 1992). Discursive closures are where an individuals' speech is interrupted either explicitly or implicitly by actions that occur. These closures are limiting persons and what they can share rather than helping to empower them and allowing them to be a part of the conversation.

Disability Studies, as mentioned previously, are multidisciplinary as well as interdisciplinary (Meekosha and Shuttleworth, 2009). The field has roots in postmodern feminism, which helped to point out the subjectivity and embodied lives within disability. CDT focuses on the cultural and linguistic setting of trying to define what disability includes, the dualism of impairment and disability. CDT argues against bio definitions of disability and instead focuses on the linguistic and cultural interpretations of it. However, one drawback to the fluidity of CDT is that because the definition is so broad and inclusive that it could potentially make it less useful when trying to talk about persons with disabilities. Disability studies is still an expanding field that is growing and finding its place within academia, so scholars need to be careful using the tag (CDT) to
describe their area and make sure that it is something that fits into this field. CDT guides by using unique interdisciplinarities and productive debates on a range of issues and solutions. What unites CDT theorists is "an agreement that disabled people are not valued and discriminated against, and this cannot be changed simply through liberal or neo-liberal legislation and policy." (Meekosha and Shuttleworth, 2009, p. 65).

CDT aims to get away from association with the medical model of disability, instead rewriting a narrative that outlines society. Theorists want to take control of the told narrative and analyze the power relations of those with disabilities. There is a lack of voice of the disabled persons in Disability Studies (Linton, 1998). The focus is on the individual and how disability is an isolated/individualized problem rather than a societal issue. Linton wants there to be more of a present voice from those who identify themselves as disabled within academic literature. I can respond to Linton's critical call as an individual that rests at the intersection of academia and disability. As a Service Dog Trainer, I have experienced many of these barriers as a person who frequently has a Service Dog in Training accompanying him. The first-hand narrative is something that does not readily exist in the world of academia, which creates a limit in understanding the experience of this marginalized group.

CDT helps to refer to the lived experience that individuals face trying to transform the circumstances that oppressed individuals function under (Hall, 2019). Instead of defining what disability is, CDT looks at how individuals hold less power over others. Hall (2019) goes on to suggest a course of action for researchers, "the task of critical disability theory is to analyze disability as a cultural, historical, relative, social, and political phenomenon." CDT has complex cultural priorities that help to explain since
it falls within the realm of Disability Studies. This study will touch on the five points of analysis that Hall mentions. It will seek to analyze how culturally individuals that utilize S.As. are to function within the world. It will help demonstrate historically how institutions have either become more or less inclusive with the rise in people using S.As.. It will be relative because it is looking at participant’s current lived experiences. Lastly, it will help to analyze the social and political phenomenon that surrounds S.As. with the A.D.A. and how these individuals must interact with others. CDT is the perfect platform to use to demonstrate the lived experiences of those that utilize S.As..

CDT has connections to issues of race, class, gender, and sexuality. CDT takes into account the current culture that surrounds the individuals that are involved, and it situates itself into society. It is located historically because the definition of disability is evolving and growing with the help of CDT. With this theory, it allows for those with a disability to take previous definitions of disability and to help make it more encompassing for them. Hall continues to talk about CDT as having a relative, social, and political phenomenon by the way that society situates it. The idea that it affects various types of people in different ways makes it such a prevalent issue to study.

CDT starts with disability but never ends with disability. This is to say that disability is the platform from which we can start branching out to think of related topics such as political, theoretical, and practical issues that are all interrelated (Goodley, 2012). It demonstrates that CDT can stand up on its own as a theory but that it also has helped to provide links for other types of theory. As mentioned previously, CDT has ties to queer theory and feminist theory; however, these are not crucial for CDT to stand upon itself. It can position itself with its multidisciplinary approach, Goodley (2012) mentions that
CDT is trying to separate itself from being defined by bodily limits for two reasons. The first being that just because an individual has visual differences from what is considered normal by society does not mean that the individual is disabled. This is why CDT chose to distance itself from the medical model of disability. The second reason is that disability is potentially traumatic. There needs to be an observation and an understanding of what trauma this individual has possibly gone through. This can be seen more commonly in psychological disabilities but is not limited to only those.

Critical Disability Theory and Organizational Communication have overlapping ideas. They both tend to take a critical approach to analyze situations and to point out the flaws that are surrounding an issue. They both seek to improve how society operates, and that is why Organizational Communication will be a significant benefit to this study. Organizations are continually trying to find ways of how they can be more inclusive to their staff. 35% of Americans that have some form of disability work within the United States (Kraus, L., Lauer, E., Coleman, R., & Houtenville, 2018). Those that are disabled are working within organizations, so there is an importance for these two fields to be used in conjunction to facilitate better a plan to help individuals with a disability.

Service Dogs, Organizational Communication, and Critical Disability Theory are three essential categories that I utilized to fully understand the lived experience of those that utilize S.As.. Without the use of them I will not be able to truly get to what it is that I am concerned with. This leads me to my guiding questions where I hope to uncover these lived experiences. GQ1: How are individuals that rely on Service Animals (S.As.) included or excluded from organizations that they belong to? GQ2: What invisible barriers exist to those that rely on Service Animals (S.As.) in their every day lives?
Through the use of these guiding questions, this is how I am going to be able to start to uncover the lived experiences of my participants. Now that we have the theoretical background outlined for the foundation of this study, it is crucial to establish the methodology in which we further investigate this phenomenon.
CHAPTER 3: METHODOLOGY

One on One interviews were conducted with individuals who utilize Service Animals on a school campus in order to engage in a dialogue with hopes of finding out the lived experiences of these individuals. This also allows for the questions to be more uniquely tailored for the participant, which creates greater flexibility in the type of information that can be revealed. That is why I used a qualitative methodology in order to uncover these lived experiences because they allow for moments of dialogue.

This study is intended to uncover the lived experiences of barriers to entry in specific barriers to enter into universities and schools. Since this is a focus and I am very interested in understanding more about these lived experiences that is why using dialogue as an analysis technique for uncovering these moments is important. I used dialogue to look for moments within my interviews. I am keeping the questions that are being asked to participants very broad in order to not inform or to illicit a specific response. Critical Disability Theory (CDT) is used as a social model within this study to further uncover how participants identify. CDT is used to understand how participants construct their identity within the society they are a part of.

Dialogue

The practice of speaking for others is very problematic and begins to lead to discursive closures (Alcoff, 1992). Discursive closures limit the voice and the power of those that are living out this experience. It creates a narrative that is someone else's interpretation of their experience instead of empowering them. In line with supporting
individuals that have some disability a better opportunity to thrive within an organization, it is crucial to allow for genuine dialogues to occur. Deetz (1992) identified seven different examples of discursive closures that occur. He identified naturalization as a discursive closure, which can be thought of as it has always been this way. Why think differently? This is how it has been since the beginning of time. Why would things change now? This illustrates nicely an uncomplicated way to think of naturalization. Next is neutralization. This is where things are treated as neutral. They are neither good nor bad. Topical avoidance is where the issue is avoided completely. A good example is Thanksgiving dinner and how there are certain topics that are best not to discuss because of the controversy that could arise. Next, there is the subjectification of avoidance, which allows members to avoid talking about how they really feel about certain issues, which limits the amount of collaboration that members can have. Meaning denial and plausible deniability is when you are having a conversation with a person and the topic is upsetting to you, and the other person then claims that they didn’t mean for it to come off that way. It also could include someone that says “no offense” after saying something rude to another member. Legitimation is another discursive closure that is discussed, which is using expert opinion to say that this is how things should be. Through using expert opinion, one can shut down the conversation; thus, preventing dialogue. Lastly, Deetz identifies pacification as the last discursive closure in his book. Pacification acknowledges the conflict but discounts the issues significance. All these different forms of discursive closure do have one thing in common, they limit the communication that can occur. Therefore, it is key that we break through these discursive closures that occur, so that we can get to true dialogue. Through discursive closures it also allows for the
power dynamics to stay in place. This limits the ability of individuals to break out of these power structures. We must begin to engage in genuine dialogic interactions to avoid these discursive closures and begin to work towards having a constitutive model of communication. Focusing on dialogue helps individuals have a voice by reducing discursive closures that are systematically created using a constitutive model of communication that allows for persons to co-create meaning (Ashcraft, Kuhn, Corren, 2009). Through co-creation of meaning, dialogue becomes a possibility within the organization. Instead of thinking of communication as the traditional sender to the receiver model with a message in between, this allows the message to be shaped with both persons making co-creation of meaning. Kevin Barge and Martin Little suggest that dialogue can be a relational practice (2002). It requires participants to be responsive to help engage in the dialogue at hand. Implies that all conversations are dialogic is excellent in theory. However, there is a problem with this because too often, these conflicts are closed, which creates discursive closures and systematic distortions, therefore, preventing dialogue from happening, as mentioned earlier. A great way to think of dialogue within an organization, attributed to Barge and Little, is dialogical wisdom, which is, "practical wisdom, that creates a way of taking into account the complexity of a situation when evaluating how to position oneself in the ongoing dynamic between single and multiple voices in organizational life"(2002, p.386). This is one-way that dialogue can provide members with insight about others that they come into contact with. The same approach can be used by organizations to facilitate a more meaningful conversation.
Another way to help define and understand dialogue is a study by Gergen, Gergen, and Barrett (2004) who identified five key characteristics of dialogue: originates in the public sphere, it is a form of coordinated action (collaboration), dialogic efficacy is bodily and conceptually embedded, it is historically and culturally situated in time, and lastly, it can be both positive and negative. By dialogue originating in the public sphere, this makes it a "form of intersubjective connection or synchrony" (Gergen, et al., 2004, p. 42). This shows the focus on public discourse as a creation of dialogue versus meaning-making occurring in the private realm. Dialogue is a form of coordinated action; this helps to show that dialogue becomes very collaborative and makes it a joint effort. It also follows the idea that it takes words that essentially mean nothing outside of specific contexts, but within a context, they have meaning. The example suggests in baseball the terms strike or home run; outside of the sport, they don't mean the same thing, but as a coordinated whole individuals have collaboratively accepted their meanings in baseball. Dialogic efficacy is bodily and conceptually embedded; this is suggesting that as scholars, there should not be a separation from the words and the life sphere. The language used is analyzed within the context that surrounds them because it is just as important as the language itself. Analyzing dialogue as being historically and culturally situated in time is an essential part of dialogue because people change, and so does the culture that surrounds them. This helps to link dialogue to CDT by really taking a critical approach into how to analyze the world around them. Through obtaining dialogue, it can have both positive and negative outcomes depending on what happens. People can become more intimate with each other through dialogue and the further understanding that they have. Others may terminate or suspend what is happening due to the adverse
outcomes of the dialogue. Their categories suggest the many forms that dialogue takes within an organization. This is very important to analyze because of the number of similarities that dialogue has to CDT. They both are historically and culturally situated in time, which is very crucial in looking at because this is how we can define disability.

Martin Buber (2003) sees dialogue in a different light. Instead, he views silence as a form of communication. Buber identifies that dialogue only happens if an individual is authentically there for the other by being actively present within the conversation. The individual is not talking at the other person but instead with them; this is the essence of communication. One needs to be aware of the other person.

Most importantly, a dialogue constitutes fundamental transformative. The most prominent aspect of engaging in dialogue is to become aware and treat others as thoughs. The member should be open to interaction to help encourage the possibility of dialogue. Individuals need to set aside their armor or traditions and put away their dictionaries. A dialogue will occur when persons abandon predefined notions of things, self, and others. As members, there is a moral obligation or a responsibility to always respond to the reality before us. Buber believes that we should engage in dialogue in everyday conversation.

John Shotter decided to focus on active listening, which aids in having a genuine conversation with others (2009). He promotes a different way of listening that better aligns with responsive talking and centers around a distinctive and recognizable sense of feeling of being heard. Listening helps to encourage a connection among people referred to as "joint action." Members of organizations need listening that accounts for their surroundings or backgrounds. It is important to remember that language does not
represent the world, but rather it creates relationality among people. The connection between Shooter and Buber manifests through the idea of dialogically responsive listening. They both believe that we must always respond to the reality before us.

Dialogism and Discursive Closures can help us to further understand microaggression that occur by providing a framework for understanding the experience. Microaggressions and discursive closures are not the same thing but they can both occur within an interaction. Discursive closures occur when dialogue cannot be achieved because of pre-assigned connotations of what disabled means. These negative connotations are what create these discursive closures. Microaggressions occur sometimes unknowingly depending on how questions are phrased to the S.A. handlers. This can occur by the comment or questions asked to the handler.

**Qualitative**

Through this, we can see how dialogue is a tool that we can utilize when trying to connect with others. It is a practice that we can utilize to further our understandings and our experiences with others. By combining dialogue with qualitative interviews, I advance the breadth of information that will surface within each conversation with the participants. Dialogism was used in order to understand the lived experience of my participants. Through utilizing dialogue I was able to create a connection with participants and to allow them a space to be open and vulnerable with me. Through engaging in dialogic practices I was able to truly learn more about the experiences of my participants and to be changed by what I learned. The interviews were conducted via phone call, and I will be recording them so I can focus more on what the individual is saying.
I am interested in exploring the experience of individuals that identify as disabled who utilize a S.A. and types of barriers they have experienced or not experienced (exclusion versus inclusion.) The only way to understand the personal inner experience is to conduct my research with qualitative interviews (Straus & Corbin, 2014; Maxwell, 2012). Through qualitative research, I begin to understand how meanings are formed through and in culture. Qualitative research helps to bear relevant truths that are situated within outside contexts (Lindlof & Taylor, 2002). I went through semi-structured interviews to ensure that I kept consistency in the questions that I am asking. The reasoning behind semi-structured is that it allowed me enough flexibility to learn more about the interviewee's individual experience, which is the real focus/aim of my study (Rubin & Rubin, 2005). I interviewed participants until I reached saturation of the information. All interviews were conducted via phone call and recorded so that I could transcribe them at a later date.

Once I completed all of the interviews, I transcribed the interviews so I could begin to code the information (Rubin & Rubin, 2005). I coded everything looking at it through a dialogic field and looking for common themes within the interviews. After coding it through dialogue, I began to understand what themes were presented as salient ideas.

**Participants**

Participants for this study were at least 18 years of age or older and utilized a S.A. on a college campus or another similar school setting. This guideline is set into place so participants will have lived experiences of utilizing a S.A. in a school setting. Participants will be recruited used snowball sampling and convenience sampling. The
snowball sampling was used by asking individuals that I know that utilize a S.A. if they know of other students who also utilize an S.A.
CHAPTER 4: ANALYSIS

For this study, I created a total of fifty-two single-spaced pages of transcriptions from five total interviews of individuals who have utilized S.As. on either a college campus, a high school campus, or both. The participants ranged in age from 18 years of age to 24 years of age. There were two females and three males, all participants have had their S.A. for at least a year and a half with the longest one being six years. Participants were from five states across the United States. The interviews averaged 44.1 minutes in length and were all conducted via phone calls as recommended through social distancing practices.

All participants were emailed a copy of the informed consent before the scheduled interview and asked if they had any questions before starting. Participants consented to me recording their interview. Following approval, participants read the ethics statement. Finally, I asked again if they had any initial questions before starting the interview. The types of Service Dogs utilized were: PTSD / Anxiety, Diabetic Alert, and Seizure Alert. All participants went through a series of open-ended questions allowing them to tell me their lived experiences. Explicitly, interviews permitted me to create additional communication about the phenomena of a handler’s experience with a service animal, as knowledge gained from interviews is “produced in a conversational relation; it is contextual, linguistic, narrative, and pragmatic” (Kvale & Brinkmann, 2009, p. 17-18).

Once I transcribed the interviews, I begin reading and re-reading the transcriptions looking for themes to emerge from the data.
To identify themes, I modeled after Braun and Clarke’s (2006) guide for thematic analysis. Braun and Clarke’s model includes the following steps: familiarize yourself with the data, generate initial codes, search for themes, review themes, define and rename themes, and produce a report of the themes. (p. 35). As key themes began to reveal themselves, I employed Owen’s (1984) suggestion of “recurrence, repetition, and forcefulness” as a means of recognizing important patterns (p. 275). Saturation became apparent after the third interview. I conducted two additional interviews to affirm that I had combed out the main themes and experiences of S.A. handlers. As Strauss and Corbin (1998) explained, “a category is considered saturated when no new information seems to emerge during coding, that is, when no new properties, dimensions, conditions, actions/interactions, or consequences are seen in the data” (p. 136). Upon going through the transcriptions again, my advisor and I begin to analyze themes more critically until three emerged: faced barriers, the need to educate, and felt support. I will now begin to describe these themes and the sub-themes that emerged within them.

**Theme 1: Faced Barriers**

The first theme that we identified was faced barriers, separated into five sub-themes: (1) attitudinal barrier: what does your S.A. do?; (2) attitudinal barrier: do you even need an S.A.?; (3) institutional barrier: do you have the documentation for an S.A.; (4) mistaken identity barrier: emotional support animals and (4) self-imposed barriers: avoidance. These five sub-themes all had a similar overarching theme of a barrier that created a difficulty for the participants who utilized S.As. to either enter into settings or function within settings where they met hostile attitudes. People do not seem to understand that Service Dogs can do so much more than only being a guide dog.
Participants experienced barriers from peers or professors as well as meeting institutional barriers. These barriers result in them not being allowed to enter spaces without providing some sort of documentation: a personal explanation or official documentation. All five participants encountered at least one of these types of barriers in their experiences.

**What Does Your S.A. Do?**

A reoccurring sub-theme was “What does your S.A. do?” Participants talked about how they were met with skepticism from peers about their need for an S.A. because they appeared to be “normal” even though they have different disabilities. Julianna discussed the badgering that she faces regarding individuals questioning the role of her S.A. Koa.

I was getting an S.A. for my diabetes; people would be kind of skeptical in a way like, “Oh, do you really need him?” And it is like yeah, he is like more accurate than the technology is, or he will alert before my Dexcom will because of the lag time. He is smelling things in real-time, and also he is smelling the change in the chemical in my body while the Dexcom measures the blood sugar levels in my interstitial fluids. It is like, what about having diabetes? Just because I am not blind or I have seizures, people are automatically like, “Do you really need an S.A.?” or “Is it really going to help you?” And it is like, “Yeah!” So, I think that is something that is so interesting, that people question the validity of diabetic alert dogs more so than if you were to say, “Oh, he is my seeing-eye dog or my PTSD dog.”

She identified that people were not aware and skeptical about the ability of her S.A. to be able to help her in everyday life. Her S.A. Koa was trained explicitly for her.
Koa can detect the rapid changes in Julianna’s sugar levels and alert her if her numbers are getting to high or dangerously low. Her S.A. helps maintain healthy levels and informs her when she needs to take medication or have a sugary drink. Koa is more accurate and able to detect these changes before the technology could, yet people still doubt his ability to help his handler safely. It shows an example of others questioning the effectiveness of her S.A.

A lens of CDT emphasizes the flaw in the previous model of disability as a biological definition. This short-sightedness would struggle to incorporate Julianna because her disability is invisible to those that do not know her—questioning what an S.A. can do outside of traditional uses highlights Hall’s concept of analyzing disability as being social. Julianna’s peers or random strangers out in society questioned the legitimacy or the medical benefits that Koa adds to her life. Microaggressions are seen throughout this experience, by others making judgmental comments about the effectiveness of Koa. It is crucial to turn our attention to her narrative because it shows the first-hand struggles of this attitudinal belief that S.As are just for blind individuals.

Ben, another participant, was met with others questioning his need for an S.A.

I’m like totally open about it because everyone can see the scar on my head, but sometimes people would be like super loud and obnoxious like, “What is he for?” I would tell them, but like people would like think I’m retarded. [sic] Yeah, like people would like open doors for me and pull my seat out for me at my desk. I would be like, “Guys, I am fully capable of doing this,” but people would just like keep asking “What is he for?” It’s just annoying because like yeah I have
a disability but I am not disabled. Like I was part of baseball for Boise State the whole next year, I’m like normal.

Ben consistently talked about how he was/is the definition of normal besides his removed brain tumor, causing him to have multiple seizures. His S.A., Boyd was trained to alert to Ben whenever he is about to have a seizure so he can prepare himself and make sure that he is in a safe environment as to not cause more harm by falling or hitting himself on nearby objects.

Ben talked about how he was very active in on-campus activities such as baseball and cheerleading for the school but acknowledged how he was always treated differently for having Boyd. While Ben notes that his condition technically classifies him as disabled, he talks about how he is no different from anyone else. He can still do everything that he wants.

Others would treat him differently because he utilized an S.A. on campus. People would be overly friendly to him and try to help him out when, in reality, he just wanted to live an everyday life. These comments are instances where microaggressions occurred, people treated Ben differently then someone who does not utilize an S.A. This experience was an example of an attitudinal belief that the use of a S.A. means a person has diminished autonomy. In this instance, Ben did not fit the criteria for the stereotype of someone that needs to utilize an S.A. and experienced this barrier of not being disabled enough. Since Ben does not fit the visual representation of what many believe warrants an S.A., he was met with hostility, making people doubt the legitimacy of Boyd. This created three troubling assumptions: (1) people assumed Ben was healthy and did not need to utilize Boyd; (2) people begin to ask personal, probing questions about his
medical history; or (3) people assumed that he was not capable of performing simple
tasks on his own.

Because of the “normalcy” that Ben exhibited, it created discursive closures with
those around him. It limited the amount of communication that was being shared between
him and his peers because they had preconceived ideas of Ben’s health. Through his lived
experience, it highlights the historical and cultural values of critically analyzing
disability. Historically, Ben acknowledges how others treated him before his illness
occurred and how other’s treatment is now different when he has Boyd with him. Also,
culturally because of the way his peers treat him and the ways they view his “normalcy”
as being consistent with someone who utilizes an emotional support animal (E.S.A.) Ben
discussed how this was hard on him because people no longer saw him as “normal” with
using an S.A. to help alert to his seizures.

Why Do You Have An S.A.?

People continuously question Ben’s use of an S.A. because of his physical
appearance. Ben also talked about other experiences on campus that occurred with a
professor that highlights out-dated assumptions regarding the role of an S.A.

Yeah, like my math teacher for calculus. After I introduced myself, she
was like, “Ben, you’re really normal.” She said that when I registered for classes,
she thought I was blind because she didn’t know that Service Dogs were used for
other things besides blind people. She said, “I am so glad that you are not blind, I
have never taught a blind student math before!” I was like, “no, I can see.”

Ben was met with apprehension from his professor about the thought of him
potentially being visually impaired. The professor displayed relief upon learning that Ben
could see. As Ben talked about these challenging moments, he utilized a lot of humor to help mitigate some of the seriousness of the situation. Throughout the interview, he would frequently tell of very tough experiences and then laugh about it. It was also another example of attitudinal barriers because his professor assumed that he had a specific type of disability. By seeing that he utilized an S.A., she instantly thought that Ben was blind when, as Ben would say, “I can see fine!” It was a reoccurring instance for Ben that people would assume his disability without actually talking with him because he does utilize an S.A.

Solving situations like these can occur by using dialogic practices instead of assuming the needs of the handler. If this professor had engaged in active listening and opened up a dialogue between the two, it could have prevented this discursive closure. This conversation created a discursive closure because there were already pre-identified issues that Ben was going to have formed by the professor. This lived experience creates tension for Ben because his professor would potentially not be able to help him or to teach him if he were to be visually impaired. By opening this door of talking about her shortcomings, it also creates an awkward space that Ben now navigates through. These barriers create uncomfortable interactions that people without an S.A. would never have to experience. College is already a sizeable scary place, and having a disability is already something that impacts the participants lived experiences. Still, by having others consistently doubting or questioning their need for their S.A., it is just placing another barrier in front of them that they should not have to hurdle. Now that we have covered the attitudinal barriers faced by handlers, it is crucial to unpack the institutional barriers.
Produce Your Papers

This sub-theme, to the overarching theme of barriers, identifies that establishment owners and workers asked participants to prove their disability to others to enter a public space. According to the Americans with Disabilities Act (A.D.A.), businesses can only ask individuals that utilize S.As two questions: (1) Is that a Service Animal?; (2) Is the S.A. trained to perform a specific task or function for its handler? They are not able to request that they provide documentation or reveal other personal information about their medical history to gain access. Justin told me his experience of trying to order a sandwich at a local shop in California,

“Are you blind?” And I’m like excuse me the shop was packed, it’s always packed, he’s yelling from behind the register. And I was like excuse me. He was like, “is that a guide dog?” I’m like, “no, I can see fine. He is a service dog, though.” And he was like, “I don’t care, you can’t have a dog in here.” So I was like, “well, he is my medical alert dog. So he is allowed to be with me, anywhere I go.” And again, he’s like, “I don’t care, no dog, get out.” So I kind of stood there for a minute, and he was like, “alright, I will talk to you when you get closer.” So I get up there, and he was like, “okay, I’ll take your order, but you have to sit outside.” And he was being very aggressive with me, so I was like, “I’m sorry, A.D.A. law you can’t refuse service or ask me to sit in a specific place because of my service dog.” And he was like, “you know what I have the right to refuse service to anyone, GET OUT!”

In this interaction, Justin faced with his S.A., Oliver, the owner of the shop, was not allowing him access to his restaurant. Justin talked about how this was a place that he
often visited before receiving Oliver. Since it was a small local place, the owner knew Justin and still was refusing him service because of Oliver. Justin relies on his S.A. to help alert to his changing blood sugar levels. Institutional barriers occur when an individual or organization use legality or policy claims to prevent access. The business owner claimed only guide dogs were valid S.As. doubting Justin’s need. Justin was met with a barrier to entry even though Oliver has received lots of training. The shop owner never asked the A.D.A. law questions, and upon being informed of them continued to deny access and service to Justin. Through this experience microaggressions occurred because of the disbelief that Oliver is an S.A.

Justin’s experience highlights three tenets of CDT: political (which includes legal aspects), relative (relational aspect), and cultural (social aspect). Politically, we see issues that even when referencing the A.D.A. law, the owner continues to deny him access because of Oliver. These laws are supposed to help protect those that have disabilities and utilize an S.A., but this owner had no regard for the law. The political implications of this is the laws set in place that protect Justin from experiencing discrimination. There are supposed to be organizations in place that enforce businesses staying in compliance with situations like these but unfortunately there is hardly ever any follow up. Relatively we see this as explicitly not acknowledging the vastness of disability and the needs that Justin has to maneuver throughout his daily life. This lived experience occurred in 2019, which shows that business owners still are not acting alongside the A.D.A. laws. It is relative because of how recent this situation was and it currently affects others like Justin. Lastly, culturally because Justin was a member of this community and had been frequenting this establishment ever since he was a young child; however, the addition of
Oliver highlighted an implicit culture of exclusion. It was a place that does not welcome those that are disabled. The culture that surrounds Justin in California needs to be analyzed in order for change to be made. Through disrupting the culture that surrounds S.As., change can be made from within.

Justin now has to worry that he will be yelled at or discriminated against because of his S.A. Oliver. This traumatic experience was preventable if the shop owner would have engaged in dialogue. Ashlyn, another participant, reflected on being asked to provide documentation at a doctor's office.

So I had actually been denied access by people. And so I had to educate them, and one time they actually told me that I couldn’t see my doctor until I presented them with papers. They said that they are not open to the public, so I would have to have proof, but that doesn’t even make sense. But once I told my doctor what happened, she had to go and educate the front desk staff. Their excuse was one you hear all the time that some people might have allergies to dogs. ‘I’m like that doesn’t matter, you can’t deny my access. I was so anxious about it since I had just gotten her that I went and got the papers and then I told my doctor, and she went up there and told them that they couldn’t do that.

Since Ashlyn had recently received her S.A. for PTSD and Anxiety, this caused her to start becoming increasingly anxious, and she complied with their orders so she could see her doctor. Ashlyn reflected on the experience with me and talked about how she was just so scared and nervous. It petrified Ashlyn, making her unsure what to do in the situation except comply. She was happy that her doctor went and educated the staff on the proper conduct for the situation so that something like this would not happen to
anyone else. Ashlyn experienced an institutional barrier by the staff that worked in the office and did not receive the proper respect and treatment for someone that utilizes an S.A.

Ashlyn is the prime example of why CDT functions as a necessary lens to evaluate the experience of those with S.As. While she appears “normal,” she has the invisible disability of PTSD & Anxiety, which is why she utilizes Libby her S.A. It creates a problematic occurrence because her appearance does not match her need for an S.A. This is why the need to move away from the medical model of experience where we can allow for invisible disabilities to be warranted. It falls in line with Goodley’s concept of disability being traumatic and not bodily. Looking at CDT’s tenets of relative (relational aspect) and historical (historic aspect), we can further uncover the critical concerns. Relatively, because of the recentness of this situation, it happened in 2018 in a doctor’s office where they should be up to date on the laws of A.D.A. It occurred in a medical providers office which health care is a service that all people should be able to access easily. Health care is relative to all people. This affects her ability to have a strong relationship with her doctor. It also creates more anxiety for her with the worry of being denied access. Historically, a policy precedent within the doctor’s office revealed discriminatory practices. This changed after Ashlyn advocated for herself. However, individuals protected under A.D.A should not be required to protect themselves further. Instances such as the one Ashlyn experienced need to be documented and corrected. Businesses that continue to discriminate and create barriers for individuals that use S.As. should be educated. This lived experience is essential because it shows the struggle that
Ashlyn faced just to enter her doctor’s office. Ashlyn now has to worry about how other medical providers are going to respond to her showing up at their offices with Libby.

The idea of potentially being turned away or told to produce some type of paperwork can worsen her anxiety. Utilizing Libby, a medical tool that is supposed to help with her diagnosis is potentially adding more strain. She continued to tell me about her experiences in Montana and the lack of knowledge that people possessed about S.As.

I got to the point where I carried around the A.D.A. papers that said how businesses could interact with an S.A. I would just show them the information and talk to them. They would usually realize their mistake and it would be good from there.

The hardest one though was that first one because I was so new to it, to having an actual service dog and being in Montana where they are not as open and understanding so that one was probably the biggest deal to me.

The experience she is referencing as the hardest one was the doctor’s office. She talks about how many times she experienced hesitation or resistance from businesses in Montana because of her using her S.A., Libby. It got so bad that she would carry around the A.D.A. law to help aid her argument in why she was able to have her S.A. with her in that establishment. Ashlyn was met with barriers to entry consistently and asked to produce papers that this became a regular occurrence to her. No one should have to experience resistance like this for them just to live their life. Institutional barriers like the right to service policies, create difficult situations for handlers. In some instances, the barrier can trigger the disability that the S.A. supports.
This lived experience makes an opportunity for us to look at Hall’s (2019) call to research the political aspect of disability. In Ashlyn’s case, she is forced to resort to showing organizations the A.D.A. law and explaining why she was able to take Libby with her to their establishment.

Resolutions can be found in these situations by engaging in a dialogue where she can explain the law. Similar to Ashlyn’s experience, Tony resorted to similar tactics to gain entry into different establishments.

We would just tell them we were allowed to have him in there but if they kept arguing we would just look it up and show them the A.D.A. rules. Yeah we also had like cards on us all the time that showed A.D.A. law.

Tony talked about how, when he received his S.A. in 2010 that most businesses were not aware of his rights to utilize his S.A., Bear, within their establishments. He told me about how his Mom would get very defensive of Tony and would continuously try to help him in these situations. Tony was met with institutional barriers by restaurants that did not understand his need for his Diabetic Alert dog. To help him gain access, he had to carry around the A.D.A. law to enter these establishments.

Tony’s lived experience helps to show the historical aspect of disability in regards to S.As because he received Bear in 2010. He talked about how things have improved in the past ten years and was thankful that many had taken the time to educate themselves. However, he identified that we were still far from where we should be on the education of S.As. Through experiences like these, we can begin to understand how the culture surrounding S.As has shifted throughout these past ten years. However, even with the change, there are still new and different struggles that handlers are experiencing today.
After Justin’s institutional barrier, he said that the owner responded with, “Well, whatever, I don’t care about the A.D.A., the A.D.A. is fucking stupid like I don’t care what they say I am going to do what I want.” Establishment owners like this are what creates these institutional barriers to entry for so many individuals that utilize and rely on their S.As to help keep them safe. No one should experience hostility like this for merely trying to use a medical device. The A.D.A. is in place, so experiences like these should not happen, but unfortunately, the trend continues, and often, these institutions do not change their ways.

**Mistaken Identity**

Four out of the five participants indicated experiences of disbelief in their need for an S.A. because of the growing amount of individuals that have Emotional Support Animals (E.S.A.). They talk about the barriers that this presents for them while trying to utilize their S.A. in public settings because others think that they just want to have their dog with them and do not think that it is a highly trained Service Animal. Having an understanding of the differences between S.As and E.S.As is important. Too often, they are being grouped into one category when, in reality, they serve very different functions and have different rights associated with them. Ben talks about his struggles of trying to prove that Boyd is an S.A.

People don’t actually believe you need the dog anymore because so many people have emotional support animals. I would get so many emotional support animals in fake vests that would bite and go after Boyd or at the park or see him and want to play. I would always say to the person, “that’s a fake dog, huh?”
This experience that Ben talks about is just showing the struggles that he had not only keeping his S.A. safe but also making sure that Boyd was still able to implement his training. Ben struggled with the cultural barrier because of the doubt created by E.S.As. He also highlights a bigger problem in the S.A. community of people buying certification and vests for their dogs and taking them into the public. Most of the participants laughed whenever they said that another person mentioned a certification for their dog. There is currently no certification that makes a dog certified to be an S.A.; however, there are online certifications for a dog to be listed as an E.S.A., but handlers that are not able to control their S.As. in public settings are not allowed to be in those places.

Through this lived experience, we can start to see the cultural understanding of how society views S.As. and that there is a lot of confusion about the differences between the two. Ben struggled with people seeing Boyd and thinking of him as an E.S.A. Through this confusion that society has, it creates discursive closures for handlers because of the perceived perceptions assigned to them. When I asked Ashlyn if there is anything that she wished that people without S.As. knew about S.As. she responded with, “I wish people who pretended to have S.As. wouldn’t do that because they don’t understand how much harder that makes it for the rest of us.” Individuals that take advantage of the laws that protect S.As. create barriers for those that rely on their S.A. to perform a specific task or function to help keep them safe. Again this demonstrates the cultural ideal that society takes on. Justin did not just experience barriers while trying to eat at a sandwich he also experienced difficulties with trying to go to class.

Second semester when I took a photography class that professor, when I walked in, he was like, “Hey, you can’t have dogs on campus.” And I was like,
“oh well, he is a service dog.” And so he was like, “oh well, you can’t have dogs. You have to have them registered with the administration here.” And I was like, “Oh, okay, well, I didn’t know anything about that as far as I was informed that it wasn’t necessary.” So he was just like, “Well, I am not going to argue with you in front of the class. And all of this stuff, so we will just talk after class.” So I sat down, and I think that he saw how Oliver didn’t move or do anything the entire class except for kennel under my chair and then after class we talked and he was like, “Well, I just never know because there are a lot of fake service dogs.”

Justin was dealing with the issue of people trying to utilize fake S.As and his professor not believing or wanting to deal with him and Oliver. Justin tried to utilize his S.A. and instead experienced a barrier of trying to jump through hoops on a college campus. Justin’s professor looked at him and thought because of his physical appearance that he did not need an S.A. and thought that it would be easier instead of dealing with him to send him to the administration. Those that go to college with their S.A. should not experience difficult situations like this. If there is one place where they should feel included is at their school. Professors should not be creating more problems but help to alleviate some of these stresses.

Justin experienced a discursive closure during this moment because the professor did not want to talk with him about it during that moment. This conversation occurred in a one on one setting. Instead of continuing the conversation, he shut it down and prompted him to tell the administration so they could deal with it and make the call of what to do. Mitigation of this exclusion could have occurred if the teacher had just taken a moment to create a dialogue with Justin.
Since Justin is a “normal” looking college-aged student, the professor automatically discounted him but afterward understood Justin’s need for Oliver. It shows the culture that surrounds S.As that many are quick just to say no or to become defensive and deny access. If people used dialogue, people would begin to understand all that S.As are capable of doing for their handlers. This experience also creates barriers for Justin in how he moves forward during his college career and beyond. Justin has to worry about the hoops he is going to have to jump through to utilize or gain access to places with his S.A.

After talking with Julianna, she made it very clear that by her having an S.A. that she has to be ready for any questions by anyone. She identified how her personal medical history is needed to be known by strangers just because they are curious about Koa. It is usually older people because they have no qualms about asking personal questions. They will be like oh, some of them are like, “Oh, what is wrong with you that you need a service dog?” Ask me differently and I will tell you the answer *laughs* but . . . yeah usually I do say what he is for but I just think it is interesting how um I don’t know unreservedly people ask.

Asking what is wrong with someone first off implies that they are limited in some capacity.

Julianna, however, is very positive and cheerful through being asked such rude and invasive questions. She talks about how it is not ideal the way that people ask about her disability. It at least helps to educate individuals and maybe will make a later interaction for another person who relies on an S.A. perhaps a little less awkward or for that person to be a little more polite to the next S.A. team they see. She, like Ben, deals
with these uncomfortable situations by laughing about them and moving forward with her life. Julianna was met with the second attitudinal barrier because she did not appear to be disabled or to warrant needing an S.A., leading people to question her legitimacy of needing Koa. Questions like this are examples of microaggressions that she experienced due to her using Koa.

Julianna demonstrates how moments of dialogue could be very beneficial and how she does love to educate others on what Koa can do for her. She encourages these conversations and honestly does look forward to them, but what she dislikes is when people approach her negatively or imply that there is something wrong with her. Julianna loves Koa and is so thankful for everything that he does, but does not like being othered or looked upon as different. With thinking about how people are questioning others, Ben made a great analogy about people asking him inappropriate questions

I see someone with a wheelchair; I am not going to mess with the wheelchair. So, if someone sees someone with a dog as a medical device, he is keeping me healthy, so please don’t come and mess with him. Like a blind person with a cane, it is a medical device. So my dog aids me and helps to keep me healthy.

Ben identifies the struggle of utilizing a newer form of medical aid, S.As, by comparing it to other medical aids such as wheelchairs and canes. He was frustrated by the number of people who would always try to pet or talk to Boyd. He identifies this as a very crucial point that I do not think a lot of people realize. While S.As are generally very cute because who does not like dogs, that does not mean we should stare at them or try to
touch them or try to talk to them. They are a medical device, and people need to respect them as such.

Ben begins to unpack what it is like being medically diagnosed as disabled but not being limited to what he can do. Ben relies on Boyd to alert him when he is about to have a seizure. However, Ben understands that this can not happen when people are trying to pet Boyd. He wants others to realize that his disability does not limit him in what he does but just changes how he goes about everyday life. Ben intends to engage in those dialogues with others to show what Boyd can do but becomes frustrated by the lack of respect others have.

Avoidance

Avoidance was a sub-theme found with two of the participants, Ben and Tony. They both experienced instances where it was easier to avoid the situation rather than engage in conflict. It is seen as a barrier because internally they are faced with a decision to make of how to navigate through these instances with their S.A. Ben recounted an experience that he had with one of his professors,

Halfway through the semester though my Calculus professor started to bring her dog in. She bought him a service dog vest off Amazon, and she had her dog there, and he would growl at Boyd all the time. And I told her “Hey Boyd really can’t be distracted by other animals that aren’t working.” And she was just like, “Oh no, he is a service animal now I have the paperwork!” And I was just like what no *laughs*. So she just thought that you could just bring a dog

Even after Ben tried to reason with his professor about how her “Service Dog” was affecting Boyd’s ability to focus because of its constant growling at Boyd, she still
would not listen or help to accommodate Ben. His teacher making the comment about how her dog is now a “service dog” because of paperwork is an example of microaggressions. He later said that he never went to the administration or disability services because he didn’t want to make a big deal and thought that avoidance was a better route. It is another sub-theme in the barriers theme that surfaced was avoidance. Handlers decided to avoid the conflict because they determined that it would be better for them in the long run.

It demonstrates the presence of barriers, and their way of dealing with it was just to avoid the conflict or the trouble that it might cause them because this was easier. Ben talked about how this class made him very uncomfortable and worried about his safety. He knew that if he were to have a seizure, Boyd would potentially miss alerting him because he was distracted by the teachers, “Service Dog.” No person should experience a barrier that they would rather avoid, especially one that puts them into a dangerous situation.

At this moment, Ben had to change his plan for how he would keep himself and his S.A., Boyd safe during this class. He had to have separate conversations with a classmate of what he should do if Ben were to start seizing. Ben had to come to class every day with the worry that this dog might attack Boyd or that Boyd might miss an alert because this other dog that did not belong in a classroom. Lastly, instead of being able to rectify the situation, Ben chooses to avoid the conflict altogether because he determined that it was easier that way. The easier decision was to avoid the conflict instead of protecting his physical safety and well-being.
The institution should put the wellness and safety of their students at the forefront and not allow them to be in unsafe and dangerous situations such as these.

Talking more about the behavior of others, Tony experienced this in a significant way. He said, “Especially when I would bring him to school, that is when people would, all the kids, they would just go crazy.” Tony referenced what it was like bringing Bear to middle school for the first time. All of the other students would not stop asking Tony questions and kept trying to talk to or pet Bear.

I discussed avoidance earlier, but things took a turn for Tony with using Bear. When I asked him about how the transition went from middle school to high school, this was his response, “Umm I didn’t really, I kind of stopped bringing him to school in high school just because of uhh my high school was like huge, and there was a bunch of really rowdy kids that just won’t listen to anything.”

He determined that it was not worth the headache of trying to bring Bear to his school with him. He was too worried about all of the other kids, so as he described it, “I had to learn how to feel my symptoms again.” Tony had to regain his skill of trying to feel his body changing blood sugar levels instead of relying on his S.A., who he had utilized for three years prior. It was a significant change for him and took some getting used to, but he faced the barrier of avoidance because instead of trying to take Bear into high school, he determined that it was just easier to leave him home. I asked Tony if he ever tried or thought about it bringing Bear again and he said, “No . . . we just kind of knew already that it wasn’t going to go well, we just didn’t want to try to deal with it.” Tony identified that for him, this was going to be the more comfortable option in the long run. He was not wanting to put himself in that awkward situation of trying to negotiate
with his classmates to bring Bear with him. Tony was fearful of what might happen to Bear or what his classmates might say about him during these moments. Instead of being marked as other, he decided to avoid the conflict altogether and potentially put his life in a dangerous position because it was easier than dealing with his peers. At the young age of 14, Tony had to make that decision of what was best for his overall health because others could not control themselves. CDT acknowledges this and looks to change it through cultural and social avenues. If the culture at Tony’s high school could have changed, he could have continued bringing Bear with him to school.

In sum, all five participants experienced different types of barriers, whether attitudinal, institutional, cultural, or self-imposed. Now that we better understand the tension that faces individuals with S.As, it is essential to look at how the participants think they can relieve social pressure. In the next section, I will develop out a clear call to action that all five participants suggest: education.

**Theme 2: Need To Educate**

When I initially started this research, I prepared to hear participants express the barriers they had experienced from educational institutions. Instead, the interviews revealed that the main issue faced took the form of microaggressions. Because of this, the theme of needing to educate individuals about S.A. etiquette and treatment emerged as the participants' call to action. Four out of the five participants voiced concerns or talked about experiences where they felt that others needed to be educated on S.As. This theme consists of two sub-themes: the need to educate others and the importance of consent from handlers.
Educate Non-Handlers

The first subtheme that I address is rooted in there being a social lack of education among those that are not a part of S.A. culture. The requested education was two-fold: participants urged more education regarding A.D.A statutes as well as a richer understanding of handlers' rights regarding the use of S.As. Julianna embraces self-advocacy and looks forward to the moments where she can educate others on the importance of S.As. and what they can do.

I understand having a service dog is kind of setting yourself up for educating the public because not all people know. And so if it is a kid, I am always super super gracious, and usually, I will let them pet if they ask if they can. Because well one, it is a kid I can't bring myself to be like mean to a child and be like, "no, you can't pet my dog."

She talked about how she appreciated being able to teach kids because, at that moment, they are fixating on her S.A. Their attention is undivided for a minute. It might be the only interaction that they have with an S.A. Julianna emphasized that she wanted people to come away with an optimistic viewpoint of S.As and if that meant taking an extra minute to talk with them that it was worth it to her.

It is a perfect example of active listening and how it can be so effective in educating the public on the ability of S.As. In that one to two-minute interaction, Julianna has their undivided attention because people are so focused on her and Koa. Through these moments where others can actively listen, they can start to engage in these genuine dialogues breaking up these discursive closures that exist. The discursive closures are the misconceptions that people have about Julianna's need for Koa. Julianna,
however, is not afraid to stand up for herself and to tell people, "no, that they shouldn't pet my S.A. without asking," but really wanted me to understand the importance of education.

Similarly, Ashlyn commented on her taking up the role of educating others regarding her rights as a handler. Ashlyn discussed how many times she would have to tell business owners or workers the laws and rights that she was entitled to under A.D.A. While there were a lot of interactions where Ashlyn had to defend her rights, she had a positive outlook on it because of what it did for her confidence. Ashlyn felt that she was able to educate those she came into contact with positively. Ashlyn reflected on her experience of living in Montana

They are not super aware of S.A. laws and protections. So it was hard, but once I got to that point (having Libby as her S.A.), it made me realize that I could deal with all of the hard parts for having her there for me.

At this moment, Ashlyn explains that once she became more confident in helping to educate individuals about S.As., it made her more confident in her ability to handle stressful situations where individuals were uneducated and unaware.

The need for education of S.As. is essential to focus on not only in Montana but in the rest of the United States. Ashlyn had to engage in moments of dialogue so that she could take Libby with her. Without these conversations, businesses denied her. It also shows moments of CDT being engaged both on a political front and within social avenues. Politically, handlers can cite A.D.A protections when confronted with accessibility issues. While this provides a handler with legal precedent, there are still some individuals that will ignore the law. Unfortunately, this shows a limitation to
political engagement as not every instance of A.D.A infringement or violation becomes a court case justly rectified. On the social aspect, since Ashlyn discussed how Montana was behind the times in recognizing S.A. laws, Ashlyn had to worry about every interaction with Libby ending in her being denied access or having to reference the A.D.A law. However, a majority of these interactions did end positively. It is because Ashlyn was able to utilize dialogue.

There are moments of empowerment in both of their lived experiences; however, as Julianna noted the potential for an insidious drawback: people thinking they can talk to you about all of your medical conditions, or at least people believing they have the right. She explains how the worst people about invasive questions are adults. Julianna went on to talk about her diabetes

I feel like that is such a responsibility to educate rather than brush people off when they ask what he is for. As much as I want to be like, "why are you asking me?" You don't really just go up to people and ask them about their health. Like, what about a service dog that makes people essentially ask me, what is wrong with me? It is like they don't deserve my answer, but also it is raising awareness about Diabetes. That it is like a severe, enough chronic illness that like it warrants a S.A. or that they have S.As. that do things like this. A lot of people that ask me that have never heard of an S.A. for Diabetes. So, that happens as well. Julianna sees herself as championing for her rights and for spreading awareness about the seriousness of diabetes. She wants others to understand that yes, this is a severe chronic illness and that S.As. do make a difference in the lives of people with diabetes who
choose to utilize them. She enjoys educating people on what Koa can do for her. How Koa can help to keep her blood sugar levels within a healthy range and how much better Koa makes her feel. She does acknowledge the hardships of the questions that people ask of her; she also understands the benefits that answering people's questions can do for her. She likes to raise awareness about her disease and thinks that the more people that know about her condition will genuinely understand the impact that an S.A. can have on her life.

Through this, Julianna made it apparent that the more people around her that know of her condition could help her in the long run. If she were to pass out, they could help her because they know what is wrong. Julianna is a very open person when it comes to her condition, and she chooses to take a positive approach towards educating others and finds enjoyment in it. The more people that are aware of what S.As. can do and the different types of S.As. there are, opens dialogue for others who may not be as forthcoming about their conditions to be able to have some space from the personal questions. Education is a crucial part of utilizing an S.A. in today's society.

Both Julianna and Ashlynn focus on Hall's (2019) classification of cultural and social points of research. Both participants are concerned with shaping a positive culture around S.As. so that others have a favorable view, their intent behind this is to create positive interactions that people in public have with S.As. so that non-handlers can better understand SA responsibilities. Four participants also hope to shape the social aspect by normalizing S.As. as well as building social education through everyday discourse, so non-handlers know what to expect.
Not all interactions are as deliberate. Sometimes instead of individuals seeing the dog and asking questions, handlers are confronted before the individual processes the presence of an S.A. This leads to instances of forced education, instead of the voluntary education described earlier. Ben described an experience about him sitting in a lecture hall while on his college campus. In this experience, the professor singled out Ben because she couldn't see Boyd.

Do you know in the liberal arts building that giant lecture hall that they have? So the back of that auditorium lecture hall they had like handicapped seats that were obviously made for wheelchairs and stuff, but it would just give me extra room with Boyd for me to like let him sit in front of me and stuff. It was better just to sit back there then try to squeeze in between everyone. My first day in my art lecture, my instructor was pretty old and didn't want everyone spaced out in the auditorium, so she asked everyone to move forward because I was sitting in the very back and couldn't see Boyd. So she was like "Hey you get up here blah blah blah." I was just like, oh, here we go, (Annoyed tone in voice, "I need everyone up front, so I don't have to yell!") So she sent one her T.A.'s back there, and I explained to her why I was sitting back there, and she was like "oh crap, I am so sorry blah blah blah." So she went back up and told the instructor, and that ended that.

In this type of setting, Ben purposely choose to sit in the back because of the room that it allowed Boyd to have as well as it prevented him from having to try to walk over people in the small aisles of the lecture hall. While the teacher wasn't purposefully trying to put Ben into an awkward situation by calling him out and sending a T.A. to talk
to him, this put him into an uncomfortable situation. He had to communicate with that T.A. about why this was the best option for him because it accommodated Boyd and created the least amount of distraction to the class should he need to leave because he was about to have a seizure suddenly. If this professor had just taken time after class to talk to Ben privately or to send the T.A. to the back of the room before yelling in front of this class, it could have made the situation less embarrassing for Ben. Like mentioned before, college campuses are one place that individuals who utilize S.As. should be able to navigate through without issues from administration or staff. There is a growing need to be able to educate those that work on college campuses. Throughout telling this story, Ben would laugh about it because this was his coping strategy. Ben and other participants used humor to tell their stories because it made it easier for them to deal with the situations. I have outlined how participants are placed as the source to educate others on the handler's rights and the use of S.As. However, the biggest issue all participants acknowledge was the issue of gaining consent before interacting with an S.A.

Teaching The Importance Of Consent

In regards to consent, there is a lack of respecting S.A. etiquette of not distracting the S.A. from their job. Once again, this etiquette may be more respected if we were to socialize individuals that S.As. are a medical device, not a pet. Consequently, some individuals still believe that if you see an dog you can pet them or call after them. Julianna talked about this during her interview and many times identified that adults were the worst offenders of not taking the time to ask her for permission when it came to interacting with Koa. Consent does not stop at the handler but also extends to their S.A., which people do not seem to understand. It is an important aspect to look at while
discussing the need for education about S.As. Julianna talked about her awkward encounters with other students on campus.

It's funny; it is like worse when I am walking him in the evenings on weekends. People are on campus, and they are like going back to their dorms or going to parties, so you know they are all over the spectrum inebriated, "oh, I miss my dog so much, my dog just died." And I am like, oh my god, it is 11:30 PM on a Friday night and you just like accosted me so you can hug my dog while you're sobbing talking about how your dog just died, and you're like so drunk, and I just want to go back to my dorm so I can go to bed why am I in this situation? But then you feel bad because how do you tell someone to go away when their dog just died? It's just, and it's funny the situations you find yourself in *haha.

Again Julianna talks about the dichotomy that she experiences because of Koa. On the one hand, she just wants to go back to her dorm, but on the other hand, she feels obligated to try to help this drunk college student talking about their dead dog. While these people are in an altered state of mind, it still shows the need for consent to be given when interacting with someone's S.A. People only see a dog instead of seeing a highly trained S.A. who has a job of protecting their handler from dangerous situations. What most people do not understand is that her dog could miss an alert instead of being focused on her. Like Ben mentioned previously, you would not go up and start messing with somebody's wheelchair because it looked interesting to you. S.As. need to be respected, and they should not be interacted with unless given explicit permission by the handler. If someone has an S.A., that should not permit you to interrupt the handler.
Julianna is experiencing Hall's (2019) cultural value. The culture that surrounds dogs is to pet a dog and talk about how cute it is when you see it in public. It is a common occurrence that people do not know how to interact with S.As. in society. People need to understand that S.As. should not be communicated with unless prompted by the handler that it is okay to do so. It does not just happen with drunk college students; it continues with other students during the middle of the day. Julianna talked about her experience walking around campus between classes

Umm, it is because, especially when I am walking with Koa. He has his vest on, and he is heeling, it is obvious that he is in work mode and then people who have their pets that are just walking their dog on campus will like let their dog pull towards Koa or go up to him and sniff him, and they are just laughing. They don't think anything of it and don't think they are acting maliciously or anything. Still, I am like come on cant you tell that you are distracting him, so I kind of have to politely move in a different direction or just redirect his attention. Still, it is really annoying more than a super negative interaction.

Julianna does not want a random dog going up to Koa because, to put it bluntly, she does not know the dog and is not aware if the interaction could become violent. Koa is such an integral part of her well being, and she does not want to risk a negative interaction because this dog wants to go up and say hi. She becomes annoyed by the lackadaisical demeanor that dog handlers have about letting their dog interact with Koa. Her dog has a job to do, and by people allowing their dogs to just come up without even talking to her violates both her and Koa's space. People need to be more cognizant about
asking for permission when it comes to S.As. Because at the end of the day, they have a specific job to perform, and that interaction could be distracting to their job.

The participants engage in dialogic interactions because of the value that they provide about the education of S.As. and the proper way to interact with their handlers. The achievement of knowledge can occur through dialogic practices; however, it is when people are blatantly ignorant about the seriousness of S.As. that creates discursive closures. These closures limit the amount of learning that people who do not have much experience with S.As can achieve.

Additionally, while it is not the job of the handler to educate others, it is vital that individuals such as myself (a trainer of S.As.) and readers join in educating people to act under respect for the S.A. and handler. Because without that respect, an extra burden is placed on handlers: protecting their S.A. from everyday encounters. Julianna had to learn how to position Koa in ways that other dogs are not able to get near her. The way that she walks down the sidewalk must be altered because others want to let their dog go up and say hi. These small changes to her everyday life create more significant changes and obstacles that she and Koa must overcome. Through the interview, Julianna told me of an experience where a dog charged Koa, and she was worried about Koa becoming fearful of other dogs after that. She had to spend an additional two hours working with Koa and letting him play with another dog to ensure that her dog was okay mentally. These small changes or interactions can drastically affect the ability of her S.A. to behave and function properly.

These adjustments are not merely a one-off, but a shared experience that handlers must accommodate. Justin talked about what it was like learning how to utilize Oliver
and how he learned to navigate through high school with his S.A. by his side, specifically how he would position Oliver

like maneuvering him, so people aren't touching him and learning how to block with my body was a big one because at first everyone like was touching. I would have to stop and tell everyone like hey like, please don't pet my dog.

His fellow students didn't respect the need to not interact with Oliver and instead took it upon themselves to try to touch him. Justin had to learn new ways to move with Oliver to stop people from trying to pet him or distract him. It is a violation of Justin's space and rude that others would not even ask him for permission before proceeding in petting his dog. Consent is so crucial between people, so why is it that we are not extending this consent to the medical devices that individuals like Justin or Julianna utilize. There needs to be a conversation started before you take it upon yourself to interact with an S.A. team. In Justin's case, the students did not want to engage in dialogue to understand what the proper procedure was for interacting with Oliver. Instead, they created discursive closures by ignoring what Justin tried to tell them. With the lack of respect for his S.A., Justin had to be concerned about how he positioned Oliver for fear of someone hurting Oliver. He had to worry about how humanely other students would treat Oliver. Consent does not stop at the handler but extends to the S.A.

Throughout this section, I focused on the need for a more profound social education regarding S.As and the role of consent when interacting with an S.A. team. While I have noted it is not solely the job of handlers to increase S.A. education; currently, they are on the frontlines. Julianna offers this advice to all handlers facing these obstacles
You have to understand that if you are going to walk away from every interaction in public with annoyance or being upset about it, you are just setting yourself up for living a negative life. I really just think you have to understand that, like a lot of people don't have experience with an S.A. So you kind of have to switch your mindset, and think of it as an opportunity to educate rather than to just be annoyed with people.

By taking the time to help educate others, one can hope to shape future interactions better for all parties involved. Julianna's approach to educating others is her way of keeping the undivided attention of children and hopefully creating more S.A. conscious people in the future. Through dialogue, education of S.As will occur and that can make a difference for handlers as they navigate their everyday lives. If active listening were to happen, then the real understanding of why S.As are so vital to these individuals would be better understood. Disability has many different looks, but the social aspects of what a lack of education means is essential to unpack in regards to S.A. experiences. Even though not all interactions between the S.A. team and others will result in genuine understanding, it is vital to have those conversations to make the future better for other handlers.

**Theme 3: Felt Support**

While participants did experience several barriers to entry and identified the need for education on S.As., they also shared with me their own experiences of support. In this theme, moments of support from administration or professors arose from participants telling their experiences. Moments of support occurred at Boise State, Montana State, Colorado State, and a high school in California.
When Julianna was looking for which university she wanted to attend, looking for one that was inclusive of S.As. was a big focus of her search. While touring Colorado State University, she found that.

When I was touring schools I checked out CSU and the only other school I checked out was the University of Maine and while it was also inclusive it was kind of a smaller school but I didn't see any other service dogs. When I was at CSU there was a ton of other S.As. that I noticed or like I mentioned the CCI dogs in training. So I thought this is definitely a campus where I am not going to be, kind of like a minority. There definitely is like a lot of other students that have S.As. where it is like a normal thing. Where people aren't going to be so surprised to see him that it is going to be so distracting.

Julianna did not want to be one of the only people on campus with a S.A. because she did not want to hinder the learning of herself or her peers. Through touring colleges, she found a strong S.A. presence at Colorado State, a place where they truly welcomed and embraced S.A. teams. CCI stands for Canine Companions for Independence, and they have chapters throughout the United States. This chapter on Julianna's campus starts the training process for S.As. With this strong presence of S.As. on-campus, it made for an easy transition to college for Julianna. It allowed her not to feel different or for the need to educate others as heavily because it was already a part of the culture. Julianna’s comfort demonstrates Hall's (2019) call to research culture by looking at CDT. The culture of CSU is accommodating towards S.As. and is evident amongst staff and students alike. Through having this strong, supportive culture, it allows for Julianna to not feel othered. Furthermore, for Julianna this partially eliminated the attitudinal barriers
outlined earlier in this chapter. But most importantly, the self-imposed barrier of 
avoidance was removed because of the accepting culture of S.A. teams. CSU takes the 
time to engage in dialogic interactions with their staff to make sure that they are 
providing every accommodation to make their students successful.

One thing that was revealed throughout the interviews is that colleges and 
universities had a more supportive environment than high schools. While this is not to 
assume every college or university is properly handling S.A. issues, it is noteworthy to 
account for instances which can serve as positive modeling for other institutions. During 
Ashlyn's interview, she spoke of how easy it was to utilize her S.A. at Montana State 
University,

Both Libby and Chive did really good on my college campus. I had to go 
through Disability resources and just basically fill out a form, and they would 
inform me of the laws in Montana, then I had to take that form to all of my 
professors, and that was pretty much it, it was really easy.

Her experience was made simple by engaging in a dialogic conversation with 
Disability Resources, an on-campus office that helps with student accommodations. The 
process was quick and helped to provide her a better understanding of the laws that 
Montana has in place. The professors never questioned the paper that she provided, and 
this made for a peaceful transition on to their campus. By having a policy in place, MSU 
was able to eliminate the barrier of “show me your papers.” It is also demonstrated by 
how her professor's interacted with Ashlyn,

No, most of my professors actually loved them. They were kind of funny, 
so one of the professors was an absolute dog person, and she would constantly
address Chive like he could answer the question, so it was great! She was my Spanish teacher so she would ask him things in Spanish. It was great, but it like it actually felt like you think a lot of people would get uncomfortable with the attention, but it helped the students around me be more aware and more comfortable. And it made it more fun, I guess.

Through this experience, Ashlyn was able to become more comfortable with Chive and having him in class with her. It allowed her to grow more self-confidence and also helped to start new friendships. Ashlyn loved the experience that she had with Chive and the way that her professor went about supporting her use of an S.A. This again falls towards understanding Hall's focus on the culture around the individual in regards to CDT. The professor created a supportive classroom culture that allowed Ashlyn to gain confidence. It helped to normalize her use of Chive and to build friendships with others in the class. These small dialogic moments helped Ashlyn to feel included and a part of the class.

Ben utilizes his SA to monitor him for seizures. Because of the dangers faced in each seizure Ben experiences, it is vital that Boyd is able to place his undivided attention in alerting Ben about physiological changes. Because of Ben’s trust in Boyd’s ability, he exhibits positive control of his health issue. Ben also told moments of his professors supporting him at Boise State University and allowing him to feel comfortable when he needed to prepare for a seizure.

I explained to them that if he alerts to me, I am not going to ask to leave class, but I am just going to quietly get up and leave the classroom. They basically just said do what you got to do, man.
While educators have been told they must abide by student accommodation documentation, not all educators are fully understanding. Even in a moment where Ben was being provided a supportive message of “do what you got to do”, he highlights how there is a still a definite call for education with S.A. teams. Ben continues to recall

They were even like hey if you need, they like didn't fully understand, they thought I was dumb because if you need extra time on tests let me know if you need a quiet place to take a test, let me know. I was like umm the only thing I actually need is time to leave the classroom if Boyd alerts me.

While his professors did not fully understand Ben's condition, they were at least trying to support him and help however they could. If that meant that Ben needed extra time on a test or had to step out of a lecture, they were understanding of the situation. While this instance highlights a moment of over accommodating, this could be relieved with more education about S.A. use. Despite Ben’s frustration that he thought they saw him as “dumb” he acknowledges that they wanted to see him succeed and cared about his safety during their course. This investment helped create a culture around Ben that allowed him to handle his health while also being a part of the class. The other two exemplars were moments of support created by the institution. Ben initiated his moments of support by engaging in dialogic practices. Utilizing Boyd as a justification for potential accommodations, Ben created an environment of support by talking to his professors at the beginning of the semester. He was able to communicate his condition and what accommodations were needed to make him successful. His professors engaged in active listening and were willing to help out; however, they could to make sure Ben was safe and learning in the course.
While I have unpacked institutional support and individual initiated support. It is important to also recognize that support cannot occur if a handler is practicing the self-imposed barrier of avoidance. This can be highlighted as Justin also experienced support when he first took Oliver with him to high school in California, but declined it.

Yeah, so, they, so the principal offered to make an announcement for me, which I didn't really want because I was already getting enough attention. Umm and so yeah, we never really talked about doing an education thing which I think would have really benefitted the school.

Even though Justin turned down the offer of an announcement, this demonstrated that the administration was trying to support him; however, they could. They wanted to see Justin succeed and wanted to try to ease the struggles of having Oliver with him at school. Through this experience, we also see Justin reflecting on how educating his peers might have been a beneficial avenue for him to explore. By not engaging in these dialogic experiences, this could have had a limiting factor on Justin’s success. However, the administration did give him the platform and the ability to talk with others.

Justin did not want to stand out anymore at school then he already did by having Oliver with him. Through his interview he told me that he was not a popular kid and that he hung out with the hippies but by the end of his senior year everyone knew who he was. Justin wanted more than anything to live a “normal” life while being able to utilize his S.A. He talked about this period of transitioning to using a S.A. and what the learning curve was like. However, he did talk about how he was grateful that his high school supported him throughout his senior year. He was glad that they were willing to allow him to have those dialogic interactions.
Despite the brevity of this section, it does highlight that some headway is occurring to better support an inclusive culture of S.As. Through all of these experiences, we see the common theme of support amongst the participants. Administration's and professors tried to make their environments as inclusive as they could so that these students could thrive in their academic environment.

While not all participants took up the offer presented to them, it gave them the agency to make the next decision. This theme demonstrates the transformation that occurs by utilizing dialogue. It shows that through these lived experiences the participants were able to experience support when dialogic practices were used. More experiences like this occur when there are support for those that utilize S.As. For advocates, this opens up an additional resource for S.A. support- reaching out to institutions with strong S.A. initiatives. I for one, have reached out to CSU for additional material to share with the Boise State educational access center regarding the support and treatment of S.As on our campus. I also plan to email the material to the other colleges and universities in the state. I will further develop this in the following chapter.

Throughout this chapter, I dissected the three major themes that reoccurred within the participant’s discussion of their S.As. and the barriers faced when utilizing their S.As: Faced Barriers, The Need to Educate, and Felt Support. Within the discussion chapter, I will focus on how CDT can be applied to individuals who do not identify as disabled. I will also focus on how dialogic interactions are utilized to minimize discursive closures.
CHAPTER 5: DISCUSSION

The three major themes experienced by the participants warrant further examination of both the theoretical framework of this thesis as well as the social implications of this study. Within this chapter, I will focus on developing the usefulness and consideration researchers should embrace when analyzing disability. Specifically, I look at increasing accessibility of CDT beyond an academic sphere. Following that, I dissect one of my discursive closures, that barriers faced by handlers would become institutional since that had been my experience as a trainer of S.As. Finally, I look to what I can do as a researcher to aid in my participant's call to increase the social education surrounding S.As.

Accessing CDT

This study has opened my eyes to many ways of thinking critically about how Critical Disability Theory (CDT) applies to individuals who utilize S.As. in their everyday life. All of the participants did not identify with the label of being disabled, even though they all are medically diagnosed as being disabled. CDT allows individuals to move away from the medical diagnosis of a disability and liberates them with the freedom to choose their own identity. We see the division of the academic understanding of disability versus the societal viewing of disability as a marginalized term. Within academia, disability studies are viewed as being liberatory, which is how I went into this study by using CDT as the theoretical framework.
While participants did not identify as being disabled, I still believe that this theory is relevant as a framework. It aligns with Meekosha and Shuttleworth's (2009) call for CDT to undergo reanalysis and reworking to keep the theory relevant. Their call to action was that others would take this lens and keep adding or changing it to ensure that CDT can support those that it stands for. The results of my study fall in line with tearing apart the societal understanding of disability because of the negative connotations associated with the term. Meekosha and Shuttleworth (2009) expand, "The task is always to balance the activist's cry for accessible conceptualization with the scholar's understanding of the complex, interwoven but continually changing fabric of human societies" (p. 64). One specific example of this comes from the tension between S.A. recognition and the increasing presence of E.S.As. Looking at disability from a CDT perspective as defined by Hosking, "CDT is based on a social model of disability which recognizes disability not as the inevitable consequence of impairment but as a complex socially constructed interrelationship between impairment, individual response to impairment, and the social environment . . ." (Hosking, 2008, p. 16-17). CDT faces the struggle of overcoming the marginalization related to the term disabled.

Researchers need to continue to address that disability understood within a more flourishing framework expands the possibilities of CDT achieving all of its critical dimensions. All participants requested that we address the socialization of S.As. within the United States when calling for educational action. This call curtails well into the potential of CDT in better understanding the experiences of those with service animals. Like mentioned, all participants saw themselves as being "normal" by utilizing an S.A. to help them in their everyday life. Thus, the pivot from the medical model of disability to a
The social model insists we look at tensions faced by the socialization of handlers and their S.As. The effective use of a medical device such as an S.A. can be integrated by reconstructing our social understanding of disability.

I analyzed everything through Hall's (2019) five tenants of CDT: disability as a cultural, historical, relative, social, and political phenomenon. Through these tenants, CDT still provided a crucial theoretical base even though participants rejected the label of disability. With the use of CDT, I analyzed the cultural understanding of how the participants who utilize S.As. were viewed in public. Participants experienced microaggressions because of the culture that surrounds S.As. Labels applied to them because of the cultural understanding of what an S.A. does for its handler. They were met with apprehension because they did not meet the person's understanding of someone who would utilize an S.A. I analyzed the historical context of those that use S.As. specifically with Tony's experiences. He has used Bear for many years and has first-hand experienced the changes of attitudes and institutional barriers as more people become educated about the rights of those that have S.As. To look at the shift of barriers experienced when Tony first started taking Bear places to present day where he encounters fewer apprehensions. However, with this shift, there still is a growing need to separate S.As. and E.S.As. within society's mindset.

This study helped to further prove the use of CDT as a liberatory practice because of the opportunity that it provided participants to transcend the societal understanding of disability. Through utilizing their S.A. they were able to empower themselves and to help “normalize” their use of S.As. to others. This helped participants to move from the marginalized understanding of disability and towards normalization. If anything even
though the participants rejected the label of disabled it further helps to prove that CDT can be used as a liberatory practice because of the power their S.A. gave them.

I analyzed the relative tenant of CDT as a theory by discovering lived experiences amongst the handlers. Through examining their lived experiences, it met the call of CDT of allowing their experiences to enter academic literature and for their voice to be unobstructed. CDT is relative to this study because of the voice it provided for the handlers' everyday experiences to surface. I analyzed the social tenant by looking at these lived experiences to understand better the barriers that handlers were faced with by their peers. I uncovered these moments of microaggressions that handlers experienced while trying to go about their day. The confusion with E.S.As.. plays a role in these social misunderstandings as well as the way that others see disability and the participants. The social role that CDT plays was significant in analyzing because of the broader effect that it had on participants. It is where they experienced a majority of these microaggressions. Lastly, I researched the political tenant of CDT and how this helped participants throughout these lived experiences. It allowed them a platform to stand on by having rights given to them by the A.D.A. It enabled them to knock down barriers that they encountered. CDT plays a vital role in understanding the lived experience of my participants, even though they reject the term disabled. It is why I am curious if having a debriefing at the end of the interview would help to mitigate some of these feelings. However, this also demonstrates the need for societal change because of the archaic understanding of disability. The term disability needs reworking to represent the academic understanding of it closer.
Macroaggressions Versus Microaggressions

Through dialogism, I experienced a need for flexibility as the researcher. Coming into this study, I thought that participants would express instances of institutional barriers. By conducting a qualitative study, it allowed for dialogic interactions to occur and for them to share with me their lived experiences where these microaggressions occurred. These instances layered with side comments from peers or random people out in public, acting negatively towards the participants. They experienced moments of doubt where people questioned their need for an S.A. This caused them to be met with apprehension and opened them up for others to believe that it was okay to pry into the lives of the participants. Microaggressions occurred in multiple instances with the participants, which I highlighted in chapter four.

Through this study, the participants experienced society's shortcomings in regards to interacting with disabled individuals. Hosking described it as "the social disadvantage experienced by disabled people is caused by the physical, institutional and attitudinal (together, the 'social') environment which fails to meet the needs of people who do not match the social expectation of 'normalcy" (2008, p. 7). During the study, all participants experienced institutional and attitudinal barriers that were created by the society and culture that surrounds them.

The concept referred to as "normal" is a discursive closure that the participants experienced as a microaggression. Through this tag of "normal," they were instantly applied different attributes such as visually impaired or physically impaired. By participants utilizing S.As., they were othered by society and limited by members of the community. It would be interesting should this study be conducted again, to open up to
the participants about the use of CDT as a lens as well as how it is defined—conducting a
debriefing to explain to them how disability's definition in academic literature versus the
societal understanding. To show them how CDT is a liberatory theory for individuals
with disabled people and how it differs from the societal version. I wonder if redefining
the term disabled through academic literature would change their view of being labeled
as disabled. If through this methodological disclosure, they would accept and embrace
the disability or continue to reject it. This rejection of the societal understanding of
disability does not change the effectiveness of using CDT as the supporting theory for
this study.

Initially, I prepared to create a handbook for institutions, but what I ended up
hearing was that we need to have better education socially about S.As. and disability.
The problem was not institutions because universities such as Colorado State are doing
an excellent job of creating an inclusive culture for individuals that utilize S.As. by
having a large S.A. presence on campus. The need to educate others on S.As. needs to
happen. Julianna references this often throughout her interview. She understands that
most people do not often have encounters with S.As. so this creates a discursive closure
because of their lack of understanding of what they do. However, she is an advocate for
herself, and for S.As., this occurs in every interaction that she has with others. She wants
to engage in dialogue with others so that they can learn. If education can happen on a
societal level, we can begin to break down these discursive closures that create barriers
for handlers as well as mitigate the microaggressions that they experience. Education of
S.As. is where our focus should be.
Institutions need to ensure that all of their faculty are trained on how to better interact with individuals who have S.As. They also need to be able to support their faculty when there are incidents on campus that need to be analyzed and handled appropriately. There needs to be more training for faculty so they can make sure that they are including students who utilize S.As. instead of excluding them. On a personal level individuals should take it upon themselves to be familiar with proper etiquette of how to interact with an individual that utilizes a S.A. and not try to pet or talk to their S.A. Instead they should take a moment to engage in conversation with them and to be supportive and inclusive of the individual.

**How We Help**

As I mentioned, I expected to find institutional barriers amongst my participants but instead found microaggressions and instances where education of S.As. needs to happen. It is my hope that those that read this paper look towards S.As. with a new understanding of the vital role that they play in these handlers' everyday lives. To help advocate for the education of others so that the label of disability can stop being a negative connotation but one that is empowering.

It is not fair to force handlers that utilize S.As. to be the only advocates for themselves. Therefore, I asked each reader of this thesis to join me in the role of increasing awareness and knowledge of S.As. and their handler’s rights. Just like the academy has established, it is not the role of the person of color to advocate allies. It is the same for individuals that are disabled and utilize an S.A. While they are the ones experiencing and dealing with this every day, it is not their role to advocate for themselves. We need to pick up this role of advocating alongside them and helping with
the education of others. We are a part of the change of the view of "normal" in regards to the societal understanding. By us as academic researchers, business owners, or just people in society, we can help to begin to advocate for handlers and to help "normalize" the use of S.As. By engaging in dialogic practices of active listening and trying to tell these lived experiences, we can begin to make a difference in these handlers' lives. All people should be included in society and should not feel othered because of a medical or physical condition. My call to action is that we begin to be advocates of S.As. and to help make a societal change.

Currently, disability is a discursive closure within society. When most people think about disability often, they think of negative connotations or extremes of what disability is. By changing the societal definition of disability to one that is more in line with the academic understanding of disability, this could disrupt these discursive closures. The discursive closure of disability leads to the marginalization of this group. Disability is understood as a discursive closure because people are either afraid to talk about or talk about it inappropriately. However, this does not need to be the case if we utilize dialogism properly. Through dialogism, we can begin to expand on active listening and engaging in dialogic interactions. It surfaces in the way that we talk to others about disability and what it means to be disabled. Dialogue does not need to be this complicated idea, but instead, it needs to be two people who are willing to be open and honest with each other. To hear about the lived experiences and the struggles so that they can have a new perspective on disability.

The themes that were found help exemplify naturalization, discursive closures, and microaggressions. While looking through theme 1: Faced Barriers, upon analyzing
the five sub-themes we can begin to see these properties emerge. The first sub-theme, What does your S.A. do, demonstrates microaggressions being played out by the way that others are asking the handler about their S.A. The second sub-theme, Why do you have an S.A., is another example of where we see microaggressions are occurring because there is a doubt for the need of a S.A. The sub-theme, Produce your papers, is an example of discursive closures because instead of being willing to have a dialogic interaction the power structure is insisting that a non-existent documentation or paperwork be produced. The sub-theme, mistaken identity, helps to show microaggressions because the person is applying stereotypes to the person because they are utilizing a S.A. and are being seen as limited in their ability. Moving into theme 2, The Need to Educate, we can see these different characteristics being applied. In the first sub-theme, The Need to Educate non-S.A. handlers, we can see both discursive closures and microaggressions occurring. The need to educate is prompted because of both of these properties occurring to the handler. The second sub-theme, Teaching the importance of consent, starts to demonstrate naturalization because of the need to make S.As. a normal occurrence and learning how to respect the handlers. Not everyone is going to be as vocal of an advocate for themselves but we need to learn how to support them and make the use of S.As. normal. With theme 3, Felt Support, it shows naturalization occurring of the S.A. handler because of the way they are included within their communities. Through this process of naturalization the handler begins to actually liberate themselves from the term disabled and start to see themselves as being the equal to their peers which is what we want.
Dialogic practices are vital to remove the discursive closures that surround disability. Through dialogism, we begin to understand better these lived experiences and the need for educating others on all that S.As. do for their handlers. Julianna expressed just how much Koa does for her,

But I don't think I ever would have understood if like somebody had told me how their S.A. helps them mentally because I would have been like oh I am fine of course I love dogs, but it really is such a comfort it just really makes you feel less alone especially when you are in an environment like college where you are independent it is kind of isolating you know with as many friends as you have and as much contact you have with your family at the end of the day it is you in your room alone except I always have Koa with me.

S.As. do so much more for their handlers than just perform a task or service. They are always there for their handler and supporting them. Participants told me of how their S.A. instilled confidence in them, helped create friendships, and provided comfort for them during times of marginalization. Together we need to take a stand to help engage these dialogic practices to get rid of the marginalization associated with disability, and this starts with societal change.

Initially, when I went into this study, I wanted to place of me into this study by utilizing autoethnography, but I realized this would be a breach to CDT. If I did this, it would have limited the voice of my participants. In CDT, what is most important is for the voice of those that are disabled to be heard, unfiltered, and uncut. Because of this, I was inspired by the inclusivity that a participant felt at Colorado State University. As an advocate for S.A. support and inclusion, I have created a form letter that one can send to
student service offices within higher education. The letter includes an appendix with all of the policies CSU has created to integrate handler’s and S.As. Hopefully, this will begin to start the education of why S.As. are so vital to handlers and why a societal change in how other view disability needs to happen.

This experience was so eye-opening to someone who trains S.As. every day and made me appreciate how much their S.A. means to them. I came into this study expecting to find institutional barriers but instead found instances of microaggressions. I wanted to create a handbook for an institution to help them be more inclusive but instead found that we need to have more education on S.As. within society. This study was truly transformative, and I hope that it begins to start the conversation of why S.As. are vital to the health of those with disabilities.
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APPENDIX
My name is Kory Gaona and I am a recent graduate from the Graduate Program of Communication at Boise State University. For my Graduate Thesis I researched the barriers that individuals who utilize Service Animals (S.As.) experience specifically on college campuses. Through my research one institution that I found to be incredibly supportive was Colorado State University. This information was put together by Colorado State University and I believe it would be a great addition to your own policy regarding service animals. Please let me know if you have any questions of if you would like to discuss my research further so that we can make college more inclusive for students with service animals. My email is [email address] my phone number is [phone] During my study I found that S.A. handlers experienced microaggressions from faculty members on campuses. That is why I am recommending that you implement these practices to be more inclusive of S.A. handlers.
1. At the beginning of the semester send out an email to all faculty informing them of the rights that Service Animals have.

2. Do not call out a student in front of the class for using a S.A., instead have a private conversation with them before or after class.

3. Engage in dialogue with the student to understand better what their needs are / what type of accommodations they might need to be included.

4. Support the individual by talking directly to them and not their S.A.

Regards,

Kory Gaona

Service Animal Trainer
PURPOSE OF THIS POLICY

Colorado State University strives to be welcoming and accessible to all members of the community who seek to enjoy our facilities, services and benefits. The primary purpose of this policy is to enable and support those individuals with disabilities who require the use of a service animal or emotional support animal to aid them. In accordance with federal laws, the Americans with Disabilities Act ("A.D.A"), A.D.A Amendments Act of 2008 (ADAAA), and Section 504 of the Rehabilitation Act ("Section 504"), and state of Colorado disability laws, C.R.S. §24-34-801-804, Colorado State University adopts this policy to provide guidance to campus regarding the use of a service dog on university property.

In addition, the federal Fair Housing Act provides that, in some limited cases and with appropriate documentation and approval, emotional support animals that do not qualify as service dogs may be permitted in CSU residential facilities if shown to be necessary to afford a resident student or employee with a documented disability an equal opportunity to use and enjoy their housing. This policy provides definitions, requirements and guidance for the use of emotional support animals on university property.
DEFINITIONS USED IN THIS POLICY

**Individual with a Disability:** An individual with a disability as defined by Section 504, the A.D.A and the A.D.A.A is a person who:

1. Has a physical or mental impairment that substantially limits one or more major life activities; or
2. Has a record of such impairment; or
3. Is regarded as having such an impairment.

Three factors are considered to determine whether a person’s impairment substantially limits a major life activity:

1. The nature and the frequency of the impairment;
2. The expected duration of the impairment; and,
3. The permanency or long-term impact of the impairment.

For further information about major life activities and disability determinations, visit the [Office of Equal Opportunity](#) website.

**Service Dog:** Any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability under the applicable laws noted above. (On a limited, case-by-case basis, a miniature horse that has been similarly individually trained may also qualify as a service animal. These are rare). The work or tasks performed by a service dog must be directly related to the individual's disability. Tasks may include, but are not limited to, guiding individuals with impaired vision, alerting individuals with impaired hearing to sounds, pulling a wheelchair, retrieving dropped items, turning
off/on switches, assisting during a seizure, or providing physical support and assistance with balance and stability.

Service dogs in some cases are psychiatric service dogs. Psychiatric service dogs are like other service dogs; they are individually trained in obedience, performing tasks, and working in distracting public environments to mitigate the disabled person’s psychiatric disability. Their function is not to provide emotional support, but to perform tasks which enable the disabled person to function in ordinary ways non-disabled people take for granted.

The term service dog does not include any untrained dog, or any other species of animal (except miniature horses), whether trained or untrained. Animals (including but not limited to dogs) that provide comfort or emotional support to a person with a disability, but that are not individually trained to do work or perform tasks for individuals with disabilities, do not meet the definition of a service dog.

Service dogs typically are not puppies. Dogs that are too young to be fully vaccinated, housebroken, trained in obedience, and trained to perform particular tasks to assist their handlers are not suitable service dogs.

Service dogs are not pets. Pets are not permitted in University buildings, except for the Veterinary Teaching Hospital and other veterinary facilities in accordance with their rules and policies, or when otherwise specially allowed with advance approval.
from Environmental Health Services for *bona fide* academic or university business purposes. See the CSU Policy on Animal Control and Removal.

**Handler:** The individual with a disability using a service dog on University property, or a person responsible for handling the animal in order to assist the individual with the disability.

**Service Dogs**

Subject to some limitations, a service dog may accompany an individual with a disability throughout campus, such as in classrooms, recreational facilities and campus residences. It is strongly encouraged, but not required, that a service dog be identifiable to others through a visible signifier (e.g., vest or harness). Individuals with a disability who require a service dog in the classroom are encouraged to contact Student Disability Center (SDC) for assistance with accommodations.

In some instances, miniature horses may also be considered for use by an individual with a disability if the miniature horse has been individually trained to do work or perform tasks for the benefit of the individual with a disability. However, anyone seeking to use a miniature horse as a service or assistance animal must contact the appropriate office (Resources for Disabled Students for students or the Office of Equal Opportunity for others). In the rare case that a miniature horse is used as an accommodation, all provisions of this policy that pertain to service dogs will also apply.
Service dogs may be restricted from certain areas where considerations of public health and safety, safety of the individual with a disability or of the service dog, or research integrity must take precedence. These include research laboratories where contamination caused by the presence of an animal, or risk of contamination of an animal, may be present; mechanical rooms and custodial closets; medical treatment areas; areas posing dangerous hazards to service dogs; and food preparation areas where public safety regulations prohibit the presence of a service dog. Restricted areas will be identified by the department responsible for controlling access to the area after consultation with the Office of Equal Opportunity. Where restrictions are necessary, access to these areas will be accommodated through other reasonable means to be determined on a case-by-case basis.

There may be a few circumstances when a service dog cannot be accommodated because doing so would result in a fundamental alteration to the nature of the University’s business. The Office of Equal Opportunity should be consulted in these circumstances.

**Guidelines for Members of the CSU Community about Service Dogs**

To ensure equal access and nondiscrimination of individuals with disabilities who are using a service dog, members of the CSU community should abide by the following practices:

1. Allow service dogs to accompany people with disabilities on campus;
2. Do not ask for details about a person's disabilities;

3. Do not pet, interact, or feed a service animal, as it distracts the animal from its work;

4. Do not deliberately startle, tease, or taunt a service animal;

5. Do not separate or attempt to separate a person from his/her service animal; and

6. Provide individuals with service animals with the right of way with respect to pedestrians, cyclists and skateboarders.

Service dogs are working dogs, they are not pets. Because of this service dogs need to be interacted with differently than other dogs. Below is a list of things to do and not do when interacting with service dogs.

**DO’S**

- Speak to the owner of a service dog rather than to the dog itself
- Treat the dog and its owner with sensitivity and respect
- Acknowledge a service dogs presence and be respectful of it

**DON’Ts**

- Pet or touch a service dog without asking its handler
- Let your pet dog go up to a service dog
- Offer a service dog food
- Ride your bike or skateboard within five feet of a service dog
• ask personal questions about the handler’s disability, or why they need the service dog

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