The Invisible Need: A Study on Accommodations for Students with Psychological and Mental Health Disabilities at the Collegiate Level

An Honors Thesis (HONR 499)

by

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Abstract

In the collegiate atmosphere, people with non-apparent disabilities (such as mental health and psychological disabilities) need accommodations just as much as people who have apparent disabilities (such as physical disabilities). However, due to the nature of non-apparent disabilities, these accommodations are often disputed and difficult to define for those who work in higher education. Therefore, in my thesis I research a variety of accommodations often available for students with psychological disabilities at the collegiate level. Through factoring in national statistics, issues, and mental health trends, I comment on how Ball State University and other Indiana universities address the rising population of students with psychological disabilities. I then provide recommendations to better service this often unnoticed population for those who work in the field of higher education according to my research through addressing need to enhance accommodations to support already existing services such as counseling centers, collaborate with various departments on campus to raise awareness, and educate all involved in higher education to “see” the need for students with non-apparent disabilities.
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I would like to thank Jim Mills, Elizabeth Fallon, Tim Hess, Patricia Eaton, Debbie Spinney, Keri Turrell, Claire Woodburn, and Amanda Waling for sacrificing their time and putting their heart for people with disabilities into each and every interview I conducted across many Indiana campuses. It is truly humbling to see how much time and effort various colleges and universities across Indiana put into providing accommodations for students with disabilities.

I dedicate this thesis in memory of my friend and mental health advocate, Timothy Haurez. May he always be remembered as someone who fought for the rights of people with mental health and psychological disabilities in spite of his personal battle.
Process Analysis Statement

The motivation for this thesis came from the culmination of multiple experiences I encountered at Ball State University. When I first came to college, I learned about the various benefits of accommodations for students with psychological and mental health disabilities when those around me disclosed their disabilities and explained how their accommodations were vital to their success during college. When I was a sophomore in college, I became a proctor for the Learning Center and worked providing test accommodations for many people, including students with psychological and mental health disabilities. For the next two years, I learned more about advocating for the rights of people with disabilities and viewed many required class texts through a disability studies lens. During the summer between junior and senior year of college, I became even more involved in advocacy when I worked at a camp for students that have autism and other disabilities, oftentimes psychological and mental health disabilities. Now, I'm preparing to work as a Camp Coordinator and Marketing for a foundation that services people with intellectual and developmental disabilities, many of whom also have psychological and mental health disabilities. All of these experiences helped me to recognize that a large portion of people – 20% of the American population, in fact – have disabilities.

However, one of the reasons that this fact is so hard to see is because not every disability is apparent as such is the case for people with physical disabilities. The population of people with non-apparent disabilities, such as mental health and psychological disabilities, is the population of people who we eat with, work with, and live with... but we often do not see the way their disabilities affect their lives. Perhaps this was due to mental health stigma as many people were afraid to disclose their disability due to judgement and/or pity. Yet, more and more
people are disclosing their psychological and mental health disabilities as more and more people choose to fight the stigma of having a disability. With that being said, the statistics of people with mental health and psychological disabilities have grown exponentially in the past few decades. Since I am a college student and have seen this growth first hand along with the benefits of accommodations, I decided to research various accommodations for college students with psychological and mental health disabilities to see how higher education has responded to this population shift.

In order to prepare for this thesis, I worked with Larry Markle who is the Director of Disability Services at Ball State University. He encouraged me to read almost 500 pages of research spanning from GAO reports and various volumes of the *Journal of Postsecondary Education and Disability* in order to gain a wider understanding of the national population of students with psychological and mental health disabilities. I researched news articles on mental health trends and “The Association for University and College Counseling Center Directors Annual Survey” to see how higher education responded to this call. Larry Markle also guided me to conduct interviews with those who work at Ball State University providing accommodations and resources for students with psychological and mental health disabilities. In addition to these interviews, I contacted a plethora of Indiana colleges and universities and interviewed with various disability services directors to compare their accommodations and resources to Ball State’s accommodations and resources.

I experienced both challenges and insights throughout my thesis project. Some challenges included scheduling an appropriate amount of time to transcribe hours of phone and in-person interviews. While writing my thesis, I had trouble deciding which accommodations and resources to include in my writing when there were so many wonderful options to choose from. I
also had difficulty condensing my research into nearly 30 pages when I wished I could have written a dissertation on the subject. However, these are minor challenges considering the great insights I experienced throughout this project. For one, I experienced firsthand through many interviews the love and passion that those working with people with disabilities have for providing accommodations and resources to people with disabilities. I also learned that while many departments in higher education institutions have a concrete way of functioning no matter the particular university, those who work in disability services offices provide their services on an individual and unique basis. My eyes were opened to the benefits of current accommodations at Ball State University, possible future accommodations, and the need to support people with psychological and mental health disabilities in other departments such as Counseling and Learning Centers. Due to my research, I was able to involve myself in a process of gathering information from many departments on various campuses, thus providing me with a more encompassing view on how higher education institutions provide accommodations currently and how they could improve in the future based on my research.

In short, my thesis project provides a framework for higher education institutions on how disability services offices can work with other departments to provide the best accommodations and resources available to people with psychological and mental health disabilities. However, there are many ways that those who read my writing may find meaning in its words. For the disability services faculty members who read my words, may they find encouragement and a renewed drive to provide accommodations even if they are only an overworked office of one or two people. For the various faculty and staff from different departments who read my words, may they find encouragement to see with new eyes another population of people that they service who often go unannounced. Finally, for the people who have psychological and mental
health disabilities who read my words, may you know that you are not alone and that there are those fighting for accommodations and resources to get even better.
The Invisible Need: A Study on Accommodations for Students with Psychological and Mental Health Disabilities at the Collegiate Level

When looking at the broad spectrum of minorities in America, few people realize that the largest minority is the population of individuals with disabilities. According to the U.S. Census Bureau, approximately 20% of the population or 1 in 5 Americans are disabled (U.S. Census Bureau Public Information Office 2016). However, this community is not recognized as a minority by the American public. With the rise in disability awareness, more and more individuals are beginning to realize just how vast and diverse this population is. While some apparent disabilities, such as physical disabilities, are overt and recognized by the general public, non-apparent disabilities, such as psychological disabilities, are often difficult to observe and accommodate. This factor makes awareness of non-apparent disabilities a challenge for people to recognize, especially if a portion of the 20% of Americans with disabilities are not visible in the same sense as those with apparent disabilities.

This issue can become challenging when those with non-apparent disabilities work towards attending college in order to gain a successful career. In order to excel with these endeavors, people with non-apparent disabilities need accommodations just as much as those with apparent disabilities do, especially in the collegiate atmosphere. However, due to the nature of non-apparent disabilities, these accommodations are often disputed and difficult to define or provide. Therefore, in this thesis I will research what accommodations are often available for students with psychological disabilities at the collegiate level. Through factoring in national statistics, issues, and mental health trends, I will comment on how Ball State University and other Indiana universities address the rising population of students with psychological
disabilities. Then, I will provide recommendations to better service this often unnoticed population for those who work in the field of higher education according to my research.

While there is a broad range of disabilities and disability of every nature certainly needs accommodations, I focus on psychological disabilities because that is the fastest growing category of disability for higher education (Stein 60). However, I would not be doing this thesis justice if I did not define certain categories of disability and explain how co-morbidity, otherwise known as the simultaneous presence of two chronic diseases or conditions, factors into an individual (“Comorbidity”). As said above, apparent disabilities are disabilities a person can see, such as physical disabilities. Non apparent disabilities do not often manifest themselves physically, such as learning/intellectual disabilities. However, developmental disabilities can be an umbrella term for both non apparent and apparent disabilities.

A developmental disability is defined as “a severe, long term disability that can affect cognitive ability, physical functioning, or both” as they “appear before age 22 and are likely to be life-long” (“NIH Fact Sheets - Intellectual and Developmental Disabilities”). In other words, developmental disabilities can be apparent, non-apparent, or both. As long as the disability is effective long term, it is a developmental disability. The category of psychological disabilities “refers to a spectrum of mental disorders or conditions that influence our emotions, cognitions, and/or behaviors” (Alston). Therefore, psychological/mental health disabilities may also be considered developmental disabilities as long as they fit within both categories’ diagnosis criteria. Although co-morbidity can be seen in developmental disabilities that affect physical functioning and in psychological/mental health disabilities that affect cognitive ability, for the purpose of this thesis I will focus on the comorbid relationship between developmental disabilities that affect cognitive ability and psychological/mental health disabilities.
Since psychological/mental health disabilities such as anxiety disorders, depression disorders, bipolar disorders, Post Traumatic Stress Disorder (PTSD), Obsessive Compulsive Disorder (OCD), and schizophrenia often manifest themselves greatly when individuals come to college, individuals may become diagnosed with mental health disabilities for the first time if they have not been diagnosed previously. Even if the individual has not been diagnosed previously, this does not mean that the disability was not occurring throughout the individual’s life. In this case, the collegiate environment may trigger more mental health issues that gradually become more apparent to the individual and interfere with the individual’s educational experience. When this happens, students with psychological/mental health disabilities often visit Disability Services offices at their university to learn more about receiving a diagnosis and accommodations pertinent to their disability (United States, United States Government Accountability Office 5).

Even though there are individuals who get diagnosed with psychological/mental health disabilities when they enter into college, there are individuals who have a previous diagnosis before college. In this case, the individual may have received an Individualized Education Program (IEP) outlining accommodations that he or she received in primary and/or secondary education. However, there are no IEPs in higher education. Therefore, the individual with a previous diagnosis must work with the university, usually in a disability services office, to determine what accommodations are needed for the student’s collegiate educational experience. No matter when the individual with a disability receives his/her diagnosis, in order to work effectively both in college and further on during their careers, individuals with psychological/mental health disorders need access to accommodations such as extended time on tests, reduced distraction during tests, and excused absences in to advocate for themselves.
The population of students receiving accommodations has grown significantly in recent years. According to the October 2009 GAO report, "In 2008, students with disabilities represented an estimated 11 percent of all postsecondary students, and this population appears to have grown over the past decade" (United States, United States Government Accountability Office 8). Although modern research has proven this to be an increasing issue even in our present time, it is pertinent to notice how the research from 2008 foretells the current rise in non-apparent mental health disabilities. In fact, of the above percentage, "the largest proportion of students with disabilities, 24% percent, reported having either a mental, emotional, or psychiatric condition, or depression" (United States, United States Government Accountability Office 11). This percentage of students with mental, emotional, psychiatric conditions, and/or depression increased significantly during the time from 2000 to 2008. In 2000, there was 17.1% of students with mental, emotional, or psychiatric condition/depression as compared to 22.3% in 2004 and 24.3% in 2008 (United States, United States Government Accountability Office 38). Just two years later, a scholarly paper cited that "recent evidence from the World Health Organization indicates that mental illness affects nearly half the population worldwide" (Storrie et al. 1). Certainly, since half of the world has been affected by mental illness, there will be more and more students with mental health issues seeking accommodations in college.

The 2016 Association for University and College Counseling Center Directors Annual Survey confirms this hypothesis as they see that, for those who utilize counseling centers, "anxiety continues to be the most predominant and increasing concern among college students (50.6%), followed by depression (41.2%), relationship concerns (34.4%), suicidal ideation (20.5%), self-injury (14.2%), and alcohol abuse (9.5%)" (Reetz et al. 15). According to this information, college students primarily use counseling centers as an accommodation providing
guidance about mental health issues such as anxiety and depression. Just last year, the total
count of students who used counseling centers was 448,951 students (Reetz et al. 94). If we
take into account that 50.6% of the 448,951 students were presenting concerns about anxiety,
nearly 227,169 students came to their counseling centers for help regarding anxiety. Similarly,
since 41.2% of the 448,951 students presented concerns about depression, nearly 184,967
students came to their counseling for help regarding depression.

We cannot combine the number of students seeking help for anxiety and depression as
their percentages have to be looked at independently due to comorbidity among those who show
signs of anxiety and depression. However, these numbers do reflect that mental health is a
growing concern among college students and counseling centers. When asked, “Over the past
year, has the severity of student mental health concerns and related behavior on your campus
risen or decreased?” survey results show that 57.1% of counseling center directors stated an
increase (Reetz et al. 97). Despite this increase and awareness of the growing severity of student
mental health concerns, various facets of higher education continue to deal with issues in
providing accommodations for this population.

Due to the recent increase of students with psychological disabilities as seen above,
school and disability association officials have reported “need for staff with specialized expertise
to appropriately support these students” (United States, United States Government
Accountability Office 22). One common example of this need pertains to counseling centers as
various school officials told GAO that “their counseling centers were not designed to support the
types of psychological disabilities they now encounter among students” (United States, United
States Government Accountability Office 22). In order to address this issue, some schools have
hired staff with expertise in mental health counseling (United States, United States Government
Accountability Office 22). However, not every university can afford this accommodation as “the majority of [counseling center] operating budgets remain unchanged (55.5%), while 23.6% increased” (Reetz et al. 16). In addition to counseling centers being overbooked and understaffed nationally, colleges and universities advertise “upscale amenities” and “24/7 care” in order to convince both students and families that “they’re worth skyrocketing tuition rates” (Baker). However, it is difficult for counseling centers to rise to this standard with the budgets provided. Even those who run on mental health platforms for senator seats at various universities, such as Briana Mullen who successfully ran for Associated Students of the University of California senator at the University of California at Berkeley states, “Access to mental health resources are the first thing that really go when faced with budget cuts” (Baker). Add in the fact that 35.9% of counseling centers have waitlisted clients waiting to receive ongoing treatment (Reetz et al. 65), and the need for mental health counselors, experienced staff, and increased counseling center budgets to service those with psychological disabilities becomes more than apparent.

Just as the counseling center is one main avenue of support for students with mental health problems, the university disabilities service/office is the other main avenue of support for this population. However, in the case that these support systems work independently of each other “there tends to be a communication gap between university counselling and disability services and the academic staff” (Storrie et al. 4-5). Although not every university runs this way, when there is no collaborative approach between a university’s counseling center and disability services, some students are referred to the university counselling service by faculty and never learn of the disability services accommodations and vice versa. This leads to an issue of both departments lacking communication across the same population of students being serviced.
When multiple departments of higher education lack communication regarding any issue, there are repercussions felt throughout the entire institution. While colleges and universities are accustomed to communicating accommodations for learning and physical disabilities, Professor Peter Lake, an expert on higher education law and policy, believes that “they don’t understand simple ways of accommodating mental health disabilities” (Baker). When university counseling centers and disability services offices work independently, the full picture of providing available accommodations for students with psychological disabilities does not appear evident to the institution's administrators. However, the administrators do see the effects of stigma reduction when more students disclose disabilities and ask campus counselors for assistance regarding “severe” psychological problems and suicidal thoughts. Without the full picture of university counseling centers and disability services offices working to provide accommodations, administrators become so worried about “potential liability, getting a reputation as a ‘suicide school’ and the safety of the community that they discipline students with mental health issues instead of giving them or even informing them of their federal rights” (Baker). However, this type of “completely unnecessary overreaction” (Baker) only exasperates mental health issues when stability and empathy are needed for students with psychological disabilities’ overall health.

In addition to the issues listed above, students dealing with emotional distress due to mental health issues may have poor grades, academic probation leading to depression, decreased emotional and behavioral skills, social isolation, conflict and inadequate finances (Storrie et al. 2). Other issues include problems with accommodations, coping with academic load, and difficulty attending classes (Storrie et al. 2). Even though the list of issues in providing accommodations for students with psychological disabilities may seem exhaustive (especially
when analyzing the need for increased counseling center budgets/staff, collaboration across various departments, liability concerns, and general student health issues), many higher education institutions have been making progress through embracing supportive mental health trends and accommodating all people with disabilities.

For example, some staff who work in postsecondary education sees the benefit of Disability Services offices working with other staff in different departments on campus. According to “Disability Services Partnerships with Faculty Members” both centralized Disability Services offices and decentralized Disability Services offices have proven to be successful according to the university’s specific demographic and needs. Yet, both of these models “can be enhanced by collaborating and forming partnerships across divisions as Disability Services should not work in a vacuum on campus” (Scott et al. 215). This article goes on to describe one way this goal can be met: At Ball State University, “a partnership fostered between a disability services educator and a faculty member” creates “a successful collaboration between Disability Services, housed in Student Affairs and academic faculty who are members of Academic Affairs (Scott et al. 217). There are many benefits to this collaboration. One benefit is that faculty members can gain excellent opportunities for scholarship and service through these partnerships. Another benefit pertains to Disability Services staff because “understanding faculty needs and actively working with them is critical to the work in Disability Services and ensuring academic success for students with disabilities” (Scott et al. 217). In summary, I believe this portion of the article reflects the overall benefit of collaboration: “The ability to partner with faculty members not only contributes to the Disability Services literature, but it also improves practice on their campus, and creates a broader support for students with disabilities on campus and enhances their experiences” (Scott et al. 218). Even though this program benefits both
faculty and Disability Services primarily, it benefits all students with disabilities (including students with psychological disabilities) by improving support for students with disabilities across Student Affairs and Academic Affairs offices.

Another way that higher education institutions have helped all students with disabilities comes through removing the stigma about having disabilities particularly through the use of digital media education and advocacy. One way that an institution of higher learning advocated for this was through coordinating with the disability service office and faculty to design “a general education course that critiques the social construction of disability in the media” (Hartley et al. 239). After this course was completed, researchers found that “interviews with eight students illustrated the relevance of the curriculum as it sponsored emergent awareness and understanding of ableism,” otherwise defined as “a form of social prejudice against people with disabilities, defined as the perceived inferiority of people with disabilities and preference for able-bodiedness” (Hartley et al. 239). The course functioned through providing “a limitless supply of first-person narratives about disability” and it was shown through popular social media tools such as Twitter, Facebook, YouTube, blogs and wikis (Hartley et al. 240). These narratives allowed those in the course to recognize that digital media is becoming “increasingly integral to addressing disability as a social justice issue... bridging the gap between information, knowledge, and the social construction of disability” (Hartley et al. 240). In turn, this analysis had many effects on campus by “serving as a way to mobilize supporters, foster dialogue with a wide audience, and draw attention to social justice issues that may otherwise go unnoticed on campuses” (Hartley et al. 240). These researchers suggest that “on college campuses, social media is ever present, and colleges and universities can use Twitter feeds, informational blogs,
and YouTube channels that address disability concerns” to not only educate their campuses, but also to create those who will advocate for the rights of all people with disabilities.

Another relatively new approach that some universities and colleges have developed in order to accommodate the increasing number of students with disabilities all with various needs is through academic coaching programs. An academic coaching model is defined below:

Academic coaching consists of a series of individualized meetings between a student and an academic coach. During these meetings, the academic coach and the student work collaboratively to identify a student’s strengths and develop the skills the student needs to be academically successful. Many approaches to academic coaching use an inquiry model—a semi-structured format focused on reflection, planning, and self-awareness using open-ended questions. The flexibility of the inquiry model allows sessions to be tailored to meet the students’ needs while also modeling reflective thinking, goal setting, and planning. (Mitchell and Gansemer-Topf 250)

In other words, academic coaching allows students to meet with an academic coach to identify academic goals through an inquiry model. The flexible nature of the inquiry model tailors the student’s next sessions to allow the student to practice reflective thinking, goal setting, and planning.

While there are many benefits to academic coaching for all population, the population of people with disabilities, particularly non-apparent disabilities, have benefitted most. In fact, “disability scholarship has predominately focused on the positive effects of academic coaching for students with ADHD and learning disabilities” and have found that “academic coaching benefits SWD [students with disabilities] by developing their communication and self-advocacy skills” (Mitchell and Gansemer-Topf 250). Although there was not much research on how
academic coaching benefits students with psychological disabilities, the same principles of benefiting the student with a disability through academic coaching applies. In fact, when working with students with disabilities, (especially students with psychological disabilities) "many times in practice the disability can overshadow the person. A humanistic approach creates the opportunity to focus on the individual needs of the student instead of focusing on the assumed limitations of the disability" (Mitchell and Gansemer-Topf 251-252).

Not only does academic coaching help students with disabilities learn self-regulation tools, academic coaching also benefits Disability Services and Learning Centers across various universities. For example, this article uses a Midwest university’s experience to legitimize the benefits of academic coaching for both Disability Services and Learning Centers. At this particular university, "the number of students receiving accommodations increased 11% in three years... professional and graduate staffing within the DS office remained unchanged" (Mitchell and Gansemer-Topf 250). With this increase, "DS staff had less time to meet one-on-one with students to address academic and personal concerns related to the student’s disability, to connect the student with appropriate resources, and to aid the student in developing the appropriate academic skills necessary for success in postsecondary education" (Mitchell and Gansemer-Topf 250). In order to better serve this population of students and provide individualized support, the DS and LC [Learning Center] at this university collaborated to implement a pilot academic coaching program for students with disabilities. Although it was originally intended for students with autism spectrum disorder, "it became apparent that all students could benefit from working with an academic coach who had both academic skills and disability-specific knowledge" (Mitchell and Gansemer-Topf 251). Through this collaboration of students with disabilities,
disability services, the Learning Center, and academic coaching, unique opportunities to strengthen collaborations within the Division of Student Affairs benefits all.

Other colleges have promoted self-advocacy in different ways. At McDaniel College, McDaniel Step Ahead, “a five-day transition program that aims to fine-tune the academic, social, and independent living skills of first year students with disabilities” benefits its population of students with disabilities (Lawson et al. 299). This program particularly benefited students with mental health issues as “many students who receive mental health treatment at home do not continue with services when they arrive at college. Consequently, there is an increase in students going to the hospital for psychological reasons” (Lawson et al. 300). With this program in effect, the workshops at Step Ahead “build self-esteem, reduce anxiety, and normalize the experience of navigating higher education with a disability” (Lawson et al. 301). Therefore, McDaniel College supports its students with disabilities, particularly students with mental health disabilities, by helping to facilitate a successful transition from high school to college and displaying accommodations available to students on campus.

As with accommodations for students with disabilities, many accommodations for students with apparent disabilities also applies for students with non-apparent disabilities. This directly ties into the concept of Universal Design for Instruction. Those who believe in the concept of Universal Design for Instruction believe education should be accommodating to all regardless of disability status. Universal Design started out as an architectural concept focused specifically on making physical structures accessible to individuals with disabilities. Much of the same thought applies to Universal Design for Instruction as UDI’s intention is to “provide access for all students approaching course content, ideas, and themes, regardless of their various life experiences and backgrounds” (Hartsoe and Barclay 224). Nine principles make up this concept:
equitable use, flexibility in use, simple and intuitive use, perceptible information, tolerance for error, low physical effort, size and space for approach and use, a community of learners, and instructional climate” (Hartsoe and Barclay 224). Those who advocate for the principles evident in UDI argue that “the use of UDI principles engages all students in a more efficient way” during “a time that an increasingly diverse population of students is coming to college campuses” (Hartsoe and Barclay 224). In turn, implementation of UDI helps disability services turn from making appropriate accommodations for students with disabilities and instead allows the office to become “a resource to faculty in implementing UDI in their courses” (Hartsoe and Barclay 231). Due to that the principle of UDI is to help everyone learn in a more accommodating way, those with psychological/mental health disabilities will certainly benefit from this approach.

Throughout this entire section discussing trends that those in postsecondary education use to accommodate students with disabilities, readers should notice that most accommodations such as disability services collaboration, social media advocacy, academic programs, and Universal Design for Instruction benefit both students with apparent disabilities and non-apparent disabilities. However, there are obviously some accommodations pertinent to the type of disability. In recent years, there has been a plethora of requests for assistance, service, and support animals on campus. While each category of animals provides service, each category provides differing services to different types of disability. For example, certain dogs can be defined as assistance animals as long as they have been trained to perform a specific job and aid an individual who may be deaf or hard of hearing, blind, or have some type of disability. Some of these dogs live as pets and do not perform a duty, and others have been labeled as emotional support dogs due to the amount of support that they provide their owners when they are at home.
Some are certified as therapy dogs to support a variety of people in stressful situations (Polking et al. 246).

With the influx of requests regarding service, emotional support, and/or therapy animals, increased discussion has occurred between concerns from disability services providers regarding their obligations to provide reasonable accommodations to the students (Polking et al. 237). Employees can only ask two questions inquiring if the animal qualifies as a service animal: (1.) “Is this a service animal that is required because of a disability?” (2.) “What work or tasks has the animal been trained to perform?” (Polking et al. 237). Due to limitations such as this, disability services offices have to walk a fine line when providing accommodations regarding whether or not to permit certain types of assistance animals on campus.

What makes providing accommodations even trickier for disability services office is the legislation regarding this matter. According to the Americans with Disabilities Act (1990), “Dogs whose sole function is to provide comfort or emotional support do not qualify as service animals” (Polking et al. 245). However, not everyone agrees with this reasoning. For example, “the Department of Justice and the Department of Transportation utilized a broader definition for assistance dog by incorporating ‘emotional support animals for reasonable accommodation as required by the ADA’” (Polking et al. 245). On top of this contradiction, “the U.S. Department of Justice (2015) identified that emotional, therapy, comfort, and companion animals are not considered service animals under the ADA; However, it was noted that some state and local governments have laws that allow individuals to emotional support animals into public places” (Polking et al. 246). So, what do disability offices and other college personnel decide to do regarding this matter?
One article suggests that there are multiple ways to handle this issue and provide service to all who need this type of accommodation by having employees of disability offices incorporate an assistance dog within their offices for use by a variety of staff and students. By allowing this, students become interested in the disability office, stigma regarding disabilities becomes reduced, and many benefits can be had for the people using the assistance animal (Polking et al. 247-248). For this process of allowing the assistance dog in the disability office to occur, many steps need to be taken to ensure safety of the animal, students, and staff. Research suggests that “offices would need to obtain necessary paperwork and authorization from university officials allowing the assistance/therapy animal to be present in disability offices” (Polking et al. 248). In addition to this, there would need to be a letter sent out to all students associated with the office to inform them of the new “employee” (who also needs to be allergen free) (Polking et al. 248). Finally, a staff member within the office would need to take on the role as a “handler” which means that the individual would need to acquire a trained assistance dog from a certified organization (Polking et al. 248). Although a lot of steps need to be taken for an assistance dog to work in a disability office, many people can be accommodated through one animal.

Similarly, if disability offices are urged to grant acceptance for a support animal for a particular student rather than for a disability office, research recommends that multiple conversations happen within the university to best decide how to move forward. For example, a university physician could encourage “more serious substantiation than a letter from a psychologist or counselor” through having students who request emotional support or non-service animals meet with the disability office and a diagnosing practitioner to answer a series of questions pertaining to the request while requesting supporting documentation of the diagnosis.
(Polking et al. 248). Research suggests that this process “could assist disability service providers unskilled with psychological documentation to standardize a method of asking and receiving questions pertaining to each individual student” (Polking et al. 248). In short, although the process of determining whether or not an assistance animal is a reasonable accommodation may be tedious for disability offices, it does create a framework for disability offices to decide how they will accommodate the students at their particular university.

Decisions regarding assistance animals is just one part of the job for those who work in Disability Services at Ball State University. According to Larry Markle, Director of Disability Services, “We’re seeing an increasing number of students with mental health issues in recent years. It’s been an exponential increase in my 18 years here.” (Markle). For example, Larry stated that, “In 2005, we had a total of 44 students that had disclosed psychological disabilities to us and used services. In the most recent academic year, 2017, we had a total of 224. So within 12-13 years, there was a huge increase” (Markle). A deeper look into the most recent population of students with psychological disabilities shows that “the type of disabilities that we’re seeing are students with bipolar disorder, students with schizophrenia, OCD, PTSD, but the mental health disabilities we are seeing the most, though, would be anxiety and depression” (Markle). For any population of students who are disabled, Larry asks students disclosing disabilities to bring some kind of documentation to verify the disability. He states, “I really want something that describes the disability and how the student might be impacted in the educational setting” (Markle) However, he also states, “that piece of paper [documentation] doesn’t dictate what the student receives as an accommodation. I’m going to have a conversation with the student because the student’s input is the most important thing in determining what kind of accommodations are appropriate” (Markle). Once the student meets with Disability Services, the
When looking at the list of accommodations given for students with psychological and mental health disabilities, Larry states, “Test accommodations are a primary thing as an accommodation that is offered to students with mental health disabilities” due to how the nature of the disability manifests itself in the testing environment (Markle). Another possible accommodation allows students with anxiety, panic disorders, and PTSD to leave the classroom when triggered. These are typical classroom accommodations, but Larry also states, “Often how depression or anxiety manifests itself is that it’s hard to function and get out of bed. In those situations, I include in the letter for the teacher, if at all possible, to give some flexibility relative to attendance as an appropriate accommodation” (Markle). However, this accommodation may be difficult to administer because “it’s different for every class how many absences will be appropriate. That’s a tricky accommodation and it’s one we’re seeing more and more students request” (Markle). Another accommodation that’s helpful for students with psychological disabilities is priority registration. Larry states, “We give registered students with disabilities priority registration, simply meaning they get an earlier time ticket and they get to pick times and such when they have classes.” (Markle). This can be a helpful accommodation for some students because, for some students, certain times of day may be more difficult for the student than others. There are also language requirement substitutions because “there have been situations for people with really severe anxiety disorders that manifested themselves in language requested substitutions” (Markle). In those situations, Larry asks for the student to describe to him what the issues is, make the request, show prior attempts at learning the language in other classes, and provide specific documentation from the psychologist to verify this from a medical and
psychological perspective. Larry states, "We’ve granted the language substitution for many people with disabilities, including some for students with mental health issues" (Markle).

In addition to the accommodations listed above, Ball State University has meetings for new students that have disabilities based on disability type at the beginning of the year. Larry believes, "It’s so vital that, as soon as the student is admitted to the university, they’re made aware of that there is an office that can provide services and accommodations for them" and this is done through submitting a self-disclosure of disability form when the student receives his or her letter of admission (Markle). He states, "We’ll have a meeting for new people who are chair users, have a mobility impairment, blind, visually impaired, deaf, hard of hearing, and then maybe a larger catch all with non-apparent disabilities that use test accommodations and such" (Markle). Although these meetings are not accommodations by themselves, they get the students plugged into the available resources and accommodations at Ball State University from the day they enter campus. Another wonderful resource for students is the Faculty Mentorship Program at Ball State. It started in 2006, and there are around 55 faculty members all across campus who volunteer to serve as mentors for new students with disabilities. Larry describes this program as "a program that connects the students to a professor in the student’s major as an informal mentor to help the student better understand what college professors expect of students" (Markle). The majority of students in that program have non-apparent disabilities and has proven to be beneficial for students and faculty.

Another resource that has been proven to be beneficial for students with disabilities is the Career Coaching program. Larry believes, "The college degree is the minimum qualification for a lot of jobs. College graduates with disabilities are qualified, but there’s still a lot of employers that have these misconceptions about disability" (Markle). In order to better serve students with
disabilities transitioning out of college into the workforce, the Disability Services office received a $300,000 grant from the university to support students with disabilities’ career planning. Larry states, “The biggest part of that grant was to hire a full-time person in the Career Center to work, not just with students with physical disabilities preparing for these internships, but for all students with disabilities” (Markle). Although the program was mainly created for students with physical disabilities, he states that there are issues and roadblocks for employment for students with non-apparent disabilities as well:

Disclosure is a key one: “Do I disclose a disability? Should I disclose a disability? How should I disclose a disability?” It’s a very personal and individual decision and our Career Coach helps all students with disabilities make that decision. In fact, most of the students she’s working with are students with non-apparent disabilities. Once this grant is over in a year and a half, we’ll have to figure out what to do. Hopefully we’ve made the case that it should be an institutional decision to where the university will step up and continue to fund it long term. (Markle)

As with the Faculty Mentorship Program, the Career Coaching program for students with disabilities not only aids all students, but also directly serves the population of students with non-apparent disabilities such as psychological and mental health disabilities.

Despite the plethora of available accommodations and resources available at Ball State University, Larry believes “some things that students may want as an accommodation aren’t necessarily reasonable... it’s trying to find the balance point between the legitimate civil rights of the student with a disability and an accommodation but also upholding institutional standards” (Markle). He believes providing accommodations is “very much an art, not a science because some things may or may not be reasonable accommodations” (Markle). One of the foremost
issues under this category is in regards to assistance animals in campus dorms. Under the ADA, dogs who are just for emotional support are not service animals. However, The Fair Housing Act takes a much more expansive look and uses the term “assistance animal” to cover service dogs and emotional support animals. Although it was previously thought that college dorms don’t fit under the Fair Housing Act, the federal government states that they do. Now, college students can bring emotional support animals to campus, only in housing. Larry states that “as an accommodation, we now have to allow them [assistance animals] in University Apartments and residence halls” (Markle). Larry defines this process below:

We do ask for documentation. I ask for the student to decide which animal they would like to bring and why and we request medical documentation where this has been prescribed or recommended by an appropriate professional. I also say that this is not for private or experiential therapy. There has to be a relationship where this animal has provided emotional support for the individual. If the person provides that information, we have to allow the animal in. But we do have a process for it. (Markle)

However, there are multiple ways a student may be impacted when he or she brings in an assistance animal. Larry states, “If you think about issues with allergies, being the only person in a building with 500 people with an animal, you’ll have to be aware of the questions. I think we’ve had 60-65 students enquire already this semester and we’ve allowed 25-30 to live in the residence halls or apartments right now” due to issues like the ones described above (Markle).

Similarly, another accommodation that Ball State is sometimes hesitant to give is extensions on assignments as Larry believes, “it’s a matter of planning ahead or getting a good academic coach, but there could be extenuating circumstances” that makes this accommodation reasonable (Markle).
The Disability Services office at Ball State is housed within Student Affairs and operates as a decentralized office. In other words, Larry states, "I don’t want to segregate students with disabilities to one place. I want students with disabilities to have the same opportunities and frustrations with bureaucracy that everyone has on campus" (Markle). However, he does agree that this type of structure does not work well for everyone. He says, "At some universities, it’s a one stop shop for all things disability. You know, maybe within that university’s culture that works well. But again, I just don’t like the idea of segregating people with disabilities to one spot" (Markle). Therefore, although Larry notes that some may believe the rise of Universal Design for Instruction will eliminate some of the roles of disability services offices, Larry believes, "I don’t think it’s realistic to think that, immediately, every campus is going to be wonderfully universally designed. We’re never going to get to a point where we don’t need Disability Services offices on campuses” (Markle). In fact, Larry believes that just the opposite will happen:

The demographics change. More students with mental health disabilities and more students with autism come and we try to get a better handle on how best to serve those students. I think we’re probably to the point where we would need a third professional staff person in the office just because of the increase. I think we’re doing ok, but I think that we’re probably at that tipping point now where we need that extra person. I think it’s important because, with some of the mental health disabilities and even autism, there needs to be more direct engagement with students and faculty. (Markle).

However, in the meantime, the decentralized structure of Disability Services at Ball State University allows other departments to come alongside Disability Services and provide accommodations and resources for students with psychological and mental health disabilities.
One such department is the Learning Center and Testing Accommodations Desk at Ball State University. At the Learning Center, one-on-one and group tutoring is provided as a free service to all students regarding a plethora of classes. Oftentimes, students with disabilities meet one-on-one with tutors to receive tutoring due to the nature of the student’s disability. Tutoring Coordinator, Elizabeth Fallon, states, “We just provide services by subject matter. So, everyone does get blended together. No one gets isolated or identified as a special group. So, it is good, but I wonder if stuff should be happening to aid the growing population of students with non-apparent disabilities” (Fallon). In regards to national trends on Learning Centers and disability, more specific tutor training has been developed in Learning Centers across the country. However, Elizabeth Fallon states:

The thing about Learning Centers like ours is that, unfortunately, we are reactionary. Unless Larry or someone else in the administration says, “Hey everyone, here are the trends. We’ve been looking at our student profiles and here are the trends and what’s coming and we need to prepare for this,” we don’t prepare more training for clients with disabilities. So you know, it’s a matter of what’s needed. Maybe we aren’t addressing the need or we aren’t saying it right to get the right population and it may just take some time to grow. But I think the same holds true with students with specific disabilities. Unless someone says, “Hey, this population is coming in and this is what they need and this is how we will accommodate this,” when we’d train people to work with them, we’d then be reacting. (Fallon)

Although the Learning Center provides tutoring to all students free of service, more training for tutors regarding students with non-apparent disabilities such as psychological and mental health disabilities are needed, especially based on the population’s growth over the past 16 years at Ball
State University. However, the need for this training may not be apparent to departments such as the Learning Center because professionals and faculty cannot "see" the population of students with non-apparent disabilities. Ironically enough, even though the Learning Center tutoring program runs this way, just across the room is the Testing Accommodations Desk.

Learning Center Assistant Director, Jim Mills, runs the Testing Accommodations Desk. He describes the process the student with a disability takes from the Disability Services office to the Testing Accommodations Desk below:

What Larry and Courtney do at the beginning of each semester is that they'll meet with each student and they'll help them pick the accommodations they want. They'll help them write letters to share with their instructors so they have one for each course. And then, whether a student is going to use us or not, they send a copy of that letter for each student to us so that we have a file with them if and when a student does come. When we see that letter, we don't know the nature of the disability or the actual disability. We just know the accommodations and it's student-initiated from that point. When a student calls in to the Learning Center to set up an exam, we pull up the letter and our Excel documents and enter in all the information including the accommodations. That way, when a student comes we can have the testing booth ready with all of their accommodations. (Mills)

Since the Testing Accommodations Desk does not know the disability that the student has, they go off of the student's letter to give appropriate accommodations. Some of these accommodations are reduced distraction in the testing environment, extra time, proctoring, reading, and scribing. Jim Mills states, "I can tell you the majority of our students are students with non-apparent disabilities so that certainly our biggest population by far. Now, in terms of
breaking that down, I couldn’t tell you. But, typically the accommodations they take are extra time and reduced distractions” (Mills). This accommodation, along with the testing booth, has been proven to be a useful accommodation and resource for students with non-apparent disabilities such as psychological and mental health disabilities.

However, just as there are ways for tutoring at Ball State’s Learning Center to improve, there are ways that the Testing Accommodations Desk is looking to improve. Jim Mills states, “My first semester, so last fall, we were busy around midterms and around finals. But then even last spring, the numbers just kept going up so now we’re busy the third week and midterm and then another week. So it’s more consistently busy. So, I’d like to see more space” (Mills). With the population of students with non-apparent disabilities such as mental health and psychological disabilities exponentially rising, more and more space is needed to give accommodations to students, especially at busy times in the semester. Although this has proven to be a prevalent need based on the number of students using the Testing Accommodations Desk and Disability Services, “even though physical space has not improved, what we can provide in that space has improved” through the implementation of adaptable technology/mice, stress balls, fidget cubes, and noise-cancelling headphones/earplugs in the distant future (Mills).

Lastly, the other department I researched that Disability Services works with at Ball State University is the Counseling Center. Associate Director for Clinical Services, Tim Hess, states, “Student mental health is our number one priority. We offer skill building workshops, group therapy, individual therapy, and referral services to connect students to the best resource on campus or in the community to accomplish their goals” (Hess). He believes that, even though the number of students using these services has risen over the past few years, their services are effective in supporting student health and success. He also stated that Ball State’s Counseling
Center sees very similar patterns compared to national trends on students seeking help with mental health disabilities. Some of these trends have wonderful outcomes, as Tim Hess states, “We do feel that there are more voices talking about mental health and working to decrease stigma in help seeking, which is very positive” (Hess). However, with this greater need, Counseling Centers are facing difficulties. One such difficulty is “working to address the needs of more students with resource levels that may not shift as quickly. Also, anxiety is now the number one concern of students at universities” (Hess). In order to address these concerns and make Counseling Centers more effective, Tim Hess states, “I think a key [to improving services for students with psychological/mental health disabilities] is being reflective in our practice to ensure we are providing a strong standard of care and working with our resources to provide as much support as we can” (Hess). In other words, the Counseling Center has been doing the best job that they can to service a growing population of students with mental health and psychological disabilities with the amount of limited staff that they have. In order to service more people, being reflective with the readily available resources in practice is needed to see how they can service the most amount of people with the limited supplies they have.

Public and private universities and colleges across Indiana are seeing similar trends. At Butler University, 65 out of 392 students registered with their office of Disability Services have psychological disabilities, and this number does not include the number of students who have comorbid or dual diagnoses including psychological disabilities (Woodburn). At Notre Dame, 1500 students or 12% of the student body sees the counselling center each year, 28% of the students registered with their disability services office had a dual diagnosis including mental health disabilities (it was 25% last year), and those with mental health disabilities is the second largest group of students registered with their disability services office (Waling). At Purdue
University, there are 222 students registered with psychological conditions (Turrell). The University of Indianapolis, even though it is a smaller school, has 35 registered students with mental health disabilities (Spinney). Even an academically rigorous and prestigious college, Rose-Hulman, has 22 students who disclosed psychological/mental health disabilities to their disability services office (Eaton). Although the type of higher education institution and size of colleges/universities differ, the population of people with psychological and mental health disabilities registering with disability services offices has grown in recent years.

Yet, each higher education institution makes different decisions for available accommodations to students with psychological and mental health disabilities. For example, at Notre Dame, the Disability Services office can contact students’ professors and let them know about the student’s disability diagnosis, the state of the student’s mental health, and whether or not the student is going to the Counselling Center. They also have the ability to provide extra time on tests, papers, and project and other accommodations may include additional absences and priority registration for students with disabilities (Waling). At Purdue, some standard accommodations are extended time for exams, distraction reduced or private location for exams, classroom or exam breaks (as needed), preferential seating, eating and drinking during class or exams, note taking assistance, flexibility with class attendance policies, extensions for assignments, reduced course loads, late withdrawals, single room housing, and emotional support animals (Turrell). Rose-Hulman provides extended testing time, a reduced-distraction testing center, additional breaks during testing, 2-day extensions on homework, and noise-cancelling headsets. The disability services office at Rose-Hulman also is pushing for Universal Design for Instruction to be implemented throughout the institution in order to alleviate some of the disability services roles (Eaton). The University of Indianapolis has 18 students who use extra
time to complete exams, 11 students with flexible class attendance policies, 8 students who use a reduced distraction environment to take exams, 6 students who have permission to leave class due to an onset of symptoms, 5 students who have modified deadlines for assignments not previously announced in course syllabi, 3 students with preferential seating in the classroom, 3 students who are allowed to reschedule exams, 3 students living in a single residence room, two students who have permission to tape record lectures, 2 students who have permission to have an emotional support animal in the residence hall, 2 students who have the option of giving a private presentation, 1 student who is allowed to work individually on group projects, and 1 student who uses a service animal (Spinney). Although each of these colleges and universities have different accommodations that they provide to students with disabilities, what accommodations and resources should disability services focus on strengthening?

When studying the various ways accommodations can be implemented in higher education, some may get tripped up on making sure everyone provides the same accommodations using the same pedagogy. For example, some schools may argue that students need extensions on homework while others may question the role Universal Design for Instruction has on disability services offices. However, I believe that debates like takes away precious time that disability services offices could use to better their students. I believe that the accommodations available to students with mental health and psychological disabilities should be designed with the student in mind and crafted for each individual’s needs based on my research. With that being said, in my recommendations, I do not focus on providing a certain list of accommodations that should be available at every school for students with psychological and mental health disabilities. Instead, I focus on the largest and most expansive methods of accommodating students with psychological and mental health disabilities, which often also
include accommodations that could be used for students with non-apparent disabilities just as equally as students who have apparent disabilities. The basis for my recommendations are three-tiered: *enhance* accommodations to support already existing services such as counseling centers, *collaborate* with various departments on campus to raise awareness, and *educate* all involved in higher education to “see” the need for students with non-apparent disabilities such as mental health disabilities.

Based on my research, I would recommend that counseling center budgets across the nation be increased to service the exponentially growing population of students with psychological and mental health disabilities. As it stands, most counseling centers are breaking even with the budgets that they currently have and are doing the most they can do with the resources available. Yet, these counselling centers were not created to operate at full efficiency with the amount of students in one demographic that need specific help through the limited programs provided. However, when universities cut corners, the very department that could be reaching the fastest growing population of students becomes negatively affected. In order to have the most amount of students performing well at the university level, counselling center’s budgets need to be supported and increased to meet the demands of this growing demographic of students.

Similarly, Disability Services offices around the nation would benefit from collaborating with other departments across campus. No matter whether the Disability Services office works in a centralized manner providing all needs for students with disabilities or works in decentralized manner guiding students to learn where to find accommodations on campus, both models can benefit from collaborating with other departments on campus. For some schools, that may look like developing a Faculty Mentorship Program for students with disabilities to connect two
departments (i.e., Ball State’s Disability Services in Student Affairs and faculty in Academic Affairs). For other schools, this may look like working with Housing and Residence Life to figure out the best way to accommodate a student who has a desire for an emotional support animal in the dorms. Maybe some higher education institutions can work on developing relationships with those in Counseling Centers, Learning Centers, and Academic Coaching programs. No matter whether the Disability Services office works in Student Affairs, Academic Affairs, is centralized, or decentralized, all Disability Services offices will benefit from collaborating with other departments to best decide how to service students with psychological and mental health disabilities.

Lastly, education and awareness is imperative to helping all people with disabilities, but especially important for students with non-apparent disabilities, such as mental health disabilities, because their needs often go unseen. For example, when looking at Ball State’s Learning Center, there is a need to train more tutors on how to better serve the growing population of students with mental health and psychological disabilities. However, this need was hard to identify because, even though the population of students in this demographic grew, it was hard to see. Therefore, I suggest that student advocacy groups and student government association initiatives work with Disability Services to create presentations and in-services on how to work with all people who have disabilities, regardless of whether the disability is apparent or non-apparent. These presentations and in-services could potentially be seen as a way of educating people in various departments from professors who may want more information on the basis of Universal Design to those working in dining and the Learning Center. Education on how to collaborate with people who have mental health disabilities is a need for all departments, all faculty, all staff, and all students in higher education!
In conclusion, institutions of higher education across the nation need to adapt themselves to providing for the growing demographic of students with psychological and mental health disabilities despite that this population is often hard to analyze. As the number of students with psychological and mental health disabilities grow exponentially, accommodations and resources for this demographic should reflect meet their needs. Although each college/university meets this need in various ways, such as through the implementation of Academic Coaching programs, Faculty Mentorship programs, Career Coaching programs, Universal Design, and assistance animals in residence halls, specific accommodations should reflect the student with a disability’s individual needs. Even though the student’s needs are individualistic, those working in institutions of higher education should consider how the demographic of all students with psychological and mental health disabilities often reflects student’s individual needs. Therefore, in order to accommodate the most students possible while dismissing arguments about the nature of providing certain accommodations, I recommend that Disability Services offices focus on three initiatives. Disability Services office should encourage enhancing accommodations to support already existing services such as counseling centers, collaborating with various departments on campus to raise awareness of disabilities, and educating all involved in higher education to “see” the need for students with non-apparent disabilities such as mental health disabilities through informational presentations. Through focusing on the needs of those who have disabilities people cannot see, such as people with psychological and mental health disabilities, Disability Services offices across the nation can encourage an environment of inclusion and acceptance while providing the most expansive accommodations possible.
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