



DSS FACULTY GUIDE

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Attention Deficient/Hyperactivity Disorder

AD/HD often begins in childhood and can persist into adulthood. It is among the most common neurological disorders that can affect adults. AD/HD is a chronic condition including attention difficulty, hyperactivity, and impulsiveness. It is not synonymous with learning disabilities. Students with AD/HD may or may not have specific accompanying learning disabilities. Although these students have symptoms of both inattention and hyperactivity impulsivity, there are some students in whom one or the other is predominant.

Functional Limitations

- Difficulty with time management
- Inadequate organizational skills, procrastination
- Low self-esteem resulting in uncertainties
- Difficulty keeping up with assignments
- Problems with mood stability that interfere with academic performance
- Distractibility and difficulty focusing, resulting in over inattention
- Impulse control compromising the ability to self-regulate
- Auditory processing problems limiting understanding
- Problems with reading comprehension and memory due to mind wandering
- Inadequate note-taking or writing skills resulting in disorganized and repetitive writing
- Lack of perseverance
- Sleep problems

Behaviors: Inattention

- Fails to give close attention to details or makes careless mistakes in schoolwork or other related activities, resulting in work that is often messy and performed carelessly and without considered thought
- Has difficulty sustaining attention in tasks
- Does not seem to listen when spoken to directly
- Does not follow through on instructions and fails to finish schoolwork or duties due to inattention (not due to inability to understand instructions)
- Has difficulty organizing tasks and activities
- Avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort; e.g., homework or paperwork

- Loses things necessary for tasks or activities; e.g., school assignments notes, books, or tools
- Is easily distracted by extraneous stimuli that are usually and easily ignored by others; e.g., a car honking, a background conversation
- Fidgets or is always “on the go”
- Has difficulty regulating attention
- Blurts out answers before questions have been completed
- Forgetful in daily activities; e.g., missing appointments

Behaviors: Hyperactivity

- Excessive motor activity; e.g., leg bouncing, finger or pencil tapping
- Restlessness, difficulty remaining seated, inclination to pace
- Difficulty sitting down and getting started on independent work
- Fidgets with hands or feet or squirms in seat or is often “on the go”

Behaviors: Impulsivity

- Often talks excessively
- Blurts out answers before questions have been completed
- Has difficulty waiting his or her turn
- Interrupts or walks in on others

Teaching Strategies

- Supplement oral instructions with visual reinforcement, so that the student can frequently check that he or she is following instructions appropriately; e.g., write assignments on the board, photocopy printed instructions, use an overhead, or have matching instructions on tape
- Consider where the student sits. A quiet seat in close proximity to the instructor may help the student to stay on task
- Prepare the student for transitions or unusual events by explaining the situation and describing appropriate behavior in advance
- Address essential academic and behavioral expectations in the class syllabus
- Outline class presentations and provide written list of key terms and points
- Repeat and summarize segments of each presentation and review it in its entirety
- Paraphrase abstract concepts in specific terms and illustrate with examples
- Provide concrete examples, personal experiences, hands-on models, and helpful visual materials such as charts and graphs
- Make required book lists available prior to the first day of class to allow students to begin reading early or obtain text in an alternate format

- Keep all instructions concise and reinforce with brief cue words
- Repeat or re-word complicated directions
- Use color codes or supplementary symbols to help students overcome perceptual problems
- Orient students to the class laboratory and equipment. Label equipment, tools, and materials. Use cue cards or labels designating each step of a procedure
- Allow students to use computers with speech output, spellcheck, or grammar check

Interaction with Student

- Suggest organization, planning, and time management strategies
- Provide coaching on activities that help structure information
- Encourage proofreading
- Read aloud to allow students to hear information and instructions
- Follow up with students to encourage proactive behavior



Autism Spectrum

Autism spectrum disorder (ASD) is a serious developmental disorder that impairs the ability to communicate and interact. Autism spectrum disorder impacts the nervous system. The range and severity of symptoms can vary widely. Common symptoms include difficulty with communication, difficulty with social interactions, obsessive interests, and repetitive behaviors. While these are all characteristics of individuals with autism, no two individuals with autism are alike.

Functional Limitations

- Frequently misinterpret others' body language, intentions, or facial expressions
- Difficulty understanding motives and perceptions of others
- Problems articulating concerns and asking for help
- Overly-focused, obsessive, or repetitive behavior
- Vague and repetitive comments and questions
- Difficulties with transitions, changes in schedules and social norms (personal space)
- Problems with organization
- Deficits in abstract thinking
- Unusual sensitivity to touch, sound, and visual details; may experience sensory overload
- Poor or unusual eye contact

- Literal use of language
- Unusual speech intonation, volume, rhythm, or rate
- Restricted interests that may be unusual and may become a rigid topic for social interaction
- Difficulty in initiating and sustaining connected relationships

Behaviors

- Information in written assignments may be redundant, returning to the same topic repeatedly
- May be able to state facts and details but greatly challenged by papers requiring
 - Taking into account another's point of view
 - Synthesizing information to arrive at a larger concept
 - Comparing and contrasting to arrive at the "big picture"
 - Using analogies, similes, or metaphors

Teaching Strategies

- Avoid use of absolute words such as "always" or "never" unless necessary
- Keep directions simple and declarative
- Supplement oral instructions with written when revising assignments, dates, etc.
- Model assignment expectations (writing rules)
- Use clear directives and establish rules if.....
 - A student invades personal space and time
 - A student becomes inappropriate with comments or volume
- Clearly define course requirements, the dates of exams and when the assignment is due
- Provide advance notice of changes
- Make sure all expectations are direct and explicit
- Provide direct feedback when you observe areas of academic difficulty
- Encourage use of resources designed to help with study skills and organization skills
- Allow students with poor handwriting to use computer
- Use pictures and graphs whenever possible
- Use students' interests to help him or her focus and find motivation

Interaction with Student

- Detect and hear "hidden" messages
- Probe to determine students' needs

- Ask students to repeat directions in their own words, to check for comprehension
- Acknowledge students' emotions
- Help students discover different options for problem-solving
- Offer reassurance
- Teach the student to generalize and consolidate information

Common Misunderstandings

Between Faculty & Students on the Autism Spectrum Behavior	(Mis)Interpretation	Possible Cause
Mimics or recites what professor says	Not taking speaker seriously	Needs time and repetition to process information
Talks too much	Overestimation of functioning	Compensates for receptive skills
Has odd speaking habits	Inappropriate or rude	language deficits
Does not respond to facial expressions, tone	Leads to miscues in meetings and assignments	Difficulty processing non-verbal signals
Does not recognize you	Aloof, rude	Limited facial recognition
Does not shift topics on cue	Self-absorbed, uninterested	Does not automatically catch on
Lays head on desk	Rude, sleeping	Sensory overload

(Adapted from Wolf, Lorraine E, Jane Thierfeld Brown and G. Ruth Kukiela Bork. *Students with Asperger Syndrome: A Guide for College Personnel*. 2009.)



Deaf and Hard of Hearing

A person who is deaf or hard of hearing has a condition involving the entire range of hearing loss, from profound to moderate or mild; he or she may use sign language, speech reading, and other non-verbal communication. Students often define themselves by their choice of communication. It is not uncommon for students who are hard of hearing to use sign language or for students who are deaf to prefer oral communication.

Functional Limitations

- Relying on visual cues
- Miscommunications
- Reading and writing communication maybe limited by the use of one language to access another language; e.g., American Sign Language to English

- Not hearing or responding when someone speaks from behind
- Giving inappropriate responses
- Asking for something to be repeated

Teaching Strategies

- Maintain a one-on-one situation, look at the deaf person and not the interpreter.
- Avoid directing comments to the interpreter; respond directly to the deaf person. Phrases such as “ask her” or “tell him” can be confusing.
- Be aware that an interpreter lags slightly behind the speaker. Give the student time to catch up so that any question can be clarified before the topic has passed.
- If the deaf student uses sign language, the interpreter will voice what the student says, but some deaf students prefer to voice for themselves. The choice is personal and is often related to the degree of hearing loss.
- Keep in mind that students with hearing loss cannot watch someone speak or sign at the same time something is being demonstrated.

Working with a Deaf/Hard of Hearing Student and Interpreter

The Role of the Interpreter

The interpreter facilitates communication between the teacher, the deaf student(s), and the other students in the class. Interpreters are qualified as Sign Language Interpreters. Best practices indicate there should be a team of two interpreters to ensure quality interpretation for the student. Interpreters adhere to a strict code of professional conduct that includes rendering messages accurately and faithfully, and conveying the content and spirit of the speaker using language most readily understood by those they serve – both hearing persons and deaf persons. Interpreters keep all assignment-related information confidential.

- All communication comes through the eyes of deaf people. It is essential that they can clearly see the interpreter.
- You may walk between an interpreter and a deaf person as long as you do not remain in the way.
- The interpreter finishes communicating a few seconds after the speaker. Deaf people, therefore, will not respond immediately after the speaker finishes. In a discussion, it is important to allow for this “lag time” so that the deaf person can participate fully.
- Avoid private conversations; everything will be interpreted.
- If you speaking too fast, if someone speaks inaudibly, or if several people are speaking at once, the interpreter will not be able to provide a clear interpretation to the student.
- If you need to speak to the student after class, ask the interpreter if he or she is free to stay and assist. Do not assume that the interpreter is available.

- When the interpreter “voices,” he or she is interpreting what the student is signing or saying and is not speaking for himself or herself.
- When a message is being produced through sign language it is not a verbatim translation of what the speaker is saying. Please be aware that most of what deaf students and interpreters sign is not English.



Health Impairments

A range of medical diagnoses and health problems can have a temporary or chronic impact on a student's academic performance. Common diagnoses include arthritis, cancer, multiple sclerosis, asthma, AIDS, diabetes, and heart disease. Unless the condition is neurological in nature, health impairments are not likely to directly affect learning. However, the secondary effects of illness and the side effects of medications can have a significant impact on physical and mental abilities, including memory, attention, strength, endurance, and energy level.

Functional Limitations

- Difficulties attending classes full time or on a daily basis
- Issues with physical skills needed to complete laboratory, computer, or writing assignments
- Inability to manipulate small laboratory equipment or complete tasks that require precise measuring, graphing, or drawing
- Problem with prolonged sitting
- Problem working with specific inhalants in a lab
- Fatigue and memory problems
- Lack of confidence in abilities to complete tasks

Teaching Strategies

- Arrange room to accommodate student's equipment
- Consider alternatives for writing, such as marking or circling correct answers on worksheets
- Assist with organization of materials and lessons
- Maintain a communication link with the office of disability staff and learning specialist to assure appropriate and coordinated instruction and accommodations
- Be flexible to accommodate the student's health-related needs



Learning Disabilities

A learning disability (LD) is any of a diverse group of conditions, of presumed neurological origin, that cause significant difficulties in auditory, visual, or spatial perception. They include disorders that impair such functions as reading (dyslexia), writing (dysgraphia), and mathematical calculation (dyscalculia). Each category exhibits a wide variation of behavioral patterns. In general, a variety of instructional modes enhance learning for LD students by allowing them to master material that may be inaccessible in one particular form. In other words, using multiple instructional techniques increases the likelihood that students with LD will succeed.

Functional Limitations

- Memory and sequencing difficulties that may impede students' execution of complicated directions
- Difficulty integrating information presented orally, hindering students' ability to follow the sequence and organization of a lecture
- Slow reading speed, which makes comprehension difficult for students with LD, particularly when dealing with large quantities of text
- Difficulty taking notes caused by difficulty writing and assimilating, remembering, and organizing the material while listening to lectures
- Difficulty talking, responding, or reading in front of groups, though many students with LD are highly articulate
- Poor coordination, trouble judging distance or differentiating between left and right
- Problems during laboratory classes with new equipment, exact measurement, and multi-step procedures that may demand skills that LD students may lack
- Perceptual deficiencies that may cause students with LD to lack social skills or have difficulty sustaining focused attention

Teaching Strategies

- State the day's objectives at the beginning of class
- Paraphrase key points from the reading and lectures
- Provide examples (and identify which are not examples)
- Provide written directions
- Vary teaching methods with lectures, discussions, and small groups
- Provide step-by-step directions for class projects, bullet those directions, and give at least two weeks' notice of due dates

- Select well-organized textbooks with subheadings, clear explanations and instructions, and appropriate examples
- Print out or digitize copies of overheads and make them available to students
- Review material regularly
- Encourage study groups
- Provide pre-reading questions for each reading assignment or group of related assignments
- Identify key points in the readings and lectures
- Do not penalize students for spelling, organizational, or handwriting errors on timed examinations
- Allow students to use laptop computers for essay exams if they prefer to do so
- Provide written instructions for classwork and assignments, emphasizing exactly what you want students to do, and go over the instructions orally in class
- Write out the stages students need to follow to complete an assignment
- Provide adequate time for students to complete assignments. Two weeks is good for a standard college paper; four weeks is the minimum for a paper requiring library research
- Teach students to brainstorm and organize ideas. Informal outlines are usually more helpful than formal ones, as the latter may require so much detail that students fail to complete them, or spend too much time on them at the expense of completing the entire assignment
- Read drafts and give students written and oral feedback
- Encourage students to read work aloud, use tape recorders to record their brainstorming, or record an oral draft of their papers. Students may find voice recognition software helpful, and some is affordable and user-friendly
- Encourage the use of computers at all stages of the learning process
- Encourage students to attend regular tutoring sessions, and encourage tutors to focus on organization



Mobility Disabilities

Many types of orthopaedic or neuromuscular disabilities can impact mobility, including paralysis, amputation, cerebral palsy, stroke, multiple sclerosis, muscular dystrophy, arthritis, and spinal cord injury. Mobility disabilities range from lower body disabilities that may require canes, walkers, or wheelchairs, to upper body disabilities in which there is limited or no use of hand or upper extremities. Mobility disabilities can be permanent or temporary.

Functional Limitations

Functional abilities vary widely. Mobility disabilities may impact students' strength, speed, endurance, coordination, manual dexterity, range of motion, or control of limbs in a variety of ways and to varying degrees. Difficulties can include:

- Chronic fatigue or pain
- Lack of stamina
- Difficulty walking, standing, lifting, or sitting for a long time
- Difficulty attending class or arriving on time
- Problems with access to and movement in classrooms and labs
- Difficulty manipulating objects such as pages, pens, computers, and lab equipment

Teaching Strategies

- Be prepared to listen, and involve the student in finding a solution to their challenges in the course.
- Understand that occasional absences or tardiness may be unavoidable.
- Plan appropriate seating to integrate students into the class; avoid relegating them to a doorway, a side aisle, or the back of the room.
- Plan ahead for off-campus assignments and fieldwork, as these may pose access problems for the student.
- Know the college's emergency evacuation plan and make sure it is manageable for your students with mobility disabilities.



Neurological Disabilities

Neurological disorders are diseases of the central and peripheral nervous systems – the brain, spinal cord, cranial nerves, peripheral nerves, nerve roots, autonomic nervous system, neuromuscular junction, and muscles. There are more than 600 neurological diseases, including brain tumors, epilepsy, Parkinson's disease, Asperger's Syndrome (Autism Spectrum Disorder), Cerebral Palsy, stroke, and many more. Symptoms range from headaches and weakness to numbness, tremors, paralysis, seizures, memory loss and confusion, pain, poor coordination, and altered levels of consciousness.

Functional Limitations

- Frequent fatigue (physical, cognitive, and emotional exhaustion)
- Difficulties with concentration and completion of tasks or assignments
- May experience pain

- May take medication with side effects impacting concentration and memory
- May be more susceptible to stress and illnesses exacerbated by stress
- May miss lectures due to medical appointments, illness, or time in the hospital
- May have mobility or postural difficulties when walking, climbing stairs, or remaining in one position for long periods of time
- May have difficulty with writing, computer use, and other fine motor activities
- May have difficulty with oral communication
- May have poor organizational skills
- May have problems with abstract thinking and concepts
- May have a poor ability to communicate needs
- May be unable to hold or manipulate laboratory tools

Teaching Strategies

- Provide lecture notes in advance to reduce the amount of handwriting or typing required, so students can concentrate on material
- Prioritize reading lists, to allow students to engage more with pertinent texts
- Suggest a class schedule that gives students time to move between classes
- Avoid last-minute location changes; provide advance notice
- Keep classroom and meeting areas clear, to reduce the risk of accidents
- Allow students a break in long lectures
- Avoid drawing attention to students who may need to leave class
- Accommodate students who may need to sit down during labs or other activities
- Make instructions and expectations clear to avoid confusion



Psychological Disorders

Psychological disorders include a wide range of mental impairments, characterized by debilitating behaviors that persist for more than several months and significantly restrict the performance of one or more major life activities. Examples of psychological disorders include major depression, bipolar disorder, anxiety disorders, schizophrenia, and personality disorders. A student with a psychological disability may have one or more diagnoses.

Functional Limitations

In most situations, students with psychological disabilities will not show outward signs of the disability. Nevertheless, psychological disorders are disabling and pose many challenges to effective academic performance. Fear of stigma makes some students reluctant to self-

disclose, even when they are experiencing academic difficulties. Students may experience difficulties that include:

- Chronic fatigue or pain
- Sleep problems
- Undesirable side effects of medications
- Lack of stamina
- High levels of anxiety or depression, or extreme mood swings
- Severe test-taking anxiety
- Problems concentrating, understanding, or remembering
- Problems managing assignments, prioritizing tasks, and meeting deadlines
- Difficulty interacting appropriately with others, including participating in group work or approaching instructors
- Difficulty understanding and correctly interpreting criticism or poor grades
- Problems coping with unexpected changes in assignments, due dates, classrooms, or instructors
- Difficulty screening out environmental stimuli (sounds, sights, or odors) that interfere with concentration
- Feeling misunderstood, ignored, invalidated, or stigmatized
- Difficulty articulating needs

Teaching Strategies

- Establish a welcoming climate.
- Establish standards of classroom behavior for all students. Be consistent, caring, and firm in holding all students to the established standards.
- Address essential academic expectations the first day of class and repeat often.
- Allow students to learn and show what they have learned in a manner that is suitable to them.
- Engage students in continuing dialogue to help minimize problems.
- Speak with students privately when there is a problem, to avoid embarrassing students.
- Brainstorm solutions with students. Be prepared to listen and involve students in finding their own solutions.
- Ask students to repeat what you have agreed on.

Be patient and non-judgmental; avoid sarcasm. If you sense that your conversation with a student is not helping, refer the student to Disability Support Services for further assistance



Speech Disorders

Speech and language disabilities may result from learning disabilities or from hearing loss, cerebral palsy, or other physical conditions. Difficulties can range from problems with articulation or voice strength to complete absence of voice. Included are difficulties in projection, fluency (such as stuttering and stammering), and articulating particular words. Many disorders can be treated by speech therapists, who can identify problems and teach students how to address them.

Functional Limitations

- Projection difficulties
- Chronic hoarseness and esophageal speech
- Fluency problems, as in stuttering and stammering
- Articulation of particular words or terms
- Anxiety and fear of speaking in public
- Self-confidence difficulties
- Inability to express or comprehend language

Teaching Strategies

- Give students the opportunity to speak in class but do not force them. Ask students for a cue if they wish to speak.
- Give students the time they need to express themselves, without jumping in to fill gaps in their speech
- Do not interrupt or complete sentences for students
- Ask students to repeat what is said, if necessary (such a request is appropriate)
- Summarize what the student said to help him or her check for understanding
- Listen carefully to students. Repeat what you think you understand and then ask the student to clarify.



Traumatic Brain Injury (TBI)

Traumatic Brain Injury is also known as head injury or intracranial injury, and is any type of injury resulting in trauma to the scalp, skull, or brain. TBI includes brain hemorrhage, vascular injuries, cranial nerve injuries, and more; and injuries are classified as either open head injury, in which the skull is broken, or closed head injury. TBI focuses on the nature of the injury and on its effects.

Functional Limitations

- Attention impairment – difficulty paying attention
- Cognitive impairment – difficulty making decisions, etc.
- Language impairment – speech confabulation, aphasia, etc.
- Memory impairment – short- or long-term memory problems
- Conduct disorder – anger management problems, irrational behavior disturbances, etc.
- Motor disorder – neurological-based motor skills
- An impairment from other neurological dysfunctions

Teaching Strategies

- Provide preferential seating if possible (close to the instructor)
- Provide frequent repetition of important tasks
- Provide verbal and written instruction during class
- Shorten assignments or divide into parts
- Give short, frequent quizzes, rather than all-inclusive exams
- Accompany homework with written instructions
- Allow additional time to complete in-class assignments
- Provide students with instructor's notes or help students obtain quality notes from other students
- Provide student with an outline of the instructor's lecture or study guide
- Avoid placing students in high-pressure situations, such as reading aloud in front of the class.



Visual Impairments and Blindness

Low-vision students are typically print users, but they may need special materials and equipment.

- Some students may be able to benefit from magnification.
- Some may have tunnel vision with no peripheral vision, or peripheral vision with limited or no central site.
- Visual ability may fluctuate depending on the cause of the impairment.
- Vision can be influenced by inappropriate lighting, light glare, or fatigue.

Blind students characteristically have no useable vision. Instructors should work collaboratively with DSS to adequately accommodate these students. Adaptability will depend on the age of onset, the extent of the physical sensory impairment of the student's eyes, and the way in which the impairment occurred.

Academic Challenges

- Class syllabi
- Textbooks
- PowerPoint presentations
- Colored markers
- Maps
- Videos
- Written tests and quizzes
- Films
- Online teaching tools
- Library materials
- Course labs

Technology Challenges

- Math equations and symbols
- Glitches in JAWS screen reading software
- Science books in alternative format
- Blackboard testing and accessibility
- PowerPoint presentations with graphics
- Web-based videos and PDF files

- Online academic materials (MyMath Lab, WebAssign, MyITLab, etc.)
- Operating systems compatibility
- Student's limitations

Teaching Strategies

- Read aloud any information printed on the board.
- Spell technical terms.
- Speak to the class upon entering and leaving the room.
- Allow the use of tape recorders.
- Call the student by name if you want his or her attention.
- Maintain high academic standards without substantially altering the class.
- Facilitate preferential seating since the student depends heavily upon listening.
- Be descriptive when giving directions.
- Give verbal notice of room changes, special meetings, or assignments.
- Explain technical language and terminology.
- Speak distinctly and at a relaxed rate.
- Verbalize as much as possible and provide tactile experiences when feasible.
- Avoid using strictly visual examples whenever possible.

