Disabled Students Programs and Services (DSPS) for Students with Mental Health Disabilities

Introduction: Gaps and Bridges in Meeting the Needs of Students with Disabilities

The California Community Colleges (CCCs) are committed to making college accessible for the full spectrum of California’s diverse population and have a long history of serving students from historically disadvantaged and underserved communities. Providing equitable access and opportunities to students with disabilities is an important aspect of this commitment. For the CCCs, ensuring that students with disabilities can participate fully and benefit equitably from college is both an ethical imperative and a legal obligation: all colleges are required to protect the civil rights of students with disabilities as outlined in the Americans with Disabilities Act (ADA) and other relevant state and federal laws.

Despite this commitment, students with disabilities do not always receive the supports they need. At the campus level, complicated bureaucracies may be challenging to navigate, particularly for new students who are used to greater institutional support from their high schools. For disabled services staff, resources are often limited, which can create barriers to conducting adequate outreach, assessments, and training. For faculty, there may be insufficient awareness of what accommodations are appropriate or how to work with students who have disabilities in an equitable and culturally competent way. For students, challenges may include stigma, a sense of isolation, ignorance of available supports, or lack of knowledge about how to complete requirements. Students with “invisible disabilities” such as mental health conditions, learning disabilities, or Attention Deficit Hyperactivity Disorder (ADHD) have reported being treated unfairly by faculty or staff who believe their disabilities are not real or serious conditions.\(^1\)\(^2\)

California’s Disabled Student Programs and Services (DSPS) is a long-running program, initially enacted in 1976, to help bridge this gap between the CCCs and students with disabilities. DSPS is a voluntary program in which participating campuses receive funds that help them ensure the CCCs are accessible and useable for all students with disabilities. These funds are used for supports that directly relate to the educational limitations of the participating students, provided that they do not duplicate supports that are already provided to all students. Since the inception of DSPS, changes to national and state laws, DSPS regulations, and DSPS funding levels have impacted how campuses address student needs.
Purpose of this Factsheet. This factsheet is designed for administrators, staff, disabled student service providers, faculty, and other CCC stakeholders who want to understand how to better meet the needs of students with mental health disabilities. An overview of recent DSPS amendments is provided. Next, we describe some of the challenges that students with disabilities experience in the CCCs and with DSPS, with the intention of raising awareness of barriers that might be reduced or removed. Finally, we give examples of strategies, accommodations, and resources that CCCs can use to further the promise of equity for students with mental health disabilities.

Overview of 2016 DSPS Title 5 Changes

DSPS programs are funded under Title 5, which regulates how the money may be used. In 2015, the CCC Board of Governors approved new Title 5 regulations that went into effect in July 2016. Although the scope and purpose of DSPS remain essentially the same, the 2016 regulations included revisions to DSPS categories, terminology, and activities. These changes are intended to help CCCs provide the most appropriate, effective, and streamlined services to students with disabilities.

This section of the factsheet provides a non-exhaustive snapshot of the major updates that were made in 2016. For comprehensive guidance around the DSPS regulations, see the 2015 Implementing Guidelines for Title 5 DSPS Regulations from the Chancellor’s Office.

Categories. The 2016 amendments included the addition of some disability categories (e.g., Attention-Deficient Hyperactivity Disorder [ADHD], Autism Spectrum) and revisions to others. This factsheet focuses on Mental Health Disability, which replaced the category of Psychological Disability. Previously defined as “a persistent psychological or psychiatric disorder, emotional or mental illness,” mental health disability is defined in the new regulations as “a persistent psychological or psychiatric disorder, emotional or mental illness that limits the student’s ability to access the academic process.” Only conditions that are included in the American Psychiatric Association Diagnostic and Statistical Manual (DSM) or Americans with Disabilities Act qualify as mental health disabilities, but not all conditions listed in the DSM are eligible for mental health disability services because they do not all pose a functional limitation to a student’s education. Examples of eligible mental health conditions include Obsessive Compulsive Disorder (OCD), bipolar disorder, schizophrenia, Posttraumatic Stress Disorder (PTSD), anxiety disorders, and major depression.

1 42% of students, or 51,283, were categorized as having an “other disability.” “Other disabilities” is a catchall term for disabilities that result in educational limitations but may be nonspecific and vary widely from individual to individual. Examples include asthma, cancer, HIV/AIDS, seizure disorder, and a large number of other conditions.
“Fundamental alteration.” DSPS programs are designed to promote the maximum independence, integration, and participation of students with disabilities. The following requirement was added to the scope of DSPS: “[supports must] not include any change to curriculum or course of study that is so significant that it alters the required objectives or content of the curriculum in the approved course outline thereby causing a fundamental alteration.” What constitutes a fundamental alteration will depend on each student’s educational limitation, program of study, and courses. When choosing to deny a request for accommodations, it is important for faculty and staff to document their process for determining that it poses a fundamental alteration. They should consider what the essential academic standards and overall objectives of the course are, how the accommodation would pose a fundamental alteration, and whether there are any other possible options that would not pose a fundamental alteration while still meeting the student’s needs. For example, flexible attendance or extended examination time may be reasonable accommodations for students with mental health disabilities, while prolonged absences or requests to take all exams as open-book might constitute fundamental alterations. “Support services.” The range of assistance that DSPS provides to students was changed from the broad “support services and instruction” to the more precise “academic adjustments, auxiliary aids, services, and/or instruction.” Previously, this category was defined by an extensive list of the auxiliary aids that could be provided with DSPS funds. However, students have a diverse array of disabilities and resulting academic limitations, and the technology to meet these needs is constantly changing. For these reasons, the long list of billable items was replaced by an updated and non-exclusive list of aids.

Accommodation planning. Previously, each student had to have a Student Educational Contract with DSPS services, updated annually, that described the student’s educational limitations and outlined the supports to be provided. The SEC has been renamed the Academic Accommodation Plan (AAP), putting greater focus on achieving the student’s goals. The AAP emphasizes an interactive, deliberate, and collaborative process to be undertaken between the student and DSPS staff. The process should involve clear and welcoming communication, thorough documentation, and a good-faith exploration of the student’s needs. Following the planning process, the student should have a solid understanding of what he or she needs to do to receive the outlined accommodations, including making progress toward identified goals if the student is taking educational assistance classes.

Examples of Accommodations for Students with Mental Health Disabilities
Accommodations will depend on the student’s individual disability, educational limitation(s), and preference. Whenever possible, discuss accommodations privately in advance of class to avoid making the student feel singled-out.

• Preferential seating near the door or at the front of class
• Beverages permitted in class
• Notetaker or tape recorder allowed
• Providing exams or assignments in alternate formats (e.g., essay rather than multiple choice, written rather than oral)
• Individually proctored exams
• Advanced notification of projects, exams, and assignments
• Extended time for examinations or “broken time,” which involves providing mid-exam breaks
• Discussion in advance with student about how to call on him or her in a less stressful way (e.g., not calling on unless hand is raised, preparing the student before calling on him or her)
• Provide advanced warning or facilitate pre-processing: explain at start of class what will happen during the session
• Reframing questions
• Incompletes or late withdrawals in the event of prolonged illness or mid-semester hospitalization
• Assignment assistance during hospitalization
• Flexible attendance requirements in case of health-related absences
Staffing. As described in more detail below, most CCC campuses have had to change or reduce their DSPS programs as a result of budget changes over the last several years. The updated guidelines place emphasis on each campus having “sufficient DSPS certificated and support staff to provide timely and effective services to eligible students with disabilities.” Greater detail is provided about the responsibilities of the campus DSPS coordinator or director, including integrating services with classroom instruction, providing services and supports, maintaining knowledge of the school’s legal responsibilities, and budget planning.

DSPS Contacts. A student has received one DSPS service contact each time he or she receives an academic adjustment or service, or meets with DSPS to discuss services, classes, or accommodations. A community college district can count students for DSPS funding if they are enrolled in educational assistance classes (previously called “special classes”) or if they are enrolled in general classes but receive at least one DSPS service contact per semester. Previously, students had to receive four or more service contacts per year to count for DSPS funding.

Budgeting. CCCs are now allowed to bill for the removal or modification of minor architectural barriers up to 1% of the year’s DSPS allocation. In addition, the Chancellor’s Office’s allocation formula may base up to 20% of a college’s portion on its effort to support students with disabilities, instead of the previous 10% portion. Budgeting is outside the scope of this factsheet, but it is important to note that all campuses are required to provide appropriate services that meet the educational limitations of all students with disabilities. If DSPS funding is not sufficient to cover all costs, campuses must use other funds in order to comply with state and federal non-discrimination laws.

Overcoming Barriers to Effective DSPS Programs and Practices

Campus DSPS programs offer an opportunity for CCCs to engage California’s spectrum of individuals with disabilities, and for those students to have an equitable and beneficial college experience. Students with disabilities are as diverse as students without disabilities, and have equally varied goals for attending college. However, it appears that students who use DSPS services are a resilient and engaged group, while also facing significant challenges to success in their courses and programs of study. This section examines some of the issues that students and campuses experience.

Challenges for Students Accessing DSPS Services. Although Title 5 regulates many aspects of DSPS, services and guidelines vary from college to college. DSPS outreach and follow-up activities differ, and can lead to students falling through the cracks. College students with disabilities are generally expected to be self-advocates, which may be new and unfamiliar to them; K-12 education provides more institutional support and collaboration with students’ parents or caregivers. Students may have trouble accessing or understanding the documentation requirements, which vary between colleges. In other cases, the requirements may be perceived as overly invasive or may be illegal under ADA or privacy laws (e.g., requiring a list of medications). Some schools’ policies create barriers, such as by penalizing students if they miss appointments, and there is inconsistency in grievance and appeal policies. Even when a student has an AAP that includes accommodations, the student may be unable to obtain them from busy, uncooperative, or unaware faculty, off-campus service providers, and others.
DSPS students are resilient and engaged at the CCCs. Compared to students who are not involved in DSPS, they:

• are more likely to earn their degrees and certificates;
• show much greater retention and persistence, and essentially the same course completion rate; and more transfer prepared;
• take both credit and noncredit courses at greater rates.

DSPS students also face significant challenges. They:

• are less likely to be transfer-directed and less likely to transfer to a 4-year institution;
• are less successful in completing basic skills classes;
• are less successful in completing workforce development programs.

Challenges Related to Mental Health Disabilities. Approximately 1 in 5 youth and young adults experiences a mental health condition, and the limited research on mental health in community college populations shows that these students are significantly more likely than four-year college students to have a mental health condition. Many of these conditions do not emerge until late teens or early twenties, which can be disorienting or frightening to the students experiencing them. These students may be reluctant to seek help because they are afraid of being perceived as “crazy,” lazy, or making excuses. Students who do choose to work with DSPS may have symptoms or medication side effects that prevent them from following-through with DSPS appointments or requirements. Not all students who have mental health conditions will have a mental health disability that necessitates adjustments or aids. However, some of the educational limitations that students with mental health disabilities encounter may include difficulty screening out environmental stimuli and sustaining concentration; problems handling time pressures and multiple tasks; fear of interacting with others, including potentially intimidating authority figures; limited ability to respond to change and/or criticism; decreased attendance as a result of hospitalizations or relapse; and challenges coping with medication side-effects, including drowsiness, fatigue, and other physical and emotional responses.

Challenges for Disability Services Staff. Although DSPS staff may be highly dedicated to their students, and the students themselves may be very satisfied with the efforts of DSPS staff, the number of requests and complexity of student needs can exceed staff abilities. All campuses are encouraged to have a full-time DSPS coordinator or director and support staff as needed, but budget realities – including significant cuts following the 2008 recession – have resulted in fewer staff members and less time devoted to DSPS. The results of limited staffing include barriers such as difficulty completing assessments; increased wait time for accommodations; and reduced or eliminated services, such as cuts to tutoring, educational assistance classes, mobility assistance, and learning disability assessments. Disability services staff also report difficulties educating other staff, faculty, and administrators about sensitive and culturally competent behavior toward students with disabilities.

Challenges for Faculty. Perhaps the biggest concern for faculty is determining whether accommodation requests represent a fundamental alteration to course design, followed by deciding how to make appropriate changes to course requirements. Most faculty are committed to ensuring that all students receive an equitable, rigorous, and engaging educational experience, but adjusting course material without comprising academic standards can be tricky. Instructors who have been successful with a particular teaching method or activity (e.g., pop quizzes) may be reluctant to discard these tools. Course design changes can be particularly taxing for adjunct faculty, who have less planning and preparation time.
Finding a Path: Strategies for Navigating the Challenges

Although the challenges may appear insurmountable, there are many changes to policy, program design, and practice that can help these students connect to services more rapidly and successfully. The following are strategies that may help to facilitate DSPS access and use for students with mental health disabilities.

- **Consider how students access your services.** If a student had only recently developed a mental health disability, how would they find out that they are entitled to accommodations, if needed? Would students be able to easily access necessary information about DSPS services through your website (e.g., contacts, documentation requirements)? Is the information shared in multiple places, such as through your website, in your health services building, and in the student center or dining hall? Surveys or focus groups can allow you to solicit direct input.

- **Engage student groups.** Seek ways to partner with student mental health or disability organizations, like Active Minds or NAMI on Campus. Opportunities may include identifying barriers that students with mental health disabilities experience on your campus or designing outreach and engagement materials.

- **Develop peer programs and opportunities.** Peer support and mentoring programs are an effective way to help students learn self-advocacy skills, navigate the process, and stay engaged with services and school.

- **Educate.** Offer training opportunities to faculty, staff, and students on mental health issues. Ensure that DSPS staff have received training around the specific needs and challenges of students with mental health disabilities (e.g., stigma as a barrier to help-seeking). Provide trainings and resources to faculty around appropriate and equitable accommodations.

- **Streamline.** Wherever possible, simplify processes for students seeking accommodations, filling out paperwork, and completing requirements.

- **Co-locate services and develop informal support spaces.** Many campuses have had success with combining multiple offices to minimize costs and promote access to DSPS (see “Creative Ideas” in Guide to DSPS: A Primer for examples). Another option is to provide “safe zones” where students can relax and receive counselor or peer supports when they feel overwhelmed.

- **Implement universal design (UD) instruction.** UD means designing products and environments for all people, rather than the “average” user, to the greatest extent possible. UD principles in course design help prevent students with disabilities, low English fluency, or other characteristics from feeling isolated, and they can minimize the number of changes that need to be made to accommodate specific disabilities. Examples of UD instruction include using textbooks that are available in digital formats, uploading lectures to the class intranet, captioning course videos, allowing students to submit parts of large projects for feedback before the due date, and providing syllabi before the course begins so that students can begin preparing in advance. UD instruction does not mean making the course easier.
Summary

Ensuring that students with disabilities and mental health challenges have equitable access and participation in the California community college experience is not the responsibility of any one staff member or department on campus. Students, faculty, staff, and administrators can all contribute to a more inclusive and culturally competent environment for students with disabilities. DSPS students are persistent and resilient, and promoting their success is ultimately beneficial to all.

Further Resources

DSPS Home: The DSPS homepage on the CCCCO website includes information about allocations, regulations, events, forms, resources, and more.

DSPS Solutions – Interwork Institute: DSPS Solutions is funded by the CCCCO to provide training and technical assistance to DSPS programs in the CCCs. Their website contains a wide array of resources on this topic as well as links for requesting support.

Association on Higher Education and Disability (AHEAD): AHEAD is a professional membership organization for individuals involved in the development of policy and services to meet the needs of college students with disabilities. The website provides access to virtual learning opportunities, publications, resource lists for Disabled Student Services professionals, and more.

NCCSD Clearinghouse and Library: The National Center for College Students with Disabilities (NCCSD) is the only federally funded national center in the U.S. for college students with any type of disability, regardless of what it is. NCCSD compiled this curated library as a “first stop.” Resources are organized by audience – future or current students, family, faculty, staff, policymakers, and others.

Disability Rights, Education Activism, and Mentoring (DREAM): DREAM is a national organization for and by college students with disabilities. It includes information for students with disabilities and their allies about rights, campus organizations, recommended readings, and more.

References

The California Community Colleges Student Mental Health Program (CCC SMHP) is dedicated to increasing the capacity of the CCC system to provide student mental health services. Funded by the California Mental Health Services Authority, this program offers cost-free training and technical assistance (TTA) to California’s community college campuses.

The California Mental Health Services Authority (CalMHSA) is an organization of county governments working to improve mental health outcomes for individuals, families and communities. Prevention and Early Intervention programs implemented by CalMHSA are funded through the voter-approved Mental Health Services Act (Prop 63). Prop 63 provides the funding and framework needed to expand mental health services to previously underserved populations and all of California’s diverse communities.

June 2017