Invisible Disabilities

PTLC Workshop
Jeannie Hoban, College-wide Counseling Center
Jelecia Kirk, Disabilities Support Services
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not every disability is visible
What are *invisible* disabilities?

- Not physically identifiable
- The term *invisible disabilities* refers to symptoms such as debilitating pain, fatigue, dizziness, cognitive dysfunctions, brain injuries, learning differences and mental health disorders, as well as hearing and vision impairments.
- These are not always obvious to the onlooker, but can sometimes or always limit daily activities, range from mild challenges to severe limitations and vary from person to person.
For the purposes of this presentation, we will be focusing on students with
1. intellectual disabilities and
2. mental/psychological disabilities
Can you help me, Mrs. Green? This wasn't covered in any of my education courses!
1. Intellectual Disabilities
The Nature of Intellectual Disability

- An intellectual disability, formerly referred to as “mental retardation” is characterized by a combination of deficits in both cognitive functioning and adaptive behavior.

- The severity of the intellectual disability is determined by the discrepancy between the individual’s capabilities in learning and in the expectations of the social environment.

(Project IDEAL, 2008)
Definitions for Intellectual Disability

- “Significantly sub-average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a child’s educational performance.”

IDEA (Individuals with Disabilities Education Act)
Definitions for Intellectual Disability

“Characterized by significant limitations both in intellectual functioning and adaptive behavior, which covers many everyday social and practical skills. The disability originates before the age of 18.”

AAIDD (American Association of Intellectual and Developmental Disabilities)
2. Mental/Psychological Disabilities
Numerous Disorders Including:

1. Depression and Mood Disorders
2. Anxiety Disorders (most prevalent – 1 in 5)
3. Psychotic Disorders
4. Brain Disorders That Affect Mental Function
5. Developmental Disabilities and Autism
6. Alcohol or Drug Addiction
Characteristics of Students with Asperger’s Syndrome or Autism Spectrum

- Difficulty communicating, including understanding facial expressions
- Poor eye contact in conversational settings
- Trouble dealing with change; do best with structured routines and schedules
- Do not do well with noisy settings or bright lights
- Difficulty asking for help when they need it
The prevalence of mental health dual diagnosis (co-morbidity) in the ASD population:

General co-morbidity is 40-70%

- **ASD and ADHD**: 17-83% (considered to be the most common)
- **ASD and ODD/Conduct Disorder**: 20-40%
- **ASD and Anxiety Disorder**: 26-62%
- **ASD and OCD**: 9-37%
- **ASD and Depressive Disorders**: 37-70% in adults
- **ASD and Bipolar Disorder**: 21-27%

*Nebel-Schwalm & Worley (2014), Tsai (2014)*
What does ASD + ADHD Look like?

- Trouble recognizing other people’s feelings and “reading” non-verbal cues
  - Very literal
  - Don’t always understand puns, riddles, metaphors, or figures of speech
- Difficulty with executive functioning
  - Hard to get organized and solve problems
- A tendency to be distracted by sights, sounds, smells, touch and other information coming in through the senses
- A tendency to be clumsy and uncoordinated
  - May have trouble with handwriting, riding a bike, catching a ball, or running
- Trouble working with words
  - Could struggle to express themselves, follow conversations, and speak with the right volume and inflection
How does Dual Diagnosis Impact Socialization?

- Ability to relate to others, to take their perspective
- Ability to focus on the “big picture” of a conversation
- Ability to concentrate and remain engaged in a social interaction
- Ability to ignore competing environmental stimuli
- Ability to put aside distracting or competing thoughts during social interactions
Some examples of ASD in the media...
How does Dual Diagnosis Impact Learning?

- Motor planning
- Visual / Spatial tasks
- Multi-tasking
- Coordination

In other words...LEARNING!
What it’s like to experience SPD (Sensory Processing Disorder)

https://www.youtube.com/watch?v=KurXpARairU
What it’s like to experience ADD (Attention Deficit Disorder)

https://www.understood.org/en/tools/through-your-childs-eyes/player?simq=66dc223a-29e3-4956-ae1e-e7b1beff3584&gradID=f774ec64-d556-4a06-abae-035bc8683bb6&personalized=true
Accommodations, Strategies, and Ideas
Academic performance may be affected when students have difficulty . . .

- With medication side effects
- Screening out environmental stimuli
- Sustaining concentration
- Maintaining stamina
- Handling time pressures and multiple tasks
- Interacting with others
- Responding to constructive feedback
- Responding to change
- Being calm under stressful situations
Possible Classroom Accommodations Include

- Preferential seating (e.g., near the door to allow leaving class for breaks)
- Use of a tape recorder
- Assign a classmate to be a volunteer assistant note taker or photocopy of student’s notes
- Syllabus and text books available early
- More absences than typically allowed due to hospitalizations/setbacks
Possible Accommodations Include

- Tape recording lectures
- Allow extra time for test taking
- Test taking allowed in a separate room
- Consideration of alternatives for group projects
Tips for Positive Communication

- Stress importance of good study habits and effective time management
- Be direct with the student, as a student with Asperger’s may not understand social cues or nonverbal communication
- Give timely feedback to the student; errors need to be corrected as soon as possible
How to handle students with invisible disabilities who are concerning...
An email from faculty...

“I am very concerned about a student I have in my class. The student in the classroom has appeared calm and reserved. Last Thursday, students were given an assignment to begin writing a first draft of an analytical paper. Saturday, I read this student's paper, and I apologize for not bringing this to your attention yesterday.

The writing is extremely troubling. I do NOT feel comfortable with such a student in the class. He will have to stay if you allow him to. I am willing to visit him in a mental institution to assist him with his writing, but I fear he could do harm to my students. His writing is a cry for help.

I am not his physician, but he needs serious help. Does this young man live with parents? Do they have guns in the house? I fear for the student, his family, and for anyone at Palm Beach State College, for this student walks our grounds.”

WHAT INFORMATION IS NECESSARY? HOW WOULD YOU HANDLE THIS SITUATION?
I am afraid. For years on end, beyond my living, they have lived in slavery. It has plagued our world and our minds, so I am not surprised that it will continue to do so for the remaining of our lives. The solution is not easy, but I believe with all my heart that if we stand together, we can overcome this evil.

Have mercy. I am unable to begin to understand the beauty and joy of life because I fear the pain of death.

An uneasily force holds the key to the chain. It is my key to freedom for many unknowns. Am I a changer, this entity or force for good, or do we seek to keep this force芝加哥 visible? Would I be a hero to the world, or my justice is a malicious one that enforces the continuation of human suffering? Simply add it to Answer even if it cannot be read.

And so I still desperately hope to change the world. If you have any ideas, I will be happy to discuss them.

You make too much sense. I cannot care what you say. It is all in the same little time you say it.

Cannot continue with this thing. Okay, okay, okay.
I can't function with this thing.
Cute, cute, cute.

No! No! No! I can't
work with long things.
I am an employee of
your furniture store.
CAPPYEVERY!

You make too much sense. I seem so crazy.
if all in the game little time you stay.

I
QUESTIONS???
Thank You!