

# Accommodating Students with Psychiatric Disabilities in the Post Secondary Environment

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# Mental Health Construct

- What is normal? The bell shaped curve
- Serious mental illness to “perfect mental health”.
- It is a continuum on which we fluctuate our whole lives

# Challenge of Mental Illness

“to establish a new and valued sense of integrity and purpose within and beyond the limits of the disability; the aspiration is to live, work and love in a community where one can make a significant contribution.”

Pat Deegan PhD



# Let's Begin with Some Stats

- 20% of all children face mental health issues
- Only 2 in 5 of those children receive treatment
- 80% increase in suicidal ideation in 5-8 year olds

US DoE 2013

# Disability Statistics

- 91% of college students report being diagnosed in the last year with a psychiatric condition.  
50% seek clinical treatment
- Anxiety has surpassed depression  
24% report it is affecting academics
- Since 1990 the suicide rate for college students has outpaced the rate for those who don't pursue post secondary education

National College Health Assessment Survey 2017;

# So What's Going On Here?

- Poor Copers
- Lack of Resilience
- Mental Health Issues



Why the Uptick?

Social Media  
And  
Overprotective Parenting

# Social Media Concerns

- Reduced per time and increased tech time has lead to increased anxiety.
- Social media is another way being excluded
- Pressure to post “perfect pictures of themselves”
- Perception that no one but you is lonely



# Parenting Concerns

- Change in Parenting styles in 1960s continues
- Lack of “protected failures” as children
- Fear of disappointing parents;  
The Wonderful Child Syndrome

Richard Kadisen

College of the Overwhelmed: The  
Campus Mental Health Crisis and  
What to Do About It

*“Changes in parenting practices leave  
kids less prepared for life on their own”*

# Hara Ostroff Merano

## A Nation of Wimps: The High Cost of Invasive Parenting

- Compliant, excessively dependent
- Require certainties
- Look to parents to fix everything
- Fearful not meeting high expectations



# Robin Wilson

## Chronicle of Higher Education [8/2015]

- Expectation to be substitute parents
- Expectation for mental health care
- Emerging mental illness vs typical adjustment issues
- Lack of development of independent problem solving
- Unable or unwilling to take responsibility

Dan Jones  
Past President of AUCCCD

“ Students haven’t developed skills in how to soothe themselves, because parents have solved all their problems and removed obstacles. They don’t seem to have as much grit as previous generations.”

Chronicle of Higher Education

In Addition:

Research tells us the most difficult time in person's life is?

The second most difficult time ?

**Compounded Distress**

**Intuitive Intervention and Hopefulness**



# Radar Screen Issues

- Age of student
- Sophistication of Coping Skills
- Adjustment to Environment
- Previous diagnosis

# Students with Psychiatric Disabilities

## Demographics

### Type 1

- 17-22 age range
- No pre existing condition
- Will have first experience of symptoms while attending post secondary education

## Type 1 [continued]

- Most prevalent in all post secondary settings except community colleges
- Accessed post secondary settings for educational purposes



# Students with Psychiatric Disabilities

## Demographics

### Type 2

- Mid 20s and older
- Pre existing psychiatric disability
- Most often seen as “nontraditional” student in community college settings
- May access post secondary setting for therapeutic purposes

# Students with Psychiatric Disabilities

## Demographics

### Type 3

- 17-22 age range
- Pre existing psychiatric disability
- Prevalent in all post secondary settings
- Access post secondary settings for educational purposes
- Likely to stop treatment during first semester/year

# Students with Psychiatric Disabilities

## Demographics

### Type 4

- All ages
- No pre existing condition
- Prevalent in all post secondary settings
- Became Traumatized on campus



# Readiness...Not Only Symptom Control

- Perspectives on Readiness
- “Otherwise Qualified”:  
Academic Ability/ Behavioral Compliance
- Psychiatric Symptoms :  
Reflected in Self Regulation  
Cognitive and Emotional

# Some Global Generalities:

## Cognitive Repercussions of Psychiatric Disabilities

- Slowed thinking
- Slowed response time
- Word retrieval difficulties
- “Motivation”: initiation/avoidance/procrastination

**\*\*Due to Medication or Symptoms or Both\*\***

# Some Deficit/Symptom Generalities

- Anxiety Issues: Focus
- Depression Issues: Energy Flow
- Axis 1 Issues: Higher Level Thinking
- Interaction Issues: Challenging /  
Perseveration



# Behavioral Repercussions

- Sustaining Effort
- Tolerating Divergent Ideas
- Moderating Impulses

AND

**Difficulties with Social Nuance**

# Accommodations

Just ask...but WAIT  
there is a process

# Accommodation Requests and Approval: Everyone's Role

- Clinical Professional's Role:

Diagnosis

Functional Limitations

- Disability Services Staff Role:

Explaining Process and Environment

Designing/ Allowing Accommodations



# Disability Services Professionals

- Must accept the Diagnosis and Functional Limitations as stated by the Clinical Professional

BUT

- Are **not** required to implement the specific Accommodations requested, provided different accommodations address the functional limitations

# Most Requested Accommodations

- Extended Time
- Excused Absences
- Voluntary Withdrawal

# What Families/Students Don't Know

- Documented Disability [ADA not IDEA]
- Substantial Limitation ...to Function
- No Manifestation Determination
- Belief that College is Curative [CC]



# So what is An Accommodation Anyway?

- *Not* Modification
- Process Differentiation
- Utilized Only Where and When *Required*
- Individually Designed

# Some Accommodation Generalities

- Anxiety Issues: Pre Process
- Depression Issues: Broken Time
- Axis 1 Issues: Avoid “Demand Response”
- Interaction Issues: Alliance / Cooperation

# Considerations when looking at Functional Limitations for Learning

- Positive Symptoms
- Negative Symptoms
- Medication Related Symptoms

Function NOT Diagnosis



# Functional Limitations Related to Symptoms

- Medication Side effects
- Screening out environmental stimuli
- Sustaining concentration
- Maintaining Stamina
- Handling Time pressure and multiple tasks
- Interacting with others
- Fear of Authority figures
- Responding to negative feedback
- Responding to change
- Severe test anxiety

# Global Instructional Strategies

- Ability of faculty to address variety of learning styles [UDL]
- Incorporate experiential learning
- Set Clear behavioral expectations for all students

# Accommodation Categories

- Classroom Environment
- Exams
- Assignments



# Classroom Accommodations

- Preferential seating
- Classmate assistant...not behavioral aid
- Beverages permitted
- Use of tape recorder
- Note taker or copied notes/instructor or classmate
- Early availability of books and syllabus
- Opportunity to tour class environment before classes begin
- Course material on disc
- Private feed back on performance

# Assignment Accommodations

- Substitute assignment process not content
- Advance notice of assignments
- Permission to submit assignment in comfortable modality; typed, handwritten, recorded

Written assignments in lieu of oral and vice versa

Assignments in artistic format

Assignment assistance during hospitalization

- Course materials on disc
- Flexible time to complete assignment when time is fundamental to learning outcome
- Tutor /professor collaboration

# Exam Accommodations

- Alternate format
- Assistive computer software
- Flexible Time for test taking
- Individually proctored
- Exam in separate, quiet ,minimally distracting environment
- Increased frequency and decreased amount of learning assessed at any one time



BEST STRATEGY FOR ALL STUDENTS

**\*\*PRE PROCESSING\*\***

#1 Strategy to Promote Learning

UNIVERSAL DESIGN

Or

MULTI MODAL LEARNING

# Prominent Issues of 2017-2018

- Aberrant Behavior vs Psychiatric Disability
- Campus Civility Code Concept
- Comfort Animal Request Consideration Model
- Direct Threat
- Suicide
- PTSD
- Social Anxiety/ Phobia
- Otherwise Qualified Litigation
- NAMI Student Survey



# Is There a Direct Correlation between Psychiatric Illness and “Bad Behavior”?

NO

Just because students act in an inappropriate manner doesn't mean they have a psychiatric disability

Just because students have a documented psychiatric disability doesn't mean they will act inappropriately.

# Dispelling Myths

- Lack of social awareness in and of itself is not a psychiatric disability
- Aggression in and of itself is not a psychiatric disability
- In fact, people with severe psychiatric disabilities are 2.5 times more likely to be victims than perpetrators

AND

A psychiatric disability does not  
invalidate the requirement to comport  
with behavior policy

It does allow for accommodation to  
assist student to exhibit required  
behavior



# Behavior vs Conduct

- *Behavior* is an individual's actions
- *Conduct* is an individual's compliance with a directive, policy or accepted practice

# Sound Familiar??

- Students and faculty report feeling “uncomfortable “ around a particular student
- No violation of behavior policy has occurred

YET

- Student is not performing in class or on campus in a manner reflective of the college community

# Dilemma

Individual is not functioning in the manner  
expected of a student

- 1] Does the Student know what is expected?
- 2] Does the student know how to “survive  
and thrive” at this Particular Institution??



# Campus Civility Code Concept

- Goes beyond “what can’t do” [the focus of most Conduct Code]

TO

- Campus Civility Code What is expected in:

Academic Life

Campus Life

# Comfort Animal Request One Promising Process

- Housing Accommodation Committee
- Disability Services and Residential Life
- Disability Services receives Disability Documentation
- Once Disability is established and the Accommodation of Comfort Animal is Sanctioned
- Residential Life takes over around Process and Enforcement for Maintaining the Animal in the Dorm

# Direct Threat

- March 2011 DOJ releases modification of Direct Threat Language in Title 2 of ADA [2013 ruling confirms decision]
- Redefined Direct Threat as significant risk to health and safety of OTHERS
- Not permissible to involuntarily withdraw a student due to SELF harm unless that student violates behavior code.



# Just a Word about Suicide

- 8.3 million adults over 18 reported suicidal thoughts 2000-2009
- 2.2 million of them made plans
- 1 million attempted suicide
- 1 completed suicide for every 100-200 attempts in 15-24 year olds, it is the third leading cause of death
- Suicides are 4 times more likely in males
- Females express more suicidal thoughts
- Firearms are used more by males
- Poisoning is more common in females
- Suicidal thoughts ,planning and attempts are highest in 18-29 year olds.

# PTSD

- Becoming more Prevalent on our Campuses
- Distinction from Anxiety Disorders
- Accommodations by Functional Deficit
- Campus Based Accommodations

# Social Anxiety/Phobia Disorder

- Persistent fear of being in social situations where feel may be judged, embarrassed or humiliated
- Avoidance of social situations or enduring with intense fear
- Anxiety out of proportion to situation
- Anxiety interfering with daily living
- Anxiety not explained by medical condition, medication or substance use



# Common Social Anxiety/Phobia Accommodations

- Like all psychiatric disorders medication is the first line of defense: SSRIs are usually prescribed here
- Therapy usually includes “systematic desensitization”.
- Visiting classrooms and time on campus before classes begin is essential
- Syllabus early and prompt notification of class requirement changes
- Ability to choose seating and to leave class if necessary

# Otherwise Qualified Standard Upheld

- Student was dismissed from a medical school program after 5 Major Depressive Illness episodes involving alcohol consumption.
- 11<sup>th</sup> Circuit upheld the dismissal ruling that the College had made many attempts to accommodate the disability.
- Dismissal was based on misconduct involving the use of alcohol not on the disability.
- The behavior rendered the student “otherwise not qualified”.

# NAMI Mental Health Survey: College Students Speak

- Mental Health awareness training for faculty, staff and students
- Suicide prevention awareness programs
- Peer run support groups
- Mental Health information during tours, orientation, in health classes and at campus wide events.
- Screening on campus and referral to off campus mental health services and supports



# Students Report

## *Factors Influencing Successful Degree Completion*

- Development of higher level thinking skills
- Development of insight into their disability
- One staff or faculty member who believes in them

# REMEMBER

You are where “The Rubber Hits the Road”

No one knows the student’s functioning better than you  
YOU

“SO”

Do you have sufficient information?

Do you know how to design accommodations?

Do you know the red flags for concern?

Do you know who to turn to on campus with those concerns?

## CONT'D

Do you foster the students' knowledge of their disability functional limitations and the accommodations that will assist them?

Does the curriculum on your campus instill opportunities for higher level thinking for all students?

**\*\*Are YOU Hopeful for your student's with psychiatric disabilities?\*\***



.....in a nutshell, while I was attending those four consecutive semesters at Boston University – I was not manic. I was not homeless. I was not a mental patient. I was a  
STUDENT

Gaston Cloutier

# References

## Organizations and Websites

- NAMI: On Campus Website

[www.nami.org/namioncampus](http://www.nami.org/namioncampus)

- AHEAD Special Interest Group on Psychiatric Disability

[www.ahead.org/about/SIGs/psych/psychology](http://www.ahead.org/about/SIGs/psych/psychology)

- Revolution Online Mental Health Fair

[www.revolutionhealth.com/healthfair](http://www.revolutionhealth.com/healthfair)

- Fact Sheets [cont.]

- National Mental Health Anti Stigma Campaign Fact Sheet

[www.prenewswire.com/mnr/adccouncil/2593/](http://www.prenewswire.com/mnr/adccouncil/2593/)

- Issue Brief- The Emergence of Psychiatric Disabilities in Postsecondary education

[www.ncset.org/publications/issue/NCSETIssueBrief\\_3.1.pdf](http://www.ncset.org/publications/issue/NCSETIssueBrief_3.1.pdf)



- Fact Sheets [cont.]

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# Publications

- Higher Education Support Toolkit: Assisting Students with Psychiatric Disabilities; Boston University Center for Psychiatric Rehabilitation
- Helping Students in Distress: A Faculty and Staff Guide for Assisting Students in Distress; Central Connecticut State University
- College Students with Disabilities: What Factors Influence Degree Completion?
- CDC : Suicide: Facts at a Glance [2012]
- National College Health Assessment [2017]
- Campus Mental Health Services: Recommendations for Change [2006] American Psychological Assoc.

THANK YOU!

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