

NORFOLK STATE UNIVERSITY

Disability Services Department

Faculty Handbook

It is the policy of Norfolk State University to provide equal educational opportunity and equal employment opportunity without regard to race, color, national origin, political affiliation, religion, sex, age, or disability. Any employee or student who feels discriminated against should be referred to the Norfolk State University Director of Affirmative Action.

DISABILITY SERVICES DEPARTMENT

FACULTY HANDBOOK

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PREFACE

Norfolk State University's Disability Services Department Faculty Handbook was designed for informative and easy access for Faculty that may come in contact with individuals with disabilities in the classroom.

The Disability Services Department Handbook mirrors the language of the Americans with Disabilities Act (ADA) of 1990 and Section 504 of the Rehabilitation Act of 1973.

The mission of the Disability Services Department (DSD) is to promote the academic success of students with disabilities (SWD) through high-quality educational assistance, faculty and staff seminars, workshops and training, and assistive technology training for all students, faculty, staff and administrators.

Disability Services at Norfolk University consists of a hierarchal structure to include the Director of Disability Services/ADA Coordinator, Coordinator/Supporting Students through Disability Services (SSDS), Coordinator/Assistive Technology Laboratory (AT Lab), and a part time AT Lab Assistant.

DSD encompasses the daily function of the SSDS office, the AT Lab, and the Counselors-In-Residence Program (CIR). It reconciles administrative, faculty, staff and students' issues as they pertain to the policies and procedures, rights and responsibilities in compliance with The Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973, as set forth in the SSDS Faculty and Student Handbooks. DSD adheres to the needs and requests of the University-at-Large and all other pertinent professional organizations, remaining mindful of the University's long-range goals and mission. DSD collaborates with international, national, state and local organizations, institutions and colleges to enhance and promote the educational experience of SWD in higher education.

INTRODUCTION

On July 26, 1990, President George Bush signed into law the Americans with Disabilities Act (ADA); the most significant piece of Civil Rights legislation to be enacted within the last 25 years. This law prohibits discrimination against an estimated 43 million Americans with physical and mental disabilities in employment, transportation, public services, public accommodations and telecommunications.

Title II of ADA states that no qualified individual with a disability shall be subject to discrimination by a public entity. Many functions of state and local governments were previously prohibited from discrimination because they received Federal funds. Under Section 504 of the Rehabilitation Act of 1973, any entity that accepted money from any Federal agency was not permitted to discriminate on the basis of disability. The ADA expands this coverage to all services provided by state and local governments, regardless of whether they receive Federal money or not.

SSDS at Norfolk State University is a service provided under the Disability Service Department. Its purpose is to promote barrier-free environments and to provide reasonable accommodations (academic adjustments, auxiliary aids and services, training, consultation, and technical assistance) when and where needed.

The ADA committee here at NSU was re-established in January 1998 under the leadership of Beverly Boone Harris. The ADA Committee consists of faculty, staff and students, which meets three times a year and is available on an as needed basis to provide expertise in the implementation of the program.

A MESSAGE FROM THE DIRECTOR

Dear Colleague,

I am pleased to welcome and introduce you to the Disability Services Department here at Norfolk State University. The Disability Services Department evolved after 4 1/2 years as a Supporting Students through Disability Services (SSDS) Program in the University Counseling Center.

Norfolk State University is committed to serving students with disabilities as it relates to their educational, emotional, social, and physical experience. Our aim is to provide reasonable accommodations that will free our campus of any barriers, which might hinder or eliminate the success and participation of students with disabilities in our classrooms and programs.

I hope you will take the time to read through this handbook and familiarize yourself with the contents. If you have any questions feel free to contact me at 757-823-2409.

Sincerely,

Beverly Boone Harris
Director Disability Services/
ADA Coordinator

Disability Services Department

Beverly Boone Harris
Director / ADA Coordinator
Room 323
Mills E. Godwin Building
(757) 823-2409 Office
(757) 823-2237 Fax
bbharris@nsu.edu

Camilla Hunter
Administrative Assistant
Room 309
Mills E. Godwin Building
(757) 823-8173 Office
(757) 823-2237 Fax
cjhunter@nsu.edu

Marian E. Shepherd
Coordinator, SSDS
Room 240
Lyman B. Brooks Library
(757) 823-2014 Office
(757) 823-2689 Fax
mshepherd@nsu.edu

Marvin C. Clemmons Sr.
Coordinator, Assistive Technology
Room 240
Lyman B. Brooks Library
(757) 823-2603 Office
(757) 823- 2689 Fax
mcc@nsu.edu

HISTORICAL DEVELOPMENT OF THE UNIVERSITY

Norfolk State University was founded in 1935 as a junior college division of Virginia Union University. At that time the institution offered two-year academic programs in the liberal arts. The first classes met in the Y.M.C.A. building, then located on Brambleton Avenue. After three years at the Brambleton site, the College moved into three buildings on Bank Street. From 1938 to 1940, curricular offerings were expanded to include two-year programs in business, home economics, and pre-nursing. In 1942, the institution was chartered as the Norfolk Polytechnic College and operated under its new name from 1942 to 1944, when an Act of the General Assembly of Virginia made it the Norfolk Division of Virginia State College.

As the Norfolk Division of Virginia State College, the institution increased its student enrollment and expanded its courses of study; adding, among others, an ROTC unit in 1948 and a vocational trade department in 1949. The City of Norfolk provided the College with 50 acres of land on the Memorial Park Golf Course as a permanent campus site. Instruction commenced on the new campus in 1955 with the completion of Tidewater Hall, renamed G.W.C. Brown Memorial Hall in 1975, which served as an administration and classroom building.

In 1956, the College became a four-year, degree granting institution, surpassing Virginia State College in student enrollment and faculty. In February 1969, the General Assembly of Virginia authorized separation of the institution from Virginia State College. Thus, the Norfolk Division of Virginia State College became Norfolk State College, an independent four-year institution with its own Board of Visitors and President.

As an independent institution, Norfolk State College experienced phenomenal growth in student enrollment, faculty and academic programs. The College received authority from the General Assembly of Virginia to award masters' degrees in 1972. In 1979, an Act of the General Assembly of Virginia changed the name of the college to Norfolk State University.

Norfolk State University is the newest of Virginia's five predominantly black colleges and universities. In less than 50 years, Norfolk State University has outgrown its sister institutions and is now the largest predominantly black university in the Commonwealth.

The University consists of five schools: Liberal Arts, Business and Entrepreneurship, Education, Science and Technology, and Social Work (which includes the M.S.W. and the D.S.W. programs.)

HISTORY OF DISABILITY SERVICES DEPARTMENT

In December 1997 the new administration under the leadership of Dr. Marie V. McDemmond, President, mandated that services for persons with disabilities be handled through the university's Counseling Center.

A meeting was called - Dr. Arthur Jackson, Vice-President Student Affairs, Mrs. Francine Johnson, Director of Affirmative Action/Acting Director of Institutional Research; Dr. Orren L. Rayford, Director University Counseling Center and Mrs. Beverly Harris, Counselor and newly appointed person to develop Disability Program, were in attendance. At the time 14 folders were turned over to Mrs. Harris.

In January 1998, letters were mailed to these 14 persons informing them of the changes and inviting them to come into Mrs. Harris' Counseling Center office and meet with her.

Supporting Students through Disability Services was developed through research and collaboration with other colleges and universities locally and across the state. In addition, organizations that service individuals with disabilities in the community, the state and across the United States assisted in the development of the program.

In fall 1999, SSDS hosted the Grand Opening of its Assistive Technology Laboratory (AT-Lab) that was funded by grants from the Department of Rehabilitative Services, Margaret Walsh, Manager and Title III, Katrina Bracey Miller, Coordinator. The opening of the AT-Lab sparked the efforts to strengthen academic excellence and retention for students with disabilities (SWD) and their success.

Membership was obtained in Association in Higher Education and Disability (AHEAD) both state and nationally; Tidewater Regional Higher Education Disabilities Network (TRHEDN) and affiliation with boards and other organizations including the Department of Rehabilitation Services (DRS).

Norfolk State University participated in the national DO-IT (Disabilities, Opportunities, Internetworking, and Technology) professional team at the University of Washington. DO-IT promotes the success of students with disabilities in postsecondary programs and careers. It sponsors projects that increase the use of assistive technology and promote the development of accessible facilities, computer labs, and electronic resources in libraries, web pages, educational multi-media and internet-based distance learning programs.

Norfolk State University was the only Historically Black College and University (HBCU) selected of more than 100 colleges and universities applying for 2000-2003 projects.

A team of professionals from such institutions as Northeastern, Illinois University, University Wisconsin-Madison, Drake University, Purdue University, Michigan State University, Arizona University, Humboldt State University, University of Rochester and Hawaii at Manoa just to name a few participated in the DO-IT project. Representatives of postsecondary institutions from twenty-three states in the United States met in two collaborative meetings and helped develop and test the professional development content and strategies included in the train-the-trainer materials and handbook titled “Building the Team: Faculty, Staff, and Students Working Together”. Our continuous involvement in this three-year project assured that project products have applicability nationwide.

In fall 2002, with the writing of another grant, Title III afforded Disability Services the opportunity to employ two full-time employees, a Coordinator for Supporting Disability Services (SSDS), Marian E. Shepherd, and a Coordinator for the Assistive Technology Laboratory (AT-Lab), Marvin C. Clemmons Sr. SSDS became independent of the Counseling Center with the employment of these two positions. At this time Disability Services prepared to service students, faculty, and staff and the community. Our program grew tremendously and we were able to extend our services to clients. We were also able to extend the AT_Lab hours. Workstations configured for individuals with disabilities were placed in various laboratories across campus. The Counselors-In-Residence Program continues to function in assisting SWD.

PHILOSOPHY AND MISSION OF NORFOLK STATE UNIVERSITY

An urban institution, Norfolk State University exists to provide opportunities for a quality education through the acquisition of knowledge, understanding, and skills. It is the philosophy of the University that all people, regardless of socio-economic status, race, sex, age, handicapping conditions or national origin, are entitled to profit from educational opportunities and advantages to the fullest extent of their capacities. Based on these tenants, the University accepts and adopts as its mission the following premises and the ethic implied therein:

-The University shall continue to define those areas in which it can make the most effective contribution to the total educational enterprise of the community, state, nation, and the world. Further, by means of its educational offerings, research, and service activities, the University shall promote and implement those programs, which it is uniquely equipped to administer.

-The University shall continue to maintain its identity as an urban institution recognizing its history of concern for and identification with the challenges presented by urban Environments. The University shall continue to utilize its assembled expertise to develop programs specifically related to urban needs.

-The University shall be organized and staffed in a manner which provides intellectual, professional, and social leadership as well as the experience required to enable its constituents to realize the fullest extent of their capacities.

-The University shall strive to foster a sense of social responsibility as well as personal and professional worth to the end that graduates will be capable of providing leadership in and beyond the area of their special competence.

-The University shall seek to make its students sensitive to those ethical and aesthetic values upon which our society rests.

EDUCATIONAL OUTCOME AND ASSUMPTIONS

The academic programs of the University are founded on the philosophy that the burgeoning knowledge in all fields; the increasing complexity of society and its problems of new technology, new areas of professional specialization, and the expanding scope and sophistication of studies in all disciplines require a substantive foundation in the traditional arts, sciences, and technical training in areas of professional careers. Such a foundation provides the basis for an educational process, which produces professionally competent individuals. Such persons are those who:

- Understand and appreciate human cultural heritages.
- Realize their responsibilities as human beings and citizens.
- Possess the requisite communication skills.
- Are well rounded in quantitative methodology and the processes of abstraction and problem solving.
- Originate fresh vision and ideas for their future work and participation in society.
- Appreciate and understand inter-relationships among the basic fields of knowledge.
- Possess in-depth competency and knowledge in a major area of study.
- Are highly trained in selected areas of professional specialization.

Such attributes are cultivated through instruction, study, and research relevant to the students' professional areas and have the effect of stimulating intellectual curiosity and a lifetime pursuit of learning.

Curricula are designed to contribute to the development of educated people and to emphasize the concepts and skills, which are universally relevant. They provide a meaningful distribution of study in the broad fields of human knowledge and offer flexibility in terms of student interest, ability, and career objectives.

As an urban institution Norfolk State University regards supervised instruction as an important vehicle in the educational process; committed to the teaching and the training of professionals. Classroom instruction is recognized as a blend of numerous components including lectures, discussions, and laboratory experiences. The use of audio and visual instructional aids and other related types of pedagogical experiences are part of the learning process. Learning experiences acquired outside the classroom include activities such as independent and directed study, internships, work experiences, and research in areas of specialization. All supervised instruction is regarded as valid in the collegiate curriculum according to individual student needs, desires, and abilities. Thus, the faculty has the responsibility of stimulating and encouraging activities, which contribute to the development of an educated and competent individual. As an institution of the Commonwealth of Virginia, the University recognizes the necessity for partnership and

cooperation with other urban organizations. Such a partnership requires close collaboration, understanding and respect for mutual objectives. Each phase of a student's formal education must be viewed as an integral component of this process. Curricula are planned with recognition of the need to achieve a continuum and are specifically tailored for urban high school graduates and the community college transfer student. The University will continue to make every effort to keep each section of its urban community informed of its programs and plans, and to seek the community's counsel in the development of programs.

Graduate program development also reflects the careful planning that goes into the undergraduate curricula. New graduate programs are developed in consonance with the demonstrated needs of the community, with due regard given to the physical and human resources of the University, and within its assigned role and scope. It is expected that the graduate school will continue to add professional disciplines to expand and/or sharpen the skills of the current and future employment pool.

All academic programs at the University are based on an assessment of local, state, and national needs. All programs require specifically stated objectives in order that they may be subject to continuing systematic review leading to improvement, realignment, and adjustment depending on changing circumstances.

The basic philosophy of the University is appropriate to its continuing research, education, and community service functions. Education is a lifelong process. The institution recognizes this and provides opportunities designed to encourage adults to expand their horizons and to increase professional competencies. The faculty, by lending expertise to the area served by the University, assists in solving basic resource, environmental, and social problems.

Norfolk State University is committed to serving all segments of the population within the Commonwealth of Virginia, its primary geographic area of responsibility, and the nation.

GUIDELINES FOR SSDS OFFICE

There is no cost* to university students, faculty, staff, and guests who utilize the services of the Disability Services office.

1. Requires and files documentation for disability students, faculty and staff that clearly identifies the disability and provides sufficient information regarding the manifestations of the disability.
2. As permitted or required by law, disability documentation is kept confidential and shared with University personnel on a need-to-know basis only, and external constituencies by informed consent of the individual with the disability only.
3. Determines and then subsequently provides, arranges or coordinates reasonable accommodations, academic adjustments, and/or auxiliary aids and services to students, faculty, staff and guests to campus with disabilities.
4. Assists University departments in providing access to people with disabilities in the most integrated and appropriate settings possible.
7. All documentation will be maintained in the Disability office for at least 6 years or until student graduates, or informs this office that they will not be returning.
8. The documentation will be filed under two headings:

ACTIVE: Incoming/current persons consistently being provided accommodations, use of Assistive Technology Lab and updating their file at the beginning of each semester.

IN-ACTIVE: The student have requested to be taken out of active files; or the students has not requested accommodations for four semesters (2 years); or there is a lapse of time when requesting service. *Students are required to update and renew all documentation.*

***SSDS does not have the capability to assess students for disabilities. If a student/faculty desires testing it must be done by an external agency and any testing done to identify disability will be at the cost of the individual (student, faculty, staff, and guests.)**

POLICY

POLICY AND PRACTICES

1. It is the policy and practice of Norfolk State University to comply with the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, and state and local requirements regarding students with disabilities. Under these laws, no qualified individual with a disability shall be denied access to or participation in services or programs at Norfolk State University.
2. In compliance with federal and state regulations, reasonable accommodations are provided to:
 - Qualified individuals who have a physical or mental impairment that substantially limits a major life activity, (including; walking, seeing, hearing, speaking, breathing, learning and working) or have a record of such impairment or are regarded as having such impairment.
 - Qualified individuals (with respect to post-secondary educational services) are people who meet the academic and technical standards requisite to admission or participation in the educational program or activity, with or without reasonable modifications to rules, policies or procedures (principals, practices), the removal of architectural, communication or transportation barriers; or the provision of auxiliary aids and services.
 - The essential requirements of an academic course or program should not be modified to accommodate an individual with a disability.
3. The University has designated the Disability Services Department as the office from which Supporting Students through Disability Services (SSDS) will be coordinated.
4. Final responsibility for selection of the most appropriate accommodation rest with the University and is determined on an individual case by case basis, based on the nature of the course or program and the nature of the students' disability.
5. Each student is encouraged to meet with the Coordinator of SSDS to develop a plan for academic accommodations at least 45 days prior to the beginning of classes each semester.
6. The University must ensure that individuals with disabilities are not excluded from services, programs and activities because buildings are inaccessible.
7. The University need not remove physical barriers, such as stairs, in all existing buildings, as long as programs are made accessible to individuals who are unable to use an inaccessible

existing facility. The University may be able to change location of class or activity if notified in timely fashion. **(See Policy 10)**

8. A request for accommodations at the University is deemed reasonable if it:
 - is based on documented individual need, in all cases of non-apparent disability
 - allows the most integrated experience possible
 - does not compromise essential requirements of a course or program
 - does not impose undue financial or administrative burden
 - is not of a personal nature (NSU does not provide personal care attendants, hearing aids, eyeglasses, etc.)

Student's Responsibility:

9. It is the student's responsibility in the accommodation process to:
 - follow Norfolk State University's accommodation procedure for students with disabilities
 - report your disability to the SSDS Office in a timely fashion
 - be an advocate on your behalf; do not rely on faculty and staff
 - remember, required documentation is needed to register (documentation is shared through informed consent)
 - provide at the student's expense, current appropriate documentation of disability and accommodation recommendation from a qualified medical or other licensed professional
 - request a specific accommodation or service
10. Please be advised, a timely fashion is at least forty-five (45) days before classes begin. Any request made after that time may warrant a delay in accommodations. *(Students may begin their accommodations procedure through their high school counselor, and/or during the senior year (once accepted to the University)).*

PROCEDURES

1. Students are asked to request all accommodations through the Coordinator of the SSDS Office.
2. Students are reminded or informed that providing accommodations involves each specific course, therefore, a “standing letter of accommodation” is not acceptable. A review of courses and accommodations are required each semester.
3. Students are to call to set an appointment and make arrangements with the Coordinator of the SSDS office. **(823-8173/823-2014)**
4. Students are to bring their class schedules and the names of the professors to the appointment.
5. Students should also provide at this appointment current, appropriate, documentation of disability and an accommodations need form from a qualified medical or other licensed professional evaluator if disability is not readily apparent, (mental disabilities, learning disabilities, attention deficit disorders, etc.).
6. Students that qualify for reasonable accommodations will receive letters of accommodation requesting the professors’ acknowledgment and consent. Each group of letters (letter for each professor) will be accompanied by a form on which the professor will sign his/her signature beside the course he/she is teaching. **This form is to be returned to the SSDS office (by the student) and placed in the file of the student. Until that is done, the procedure for registering in the SSDS office is invalid.**
5. Students will be asked to sign a release form for accommodation letters requested.
6. Students will not receive any letters of accommodations until the release is signed.
7. Unless otherwise arranged, letters of accommodation will be held in the SSDS office for the student to pick up and deliver to the professors. This allows the professor to meet the student, discuss any accommodation arrangements, and sign the form.
8. **The professor has final responsibility for an accommodation decision.** If the professor does not provide a formally requested accommodation from the SSDS office, then it is the students’ responsibility to bring this to the Coordinator’s attention for further advocacy.

NOTE: Students are strongly encouraged to register with the Department of Rehabilitative Services (DRS) or other facilities as it relates to their disability in their place of permanent residence. This may ensure the availability of assistive technology and other assistance for your educational experience which otherwise may not be required or provided by the University

ASSISTIVE TECHNOLOGY

Assistive technology is a process as much as a product. At Norfolk State University we are continuously researching and updating materials and collaborating with experts in various fields of technology to provide the best possible assistance to our students during their educational experience.

What is Assistive Technology?

Assistive Technology is any device or process that assists a person with a disability to do something that would otherwise be difficult or impossible.

What is an Assistive Technology Evaluation?

An assistive technology evaluation is the process of determining which device best matches the person's needs and preferences.

Who is designated to assist?

Disability Services Counselors who promote campus life and academic success for students with disabilities.

ASSISTIVE TECHNOLOGY CATEGORIES

While we are continuously working to improve our technology, we want the faculty, staff and students to know that their best interests are important to us.

Norfolk State University does not have nor is it required to furnish all of these categories of equipment, however, we may assist you through referral.

Adaptive Computer Applications

Input and output devices, (voice, braille), alternate access aids (headsticks, light pointers), large-print screens, modified or alternate keyboards, switches, special software that enable persons with physical, sensory, or cognitive disorders to use a computer.

Aids for Communication

Hearing aids, TTYs, and augmentative and alternative communication devices that provide a means for expressive and receptive communication for persons with sensory, communication, or cognitive disorders.

Aids for Daily Living

Self-Help aids for use in activities such as eating, bathing, cooking, dressing, toileting, and home maintenance for persons with physical, sensory, or cognitive disorders.

Environmental Control Systems

Primarily consist of electronic systems that enable persons with physical or sensory disorders to control various appliances, electronic aids, and security systems in their room, home or other surroundings.

Home/Work Site Modifications

Structural adaptations or fabrications in the home, worksite, or other areas (ramps, lifts, bathroom changes, visual alerting systems) that remove or reduce physical barriers for persons with physical, sensory, or cognitive disorders

Prosthetics and Orthotics

Replacement, substitution, or augmentation of missing or malfunctioning body parts with artificial limbs or other orthotic aids (splints, braces) for persons with physical disorders.

Seating and Positioning

Accommodations to a wheelchair or other seating system to provide greater body stability, trunk/head support and an upright posture and reduction of pressure on the skin surface (cushions, contour seats, lumbar) for persons with mobility impairments.

Wheelchairs/Mobility Aids

Manual and electric wheelchairs, mobile bases for custom chairs, walkers, three-wheel scooters, and other utility vehicles for increasing personal mobility

Vehicle Modifications

Adaptive driving aids, hand controls, wheelchair and other lifts, modified vans, or other motor vehicles used for personal transportation for persons with physical disorders.

ASSISTIVE TECHNOLOGY POLICY AND PROCEDURES

Only authorized individuals are permitted to use the AT-Lab (Students, faculty, staff, others by permission)

- Students with disabilities have priority in the AT-LAB. Otherwise the lab is open to all students, faculty and staff.
- Students must show a valid student ID card upon entering the labs.
- No food or drinks are allowed in the computer lab.
- All pagers and cell phones should be **TURNED OFF** before entering the computer lab.
- No loud talking, horse playing, or profanity permitted.
- Do NOT download illicit pictures from the Internet or e-mail.
- No loading of personal software on workstations.
- Do not save documents or files on workstations.
- Do not modify or repair or reconfigure any equipment.
- Do not disconnect any hardware, change settings on workstations or alter software applications.
- Report viruses and any workstation problems to the lab manager or student assistants.
- **Printing of flyers or any other material is prohibited.**
- Work area should be cleaned of all materials and chairs pushed under the table before leaving the lab.
- **Playing games is prohibited at all workstations.**
- Use print pre-view to determine errors in your paper before printing hard copies. This will greatly help to save paper.
- Printing of personal e-mail messages is prohibited. **No multiple copying.**
- *Any violation may lead to loss of computer lab privileges, probation, suspension, or expulsion.*
- **Do not give out your password. Be sure to completely log out of your account.**

Hours of Operation

Assistive Technology - Room 240 Brooks Library

Monday – Thursday-----8:00 am to 8:00 pm

Friday -----8:00 am to 5:00 pm

Saturday-----11:00 am to 5:00 pm

Other wise as posted

**RIGHTS AND RESPONSIBILITIES
OF
PEOPLE WITH DISABILITIES**
(AS THEY RELATE TO ACCESS AT NORFOLK STATE UNIVERSITY)

RIGHTS:

1. To an equal opportunity to participate in and benefit from employment, courses, programs, services and activities offered through the University
2. To an equal opportunity to work, to learn and to receive reasonable accommodations, academic adjustments, and/or auxiliary aids and services
3. To appropriate confidentiality of all information regarding disability and to choose to whom, outside the University, information about disability will be disclosed, except as disclosures are required/permitted by law
4. To information, reasonably available in accessible formats

Responsibilities:

1. To meet qualifications and maintain essential institutional standards for employment, courses, services, and activities
2. To self-identify as an individual with a disability in the SSDS office and to seek information, counsel, and assistance as needed
3. To demonstrate and/or document (from an appropriate professional) how the disability limits participation in employment, courses, programs, services or activities
4. To follow published procedures for obtaining information, services, and reasonable accommodations

**RIGHTS AND RESPONSIBILITIES
OF
NORFOLK STATE UNIVERSITY**
(AS IT RELATES TO DISABILITY ACCESS)

RIGHTS:

1. To identify and establish essential functions, abilities, skills and knowledge for employment, courses, programs, services and activities; and to evaluate faculty, staff and students on this basis
2. To request and receive, through the SSDS Office, current documentation that supports request for reasonable accommodations, academic adjustment, and/or auxiliary services
3. To deny a request for reasonable accommodations, academic adjustments, and/or auxiliary services if the documentation demonstrates that they are not warranted, or if the individual fails to provide appropriate documentation
4. To select among equally effective reasonable accommodations, adjustments, and/or auxiliary services
5. To refuse an unreasonable accommodation, adjustment, and/or auxiliary service or one that imposes an undue hardship or fundamental alteration on a program or activity of the University

Responsibilities:

1. To provide information to faculty, staff, students and guests with disabilities in accessible formats upon request.
2. To ensure that employment, courses, programs, services, and activities, when viewed in their entirety, are available and useable in the most integrated appropriate settings
3. To evaluate faculty, staff, students and applicants on their abilities and not on disabilities
4. To provide or arrange reasonable accommodations, academic adjustments and/or auxiliary services for faculty, staff, students, and guests with disabilities in employment, courses, programs, services, facilities and activities
5. To maintain appropriate confidentiality of records and communication, except where permitted/required by law

NEW CONSTRUCTION AND RENOVATION

Title II of the ADA does not require retrofitting to existing buildings to eliminate barriers but does establish a high standard of accessibility for new buildings.

Public entities must ensure that newly constructed buildings and facilities are free of architectural and communications barriers that restrict access or use by individuals with disabilities.

When a public entity undertakes renovations to an existing building, it must ensure that the altered portions are accessible.

Public entities may choose between two technical standards for accessible design: the Uniform Accessible Standards (UFAS) [Appendix A to 41 CFR Part 101-19.6], established under the Architectural Barriers Act or the Americans with Disabilities Act Accessibility Guidelines (ADAAG) [36 CFR Part 1191], adopted by the Department of Justice for Public Entities covered by Title II of the ADA.

Renovations to historic properties must comply with these standards to the maximum extent feasible.

Enforcement:

Private parties may bring lawsuits to enforce their rights under Title II of the ADA. The remedies available are the same as those provided under Section 504 of the Rehabilitation Act of 1973. A reasonable attorney's fee may be provided to the prevailing party.

Complaints must be filed within 180 days of alleged discrimination with any Federal agency that provides financial assistance to the program in question or with the Department of Justice (DOJ), which will refer the complaint to the appropriate agency. Any complaints with DOJ should be sent to:

**U.S. Department of Justice
Coordination and Review Section
Civil Rights Division
P.O. Box 66118
Washington, D.C. 20035-6118**

LISTING OF DISABILITIES

Blindness/Visual Impairments (B/VI)
Deafness/Hearing Impairments (D/HI)
Learning Disabilities/Attention-Deficit Disorder (LD/ADD)
Attention-Deficit Hyperactive Disorder (ADHD)
Orthopedic/Mobility Impairment (O/MI)
Speech and Language Disorders (S & I)

OTHER DISABILITIES

Many students have disabilities that do not necessarily fall into the major categories listed in this handbook. The degrees to which these disabilities affect individuals in the academic or employment setting vary widely. At times it is not the condition itself but the medication that is required to control symptoms that impairs academic or work performance. Common side effects of medications include fatigue, memory loss, shortened attention span, loss of concentration, and drowsiness. In some cases the degree of impairment may vary from time to time because of the nature of the disability or the medication. Some conditions are progressive; others may be stable. Many are invisible. A partial list of other disabilities includes: AIDS, arthritis, asthma, burns, cancer, cardiovascular disorders, diabetes mellitus, epilepsy, psychological disorders, and chronic pain.

TYPES OF DISABILITIES

I. MOBILITY IMPAIRMENTS

Mobility impairments are generally defined as any disability, which restricts a person's gross motor functioning and which may require the use of specially designed equipment for access.

The numbers of mobility impaired students attending colleges and universities have always been high. This does not, however, mean that their disabilities are similar. Mobility impairments range from musculoskeletal disabilities to respiratory and cardiac diseases, which are debilitating, and may consequently affect mobility. Some of these conditions may also impair strength, coordination, and endurance or dexterity that are necessary for proper hand function.

While the degree of disability varies, students may have difficulty getting to or from class, performing in class, and managing out-of-class assignments and tests:

The disabilities which can, and generally do, restrict mobility and motor functioning are:

1. ***Cerebral Palsy***

Cerebral Palsy is a group of disabling conditions that result from damage to the central nervous system. The effects can be severing; causing an inability to control bodily movement, or the effects can be mild, perhaps only slightly affecting speech or hearing. Persons with cerebral palsy who have gross motor dysfunction may walk with crutches or use a wheelchair. Their access to the environment may be restricted due to architecture that impedes travel, such as entrances, which do not accommodate their mobility aids.

2. ***Arthritis***

Arthritis is a progressively degenerative disease, which creates an inflammation of the joints. Many people with arthritis encounter mobility problems due to knee and ankle joint involvement. Additionally, fine motor control is often impaired, making writing difficult and/or painful.

3. ***Congenital defects***

Congenital defects are impairments existing from birth, which may include the total or partial loss of limbs or require the use of prostheses. Personal mobility may require the use of a wheelchair. The impairment of individual body functions may also exist.

4. ***Degenerative disease- Progressive Diseases***

Multiple sclerosis and muscular dystrophy are two examples of degenerative disease. These disabilities are degenerative and often call for eventual use of a wheelchair. Again, not only are gross motor functions impaired, but the deterioration of fine motor activity often develops.

5. ***Spinal cord Injury***

Spinal cord injuries involve damage to the spinal cord causing it to be either severely scarred or partially severed. Information on spinal cord injury is detailed and lengthy. For the purpose of this document, only highlights of descriptive information will be provided.

A. Quadriplegia

A spastic or flaccid paralysis of the upper and lower extremities. Arm and hand impairments are dependent upon the location of the fractured vertebra. Most individuals require the use of a wheelchair.

B. Paraplegia

A spastic paralysis of the lower extremities. In this case, arm and hand function are intact but ambulation is possible only in exceptional cases. Use of a wheelchair is nearly always necessary.

C. Hemiplegia

Incomplete paralysis involving one side. May result from either spinal cord injury or stroke. Ambulation is sometimes possible with the use of aids.

Support services and equipment at Norfolk State University include:

- advice about course load
- note-taker assistance
- examination accommodations
- access to computers
- accessible lavatories
- ramps and curb cuts

Information for Faculty

- Integrate seating arrangements in the regular classroom as much as possible.
- Students may need to use note-takers or tape recorders
- Written assignments are best completed outside of class
- Off-campus assignments need to be in accessible locations
- Occasionally classes are relocated to accessible classrooms
- Examinations may be proctored through Disability Services to utilize accommodations such as scribing or word processing

II. DEAF AND HARD OF HEARING

Hearing impairments represent the greatest chronic physical disability in the United States. Hearing loss ranges from a slight deficit affecting approximately 19 million Americans, to total deafness, affecting two million.

The age of onset generally determines the profundity of the disability. Those who are born deaf or suffer a hearing loss at an early age, especially in the pre-lingual stage, bear the most severe disabilities. Because they do not hear language, their impairments generally extend beyond hearing to speaking and reading.

For the deaf who can speak, vocal control is often marred, distorting their tone, volume and/or articulation. For the many who use sign language, English is a "second" language and may, therefore, be faulty in most aspects of communications. These secondary effects of hearing impairment need to be understood as physical disabilities rather than intellectual weakness.

People who are deaf or hard of hearing use a variety of devices to help them improve their aural capacity or substitute for it. Many use lip reading but, by itself, comprehension is only 30 to 40 percent of spoken English. Those with a sufficient degree of residual hearing are helped by the amplification provided by hearing aids, which include public address systems or transmitter-receiver systems with a clip-on microphone for the speaker.

The main form of communication for the profoundly deaf is sign language. Students who must rely on sign language need an interpreter, who either "mouths" what is being said, translates it into sign language, or both.

Information for Faculty

- **Auditory Lecture Intake**
Instructors should face the class as much as possible while lecturing in order to allow the student to lip read and get visual cues from the face to enhance comprehension. Instructors should be careful that light sources do not interfere with seeing their face. They should speak clearly and audibly. Placing key phrases on the board and repeating questions asked by other students is also helpful.
- **Attention**
At the beginning of a classroom presentation and following breaks, draw the student's attention before speaking.
- **Seating Location**
Student will need to sit close to the speaker for maximum intake of visual cues.
- **Audiovisual Materials**
Instructors should use at least a minimum amount of lighting when presenting audiovisual information so their face or the interpreter's face can be seen at all times. They should allow time for the student's gaze to shift from the visual materials to the instructor or interpreter for verbal explanation. An alternative is to write captions to visual aids. Supplying the student in advance with a written explanation of a demonstration or facilitating independent viewing time for audio-visual materials is another helpful option.
- **Assignments**
Students with hearing impairments need to receive assignments in written form in order to insure proper understanding of the requirements. A detailed syllabus and lecture outline will be extremely beneficial. If the hearing impairment involves language difficulties, allow extended time for reading assignments and examinations.
- **Acoustics**
Students using a hearing aid may find the instructor's voice masked by excessive noise. If problems continue, room changes, or use of an interpreter (who repeats a lecture at close visual range,) or auditory training equipment (to bring the lecturer's voice directly into the hearing aid) may be utilized.
- **Exams**
Avoid orally administered exams requiring written answers.
- **Technical Words**
Providing the interpreter and student with a list of technical words at the beginning of the semester will allow them time to develop or learn signs for those words.

- Interpreters
The student and faculty members should meet with the interpreter at the beginning of the semester to discuss potential problem areas. At this time the interpreter can better explain the process of interpreting and answer any questions the instructor might have. The instructor should speak directly to the student even when an interpreter mediates their conversation. Faculty should monitor a severely hearing impaired student's progress during the first few weeks to insure that newly learned concepts are clear. Tutors may be available through Student Support Services if difficulty is perceived.

III. VISUAL IMPAIRMENTS

Visual impairments vary from partial loss to total blindness. Persons are considered legally blind when visual acuity is 20/200 or less in the better eye with use of corrective lenses. Most legally blind persons have some vision. Others who are partially sighted may rely on residual vision with the use of adaptive equipment. A totally blind person may have visual memory. Its strength depends on the age when vision was lost, the extent of that visual impairment and the support required. Students may be virtually independent with the use of magnifying eyeglasses, or they may utilize a cane or guide dog and require readers, tape recorders, and taped textbooks.

Whatever the degree of impairment, visually impaired students should be expected to participate fully in classroom activities such as discussions and group work. To record notes, some use devices such as portable or computerized brailers. They may confront limitations in laboratory classes, field trips and internships, but with planning and adaptive equipment their difficulties can be minimized.

Information for Faculty

- Hold all conferences with visually impaired students in easy-to-locate places and notify the student of any schedule changes.
- Guide dogs are a well-trained working tool for students who use them. They will not be disruptive in class and people should be informed that the dog should not be petted or played with while in harness.
- Provide reading lists or syllabi in advance to allow time for such arrangements to be made as the taping or brailing of texts.
- Disability Services may request your assistance in finding readers, note-takers or tutors.
- Reserve front seat for low-vision students. If a guide dog is used it will be highly disciplined and require little space.
- Face the class when speaking.

- Convey in spoken words whatever you put on the chalkboard and whatever other visual cues or graphics materials you may use.
- Permit lectures to be taped and/or provide copies of lecture notes, where appropriate.
- Duplicate materials distributed to the class on a large-print copier.
- Be flexible with assignment deadlines.
- Plan field trips and special projects well in advance and alert field supervisors to whatever accommodations may be needed.
- If a specific task is impossible for the student to carry out, consider an alternative assignment.
- Students should not be exempt from examinations or be expected to master less content or a lower level of scholastic skills because of a visual impairment. However, alternative means of assessing their course achievements may be necessary. The students themselves because of their experience in previous learning situations and the college Coordinator of Disability services may offer suggestions on testing and evaluation strategies. The most expedient devices are alternative examinations are oral, large-print, braille, or taped. The extension of time for exams, and the use of such aids as print enlargers, specialized computer programs or tape recorders are also helpful. Other adaptations suited to specific instructional situations, such as tactile materials in presenting diagrams or illustrations in certain subjects, may be helpful.

ACCOMMODATIONS

Note-taking

Students often tape record lectures. For this reason a student may need to sit close to the speaker to insure clear tapes (and to maximize any visual and auditory cues). Students who braille may also use a slate and stylus or portable braille for note taking. It will be helpful to the student if the instructor spells technical words when presented for the first time in lecture.

Visual Lecture Intake

Visually impaired students may miss all nonverbal cues unless instructors explain them. Intensive visual concentration can be fatiguing for visually impaired students.

Audiovisual Material (blackboard, projector) and Handouts

These require oral explanation. Instructors should be conscious of their use of descriptive terms. Copies of overhead materials should be provided so that they can later be reviewed with a reader.

Classroom changes

When classroom location is changed, another student should wait for the blind student and direct him/her to class. The student should be informed of any changes in arrangement of furniture or equipment.

Text

When possible, materials are obtained in braille or on tape from national lending libraries. Often texts must be ordered well in advance to allow preparation time.

Reading

Paid and volunteer readers are provided by Disability Services to assist blind students with materials that are not on tape or in braille. Often it is preferable to have a reader from the same class who is familiar with the materials.

Time Involvement

Because of the time necessary to have books read aloud or to review tapes, students often require extra time to complete required assignments, especially when library research is involved.

Research Papers

Students and faculty may want to consider the texts already on tape when deciding on topics for a research paper. Catalogs listing taped and brailled text are available through Recordings for the Blind, the Library of Congress and Disability Services.

Last Minute Assignments

Instructors should keep in mind that this can present a problem because reader scheduling and special preparation of material requires adequate advance notice.

Field Trips, Internship

Preplanning will be needed in order to consider adaptations that may be necessary.

Exams

Testing needs will vary with the degree of visual impairment. Enlarged print tests or answer sheets may be helpful. With advance notice, Disability Services will provide a reader, scribe and access to a word processor for assistance with in-class exams. Other alternatives are to tape record the test questions and request typewritten or taped answers. Testing the student's competency orally is also an alternative. Matching, multiple choice, or questions involving diagrams can become problematic and often place visually impaired students at a disadvantage because of the visual cues used in doing these types of questions. Extra time may be necessary due to the alternate methods involved.

IV. SPECIFIC LEARNING DISABILITY

In the 1980's, awareness about learning disabilities, their possible causes and manifestations became widely known. As a result, there was an increase in the number of young adults with learning disabilities choosing to attend post-secondary educational institutions. In addition, those students who would not have been considered as having a disability are now identified as having

a learning disability. A 1982 study by White, Alley, Deshler, et. al. revealed that 67% of young adults diagnosed with learning disabilities planned to attend post-secondary educational institutions after high school.

Definition of a Learning Disability

Learning Disability (LD) is a generic term for a group of disorders, which affect the manner in which individuals with average or above average intelligence acquire, store, retrieve, and express information. Encoding or decoding information may occasionally become inadvertently distorted as it travels between the senses and the brain. This distortion is presumed to result from sporadic dysfunction of the central nervous system, as in the case of a facial tic. Processing problems may occur periodically in one or more of the following areas: oral expression, mathematical calculation, listening, comprehension, or problem solving. Individuals with learning disabilities may also have difficulties with sustained attention, time management, or social skills--just like any other student.

A Learning Disability Is.....

- permanent. Although it may prove more acute at some times, and be more apparent in computation than literacy skills or vice-versa
- often inconsistent. A person may have problems on Monday, but not on Tuesday. It may cause problems in grade school, seem to disappear during high school, and resurface in college. It may manifest itself in only one specific area, such as math or foreign language.
- frustrating. Persons with learning disabilities often have to deal not only with functional limitations, but also with the frustration of having to "prove" that their invisible disability is as handicapping as any other.

A Learning Disability Is Not.....

- a form of mental retardation or an emotional disorder.
- a learning difficulty which results primarily from visual, hearing, or motor dysfunction.
- a learning problem resulting from environmental, cultural, or economic disadvantage.

Characteristics of College Students with Learning Disabilities

College students with learning disabilities are as intelligent, talented, and capable, as any other group of students. Typically, they have developed a variety of strategies for compensating for their learning disability. The degree of severity of the disability varies from individual to individual. People with learning disabilities exhibit some of the characteristics outlined below. Note: (Individuals who have come from divergent cultural and language backgrounds may exhibit many of the oral and written language behaviors cited below, but do not necessarily have a learning disability by definition.)

Reading Skills

- Slow reading rate and/or difficulty moderating reading rate in accordance with material's level of difficulty
- Confusion of similar words, difficulty integrating new vocabulary, and incomplete mastery of basic phonetic skills
- Skipping words or lines of printed material
- Difficulty reading for long periods of time

Writing Skills

- Frequent spelling errors (e.g., omissions, substitutions, transpositions), especially in specialized and foreign vocabulary
- Difficulty effectively proofreading writing and making revisions.
- Poor penmanship (e.g., poorly-formed letters, incorrect usage of capitalization, trouble with spacing, overly-large writing)
- Inability to correctly copy from a book or blackboard

Oral Language Skills

- Difficulty in translating into oral expression concepts that are understood
- Difficulty following oral or written directions
- Difficulty conversing or following a conversation about an unfamiliar idea
- Inability to concentrate on and to comprehend spoken language when presented rapidly
- Difficulty speaking grammatically correct English

Organizational and Study Skills

- Easily distracted by outside stimuli
- Hyperactivity and excessive movements may accompany the inability to focus attention

Mathematical Skills

- Difficulty reading and copying numbers and/or symbols correctly
- Transpositions of numbers in sequences
- Difficulty with memory of formula
- Difficulty distinguishing between visual symbols (e.g., x and +)
- Difficulty understanding oral directions

Secondary Characteristics

The above primary problems for student with learning disabilities impede their performance in the following secondary areas, which are often difficult for students without disabilities.

- Uneven comprehension and retention of material read
- Difficulty-identifying important points and themes
- Difficulty planning a topic and organizing thoughts on paper
- Difficulty with sentence structure (e.g., sentence fragments, run-ons, poor grammar usage, missing inflectional endings)
- Compositions often limited in length
- Slow production of written work
- Time management difficulties
- Slow to start and complete tasks
- Repeated inability, on a day-to-day basis, to recall what has been taught
- Class notes taken lack overall organization
- Trouble focusing and sustaining attention on academic tasks
- Inconsistent attention span during lectures
- Difficulty handling multiple tasks demands
- Quickly becomes overloaded
- Difficulty solving problems
- Slow visual processing speed
- Difficulty comprehending word problems
- Difficulty understanding a new application of a previously learned formula to a new problem.
- Difficulty recalling previously learned concepts
- Difficulty storing and retrieving information over a long period of time

Information for faculty

- Provide students with a detailed course syllabus. Make it available before the start of classes.
- Clearly spell out expectations at the beginning of the course (e.g., grading, material to be covered, due dates).
- Start each lecture with an outline of material to be covered that period. Briefly summarize key points at the conclusion of the class.

- Speak directly to students, and use gestures and natural expressions to convey further meaning.
- Present new or technical vocabulary on the blackboard or use a student handout. Terms used in context will give them greater meaning.
- Give assignments orally as well as in written form. This will eliminate confusion regarding due dates and content.
- Announce reading assignments well in advance. This will be of great help to students with LD who use taped text materials. It takes an average of six weeks to get a book tape recorded.
- Facilitate use of taped recorders for note taking by allowing students to tape lectures. Provide study questions for exams that demonstrate the format, as well as the content, of tests. Explain what constitutes a good answer and why.
- Permit use of simple calculators, scratch paper, and electronic or conventional spellers' dictionaries during class sessions and testing.
- Provide adequate opportunities for questions and answers, including review sessions.
- If possible, select a textbook with an accompanying study guide for optional student use. Periodically review previously learned mathematical concepts and skills.
- Allow students to utilize formula cards during testing.

V. PSYCHOLOGICAL IMPAIRMENTS

Students with psychological disabilities present some of the most difficult challenges to college professors. Like those with other disabilities, their impairments may be hidden and, in fact, latent, with little or no effect on their learning. Unlike others, however, their emotional disturbances may manifest themselves in negative behavior ranging from indifference and recalcitrance to disruptive behavior. Such conduct makes it hard to remember that they have as little control over their disabilities as do the student with physical disabilities.

The most common psychological impairment among students is depression. The condition may be temporary, in response to inordinate pressures at school, on the job, at home or in one's social life; or it may be a pathological sense of hopelessness or helplessness, which may provoke, in its extreme, threats or attempts at suicide. It may appear as apathy, disinterest, inattention, impaired concentration, irritability, fatigue or other physical symptoms resulting from changes in eating, sleeping, or other living patterns.

Anxiety is also prevalent among students and may also be the transient reaction to stress. Mild anxiety, in fact, may promote learning and improve the student's functioning. Severe anxiety may manifest itself as withdrawal, constant talking, complaining, joking, crying, fantasizing, or extreme fear, sometimes to the point of panic. Bodily symptoms might include episodes of light-headedness or hyperventilation.

Students are susceptible to the myriad psychological disorders that others are, some of which express themselves in inappropriate classroom behavior or inadequate performance of assignments. Some troubled students who are undergoing treatment take prescription medication

to help control disturbing feelings, ideas and behaviors. These medications might cause undesirable side effects such as drowsiness and disorientation.

Information for Faculty

- Discuss inappropriate classroom behavior with the student privately, directly, and forthrightly, delineating if necessary the limits of acceptable conduct.
- In your discussion with the student, do not attempt to diagnose or treat the psychological disorder. Focus, on the student's behavior in the course. If you sense that discussion would not be effective, or if the student approaches you for therapeutic help, refer the student to Disability Services; to the campus counseling staff or to the appropriate community mental health agency, whichever is most acceptable to the student.
- Promptly refer to the college's proper disciplinary or security channels any behavior by the student that may be abusive or threatening to self or others. Offices and telephone numbers are:

Campus Police 823-8102
Disability Services 823-2014

VI. ALCOHOL AND SUBSTANCE ABUSE

Substance abuse is a condition of psychological and/or physiological dependence on a chemical substance such as alcohol, illegal drugs or prescription drugs. Individuals who are recovering from drug and alcohol abuse or who are in treatment programs to assist them in recovery are protected by federal legislation as are individuals with other types of disabilities.

These students may experience psychological problems such as depression, anxiety or very low self-esteem. They may exhibit poor behavioral control and, if they are using medication as part of their treatment, they may experience undesirable side effects.

Support services include:

- personal and academic counseling
- referrals to community support agencies
- assistance with registration
- general support services

Information for Faculty

Students showing symptoms of substance abuse should be referred to the appropriate college facility: **University Counseling Center**

Inappropriate classroom behavior should be discussed with the student in a private setting. Appropriate campus disciplinary channels should be used when necessary. Counseling center staff will refer students who are concerned about their own or someone else's drinking or drug'

use to community and private practitioners for therapy or intervention. The staff serves as counselors and liaisons between the university and various treatment programs in the community, referring students in need of treatment as well as supporting those already involved in a treatment program.

VII. SPEECH IMPAIRMENT

Speech impairments range from problems with articulation to voice strength to complete voicelessness. These include difficulties in projection, as in chronic hoarseness and esophageal speech; fluency problems as in stuttering and stammering; and the nominal aphasia that alters the articulation of particular words or terms.

Some of these impediments can be managed by such mechanical devices as electronic "speaking" machines or computerized voice synthesizers. Others may be treated through speech therapy. All of them can be aggravated by the anxiety inherent in oral communication in a group. Patience is, therefore, the most effective strategy in dealing with speech impaired students.

Support services and accommodations include:

- assistance in communication with faculty and staff
- academic and personal counseling
- general support services
- extended time for testing

Information for faculty

- Give the students the opportunity to speak, but do not compel them to speak in class.
- Permit them the time they require to express themselves without unsolicited aid in filling gaps in their speech. Don't be reluctant to ask the student to repeat a statement.
- Address them naturally. Don't assume the "spread phenomenon"—thus speaking to them as though they cannot hear or comprehend.
- Consider course modifications, such as one-to-one presentations and the use of a computer with a voice synthesizer.

Students with speech impairments may be hesitant about speaking in class and/or may require more time to be understood. After some practice listening to the student, it will become easier to understand him/her. The instructor should not hesitate to ask for repetition of words or phrases. Disability Services staff persons, a friend, or family member can attend an initial planning conference to facilitate communication. Alternatives for classroom participation might be considered if the student finds speaking in class too difficult. If possible, oral exams should be avoided.

VIII. OTHER DISABILITIES

There are many other conditions that may interfere with a student's academic functions. Some of their symptoms, like limited mobility or impaired vision, and the types of intervention required may resemble those covered elsewhere in this manual.

Below are brief descriptions of some of the more prevalent disabilities among students.

Acquired Immune Deficiency Syndrome (AIDS)

Acquired Immune Deficiency Syndrome (AIDS) is caused by a virus that destroys the body's immune system. This condition leaves the person vulnerable to infections and cancers that can be avoided when the immune system is working normally. The virus is transmitted primarily through sexual contact or needle sharing with intravenous drug users. It is not transmitted through casual contact.

Manifestations of AIDS are varied, depending on the particular infections or disease the individual develops. Extreme fatigue is a common symptom. Classroom adaptations will likewise vary.

Students with AIDS may be afraid to reveal their condition because of the social stigma, fear and/or misunderstanding surrounding this illness. It is, therefore, especially important that the strictest of confidentiality be observed. In addition, if the issue should arise in class, it is important for faculty to deal openly and non-judgmental with it and to foster an atmosphere of understanding.

Asthma

A disorder of the respiratory system; asthma can cause severe respiratory distress. Often accompanied by severe allergic conditions, the asthmatic condition impairs the person's ability to breathe, and often causes dizziness. In its most severe form, asthma can lead to respiratory distress resulting in hospitalization.

The asthmatic student must attempt to control his/her environment to eliminate the allergic triggers to an attack. Some control can be gained by simply avoiding objects or substances, which bring on an allergic reaction. Often prescribed medications are necessary. Environmental adjustments may also be required to reduce the impact of perfumes or smoke.

Asthma can lead to class absence. Such absences should be few but may last for one or two days.

Attention Deficit Hyperactivity Disorder

The student with Attention Deficit Hyperactivity Disorder has difficulty in the area of attention, impulsiveness and hyperactivity due to a disorder of the central nervous system. The condition may exist without the most obvious characteristics of hyperactivity. The effects of this disorder impact the student's concentration, memory, distractibility, ability to control fidgeting, activity levels, organizational focus, and decision making.

While medication is often prescribed for students with this condition, additional accommodations may also be needed. Testing in a distraction-free environment is the most frequently utilized accommodation.

Cancer

Because cancer can occur in almost any organ system of the body, the symptoms and particular disabling effects will vary greatly from one person to another. Some people experience visual problems, lack of balance and coordination, joint pains, backaches, headaches, abdominal pains, drowsiness, lethargy, difficulty in breathing and swallowing, weakness, bleeding or anemia.

The primary treatments for cancer, radiation therapy, chemotherapy and surgery may engender additional effects. Therapy can cause violent nausea, drowsiness and/or fatigue affecting academic functioning or causing absences. Surgery can result in amputation, paralysis, sensory deficits and language and memory problems.

Cerebral Palsy

Cerebral palsy is caused by injury to the motor center of the brain, which may have occurred before, during or shortly after birth. Manifestation may include involuntary muscle contractions, rigidity, spasms, poor coordination, poor balance or poor spatial relations. Visual, auditory, speech, hand function, and mobility problems might occur.

Diabetes

This metabolic disorder is characterized by insulin deficiency and excess blood sugar. Diabetes can be controlled by insulin injections and by strict diet.

The strictness of diet forces the individual to eat at regular intervals. Therefore it is possible that a student may need to eat during class if the class is scheduled during mealtime.

The insulin dependent diabetic or a person who has had diabetes for years often has concurrent visual deficits and may have impaired tactile sensation. These may be necessary factors to consider when preparing a classroom experience for the student.

Hypoglycemia

This metabolic disorder causes unusually low blood sugar levels. The student with hypoglycemia must follow a regular dietary schedule, usually eating several small meals during the day. The student may have to eat a small snack during class.

Multiple Sclerosis

Multiple sclerosis is a progressive disease of the central nervous system, characterized by a decline of muscle control. Symptoms may include disturbances ranging from mild to severe

blurred vision, legal blindness, tremors, weakness or numbness in limbs, unsteady gait, paralysis slurred speech, mood swings or attention deficits. Because the onset of the disease usually occurs between the ages of 20 and 40 students are likely to have difficulty adjusting to their condition. The course of multiple sclerosis is highly unpredictable. Periodic remissions are common and may last from a few days to several months before the disease symptoms return. As a result mood swings may vary from euphoria to depression. It is not unusual to have striking inconsistencies in performance.

Muscular Dystrophy

Muscular dystrophy refers to a group of hereditary progressive disorders that most often strike the young producing degeneration of voluntary muscles of the trunk and lower extremities. The atrophy of the muscles results in chronic weakness and fatigue and may cause respiratory or cardiac problems. Walking if possible is slow and appears uncoordinated. Manipulation of materials in class may be difficult.

Seizure Disorders

Students with epilepsy and other seizure disorders are extremely reluctant to divulge their condition because of the fear of being misunderstood or stigmatized. Misconceptions about these disorders—that they are forms of mental illness, contagious and untreatable, for example—have arisen because their ultimate causes remain uncertain. There is evidence that hereditary factors may be involved and that brain injuries and tumors occurring at any age may give rise to seizures.

There are three distinct types of seizures:

1. Petit mal means "Little" seizure and is characterized by eye blinking or staring. It begins abruptly with a sudden dimming of consciousness and may last only a few seconds. Whatever the person is doing is suspended for a moment but resumed again as soon as the seizure is over. Often because of its briefness, the seizure may go unnoticed by the individual as well as by others.
2. Psychomotor seizures range from mild to severe and may include staring, mental confusion, uncoordinated and random movement, incoherent speech and behavior outbursts, followed by immediate recovery. They may last from two minutes to a half hour. The person may have no recollection of what happened, but may experience fatigue.
3. Grand mal seizures may be moderate to severe and may be characterized by generalized contractions of muscles, twitching and limb jerking. A few minutes of such movements may be followed by unconsciousness, sleep, or extreme fatigue.

Students with seizure disorders are often using preventive medication, which may cause drowsiness and temporary memory problems. Such medication makes it unlikely that a seizure will occur in class.

In the event of a grand mal seizure, follow this procedure:

- a. Keep calm. Although its manifestation may be intense, it is generally not painful to the individual.
- b. Remove nearby objects that may injure the student during the seizure.
- c. Help lower the person to the floor and place cushioning under his/her head.
- d. Turn the head to the side so that breathing is not obstructed.
- e. Loosen tight clothing.
- f. Do not force anything between the teeth.
- g. Do not try to restrain bodily movement.
- h. Call the Campus Police or other appropriate authority or ask someone else to do so.
- i. After a seizure, faculty should deal forthrightly with the concerns of the class in an effort to prevent negative attitudes may develop toward the student.

Sickle Cell Anemia

Sickle cell anemia is a hereditary disease primarily affecting African-Americans. It reduces the blood supply to vital organs and the oxygen supply to the blood cells, making adequate classroom ventilation an important concern.

Because many vital organs are affected, the student may also suffer from eye disease, a heart condition, lung problems, and acute abdominal pain. At times limbs or joints may be affected. The disease is characterized by severe crisis periods, with extreme pain, which may necessitate hospitalization and/or absence from class. Completing academic assignments during these periods may be an impossible for the semester.

Traumatic Brain Injury

The student with a head injury may be recovering from some traumatic impact to the brain or may be rehabilitating from a stroke or similar cerebral disorder.

Head injury can be responsible for a number of significant changes in the student. Brain damage, depending upon the location and intensity of the injury, may affect motor coordination, sensation, perception, speech and language processing, and/or intelligence and memory.

The student with a head injury who has not attended college in the past may be very unsure as to whether he/she can perform on the college level. The student who is returning to the classroom after traumatic injury may encounter great frustration when finding that course work is not as successfully dealt with as it had been previously.

The student is generally enrolled for less than full-time study and must spend a great deal of time with tutors and learning assistants. Students with head injuries benefit from adaptations to academic testing. Extended time to complete exams outside of class is frequently necessary. Also, avoiding in-class questioning of the student is advisable unless the student volunteers. Immediate recall of facts is often very difficult. The pressure of in-class performance creates anxiety, which further blocks recall.

Support services include:

- personal and academic counseling
- test/examination accommodations
- general accommodations