DAWN HANDBOOK

Teaching Students with Disabilities: Guidelines for Academic Staff
Higher Education Institutes in Ireland have created many new educational opportunities for students over the past decade. However, figures from the Central Statistics Office and AHEAD (Association for Higher Education Access and Disability) indicate that there is still some way to go on participation rates in comparison to international benchmarks.

To achieve a fair proportion of students with disabilities in third level education, many aspects of access need to be improved. This handbook is a welcome resource for lecturers and administrators informing them about the help available to accommodate disabled students from the nationwide network of expert disability support officers, DAWN (Disability Advisors Working Network).

One aspect of providing improved access is to adapt teaching and learning methods appropriately. The Handbook provides information on basic changes, such as providing alternative versions of handouts, and designing curricula and field activities in ways which are inclusive of all abilities. Information is also provided on appropriate communication methods and changes to assessment methods for specific disabilities.

The National Academy for the Integration of Research and Teaching and Learning, fully supports the aims of this Handbook, and is delighted to be involved in its production.

Prof. Grace Neville
Director, NAIRTL
Vice-President of Teaching and Learning, University College Cork
### Contents

1. Introduction ..................................................................................1
2. DAWN Disability Advisors Working Network .................................2
3. Understanding Disability .................................................................4
4. Disability in Higher Education ..........................................................7
5. Introduction to Disability Support Services ........................................8
6. Good Practice when Communicating with Departments ......................11
7. FAQ’s .........................................................................................13
8. Inclusive Teaching and Assessment .................................................17
9. Guidelines for Supporting Students with Disabilities .........................22
10. Asperger’s Syndrome ....................................................................22
11. Attention Deficit Hyperactivity Disorder (ADHD) ...............................24
12. Blind and Visually Impaired ...........................................................25
13. Deaf / Hard of Hearing ...............................................................28
14. Epilepsy ......................................................................................32
15. Medical Conditions ........................................................................35
16. Mental Health Difficulties ..............................................................36
17. Physical Disabilities ......................................................................38
18. Specific Learning Difficulties .........................................................40
**Introduction**

This guide was developed by DAWN (Disability Advisors Working Network) in consultation with AHEAD (Association for Higher Education Access and Disability), Asperger Syndrome Association of Ireland, Brainwave, DeafHear, Dyslexia Association of Ireland and the National Council for the Blind.

This is an introductory guide and should be used as a stepping stone for finding out more about people with disabilities and related issues.

The Handbook is intended to act as a resource for third level academic staff wishing to develop their awareness of disability issues and to improve practice in relation to students with disabilities.

The broad aims of the guide are to focus academic staff on the individual student rather than on the disability, to develop an understanding of appropriate methods of communication and to create awareness of the need to be proactive in developing a curriculum which is accessible to all students.

Within the context of Higher Education in Ireland, the Handbook covers:

- the role of Disability Support Services.
- inclusive teaching and assessment.
- guidelines for supporting students with specific disabilities.

This handbook can be downloaded from: http://www.nairtl.ie/index.php?pageID=119

**Acknowledgements**

DAWN would like to acknowledge the kind assistance of Ann Heelan, Director of AHEAD, and submissions from a number of disability organisations towards the compilation of this handbook.

DAWN is also grateful for graphic material supplied by the Media and Communications Department of UCC (Nancy Hawkes), Dr Bettie Higgs, UCC, Tomas Tyner, UCC and John Kealy (First Impressions). Thanks are also due to all those who appear in the photographs.
The Disability Advisors Working Network (DAWN) is the professional organisation for Disability Officers who are primarily responsible for supporting learners with disabilities in Higher Education in Ireland. We provide a forum for the sharing of expertise and the development of knowledge and skills in this area. We work towards the development of professional standards and best practice and collaborate on the development of policies and procedures for the inclusion of learners and staff with disabilities in Higher Education Institutions.

DAWN plays an important role in influencing Higher Education Institutions (HEIs) through the continuing development of disability related policy and practice and have a national voice through our members’ participation on advisory committees and national forums. We have led change through the development of the HEIs National Supplementary Admissions Route for Students with Disabilities and have advised on key developments such as the collection of student data, funding for students with disabilities and Universal Design.

We believe that people with disabilities should have equality of access to, and participation in, not only the academic life of our institutions but also in the social, cultural and sporting experience. We also believe that the professional development of our members is a key element in the provision of excellent services to learners with disabilities in HEIs.
The following institutions are members of DAWN:

<table>
<thead>
<tr>
<th>Institution</th>
<th>Website</th>
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<tbody>
<tr>
<td>Athlone Institute of Technology</td>
<td><a href="http://www.ait.ie/facilities/stuserv/disability.shtml">http://www.ait.ie/facilities/stuserv/disability.shtml</a></td>
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<tr>
<td>Cork Institute of Technology</td>
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<tr>
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<tr>
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<td><a href="http://www2.wit.ie/StudentLifeServices/Disability/">http://www2.wit.ie/StudentLifeServices/Disability/</a></td>
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Understanding Disability

There are a number of views relating to what a disability is – all are relevant. However, for the purpose of this guide, we will use AHEAD’s definition and also introduce the social definition of disability (which is currently gaining worldwide recognition).

The legal definition of disability, outlined in the Equal Status Acts 2000-2004, is very broad and includes people who have a physical, learning, sensory, psychiatric or medical condition. The Act provides a very precise, legal definition which does not really assist colleges in responding to the individual needs of students in higher education. A more effective working definition used by AHEAD defines disability as follows:

“A student is disabled if he/she requires a facility which is outside of the mainstream provision of the college in order to participate fully in higher education and without which the student would be educationally disadvantaged in comparison with their peers (pg. 38).”

A Social Perspective of Disability

The Social Model of Disability maintains that people with disabilities are prevented from achieving their full potential by the attitudes and conventions of society. Disabled people have impairments but it is barriers in the environment such as stairs without ramps, other people’s attitudes and discriminatory practices which actually ‘disable’ people.

The social model has fundamentally changed the way in which disability is regarded and has had a major impact on anti-discriminatory legislation. However, some disabled people and academics are involved in a re-evaluation of the social model and they argue that the time has come to move beyond this basic position.
Types of Disabilities
Disabilities are usually grouped into one of the five categories below:

- **Sensory**: Blind, Vision impaired, Deaf and Hard of Hearing
- **Physical**: Cerebral Palsy, Multiple Sclerosis, Spina Bifida, Muscular Dystrophy
- **Medical Conditions**: Diabetes, Cystic Fibrosis, Crohn’s Disease
- **Mental Health**: Depression, Schizophrenia, Anxiety Disorders
- **Specific Learning Difficulties**: Dyslexia, Dyscalculia, Developmental Coordination Disorder, ADD, ADHD

Some important points to remember:

- Many people have multiple disabilities
- Some disabilities are ‘hidden’ and are not always visible
- Many people do not identify as having a disability i.e. D/deaf individuals may identify themselves as members of an Irish linguistic and cultural minority and not as individuals with a disability.

Common Stereotypes
Attitudes based on prejudice or stereotype are significant barriers that prevent people with disabilities from participating fully and equally in society. Common stereotypes include:

- Disability is a personal tragedy.
- People with disabilities are objects of pity.
- People with disabilities who do normal things, such as getting married and having children, are exceptional.
- People with disabilities lead boring, uneventful lives.
- People with disabilities are incredibly brave.
- People with disabilities are asexual.

The Power of Language
Everyone has both abilities and disabilities. It is important to use language which recognises that people are people first and that their disabilities are only part of their lives.
Many of the words that used to be common descriptors of people with disabilities produce images which represent such people as being helpless, dependent upon charity and unable to live independent lives. People with disabilities do not consider themselves to be “in-valid” and therefore such a term should be avoided.

The word “handicapped” is unacceptable to many people with disabilities as it implies that a person with a disability must go “cap in hand”, that is to say, they are dependent on charity. Use of the word “special” is not advised as it sets people with disabilities apart from the mainstream of society for example, special schools, special transport, special needs etc.

To ensure that negative images are not reinforced, always treat people with disabilities with dignity.

- Say “people with disabilities” or “disabled people” rather than “the disabled”
- Say “non-disabled” rather than “normal”
- Say “John has dyslexia” rather than “John suffers from dyslexia”
- Say “Jane is blind” rather than “Jane is a victim of blindness”
- Say “John has Cerebral Palsy” rather than “John is afflicted with…”
- Say “Jane uses a wheelchair” or “is a wheelchair user” rather than “Jane is in a wheelchair” or “wheelchair-bound”
- Do not avoid using words like “run” or “jump” when in conversation with a wheelchair user or words like “look” or “see” when talking to a blind person – they say these things too.
Disability in Higher Education

Looking at the history of education for people with disabilities in Ireland, it is clear that the inclusion of students with disabilities in higher education is a recent development. The number of disabled students increased from 990 students in 1993/94 to 3,608 students in 2005/06. This represents a 264% increase in the number of students with disabilities accessing higher education. Students with disabilities accounted for 3.2% of the undergraduate population in 2005/06. Although encouraging, this figure is under-representative of the 9.3% of the population that reported a disability in the 2006 census.

The significant increase in the number of students with disabilities accessing higher education has not been uniform across all disability types. The biggest rise has been in the “specific learning difficulties” category which increased from 5% in 1993/94 to 56% in 2005/06. Within the other categories of disability, 13% have physical or mobility disabilities, 3% are blind or visually impaired, 5% are D/deaf or hard of hearing, 8% have a mental health difficulty and 13% were placed in the “other” category.

The increase in students identified as having disabilities is a reflection of a variety of factors, including the introduction of positive admission policies for students with disabilities, dedicated disability support services within third level institutions, enhanced supports across the Higher Education sector and equality legislation. Although a great deal of progress has been made, there is still a long way to go before third level institutions will be able to respond fully to the needs of disabled students. Achieving this goal will require the development of more open attitudes towards students with disabilities, a close review of the funding mechanisms, improvements in data collection allied to better identification and assessment procedures and improved links with secondary schools and other groups in the community.
Introduction to Disability Support Services

The Disability Support Services (DSS) in Higher Education Institutions (HEIs) have two broad aims:

- To embed disability issues into the culture of the institution, thereby influencing the development of inclusive policies and practices.
- To address the delivery of specific services to students, prospective students and staff.

Vision Statement
All Higher Education Institutions are committed to a policy of equal opportunity in education and to ensuring that students with disabilities have as complete and equitable access to all facets of college life as can be reasonably provided.

Mission Statement

- To promote awareness and provide information in order to educate the higher education sector on the rights and values of students and staff with all disabilities, both those that are visible and those that are not.
- To make the HEIs aware of the breadth of disabilities within the community and the cultural, physical and psychological barriers encountered by these individuals.
- To mainstream services and facilities in all service areas so that students and staff with disabilities are treated in the same way as all other students and staff in terms of service delivery, wherever it is possible to do so.
Supporting Students with Disabilities

The nature and type of support available varies and will be tailored to meet individual requirements, but may include the following:

- Arranging support providers, including note-takers, library assistants, proof-readers, personal assistants etc.
- Assisting students with applications for funded supports via the ESF fund for students with disabilities.
- Liaising with a number of departments across HEIs such as examinations offices, admissions offices, libraries, IT services etc., to ensure that specific support requirements are met.

Registering with Disability Support Services

Disclosure of Disability
Within the CAO application system, applicants are given the opportunity to disclose a disability. If a student chooses to disclose, the CAO sends out a brief questionnaire to find out more details about the student’s disability and what supports they may require in higher education. The information detailed in the questionnaire allows DSS to prioritise which students need to be seen first, i.e. those with the most complex needs, and from August onwards Disability Officers begin the process of assessing the needs of these students.

Students have a further opportunity to disclose their disability, particularly those who chose not to disclose at CAO, during the registration process. Students are required to complete a form and indicate whether they do/do not have a disability. This information is passed to the DSS and those who indicate that they have a disability, who have not been seen by Disability Services staff, are invited for an assessment. In addition, students with disabilities register throughout the academic year and information about new students is disseminated to academic departments all year round.

Reasonable Accommodations
Within Higher Education, a reasonable accommodation has come to mean any action that helps alleviate a substantial disadvantage. Examples of reasonable accommodations include the provision of additional services
(e.g. examination arrangements, materials in large print), modifying the method of assessment or making alterations to the physical environment.

**Assessment of Need**

All students who register with DSS have an individual assessment of needs to determine the support they require. He/She meets with a Disability Officer and issues covered include:

1. Nature of disability/medical condition and how it impacts on the student.
2. Previous support: what arrangements were made at secondary school.
3. Current difficulties: what difficulties does the student anticipate that they may have with their course.
4. Access to equipment, IT and assistive technology.
5. Appropriate support such as alternative exam arrangements.

After the assessment of need, the Disability Officer is able to make recommendations for support within lectures and tutorials, laboratories, the library and during examinations. It may be necessary to apply for funding for equipment, personal support and transport. These recommendations for support are detailed in a needs assessment report and both the student and the Academic Department receive a copy of the report.

Please note that all students must provide evidence of their disability before support can be arranged. This may be a letter from a consultant for those with a disability/medical condition, an educational psychologist report for those with a specific learning difficulty such as dyslexia, or a report from a psychiatrist for those with mental health difficulties.
Good Practice when communicating with Departments

Reports from Disability Support Services
After an assessment of need has taken place, the Disability Officer details the supports a student will require. This report is disseminated at department level, usually to the Head of Department or his/her designate. It is recommended that all departments have a Disability Liaison Officer. This Disability Liaison Officer can liaise with the DSS on any issues relating to students with disabilities studying in their department.

When a copy of the report is received it is important that the information is communicated to all staff at department level. We appreciate that individual departments will have their own procedures for communicating information. However, with the implementation of Disability Act 2005 it is vital that the support requirements of students are communicated effectively to all staff who are involved in teaching the student, including staff outside the department e.g. if the student is completing modules within another department or school. In cases such as this, the report should be forwarded to the Disability Liaison Officer in the school in which the student is taking the module.

Model of Good Practice when Communicating with Academic Staff
As stated, in disseminating information regarding a student’s support requirements, the Disability Liaison Officer can send the report from DSS directly to all teaching staff. This should provide staff with adequate information regarding the nature of the student’s disability and why such support is being put in place. In conjunction with DSS, the key role of the Disability Liaison Officer is to ensure that such support is put in place at department level. The reports are sent via email.

Communicating with Students
The Disability Liaison Officer is a local contact for students with disabilities and as such, students should contact their Disability Liaison Officer regarding any academic difficulties they are experiencing at the intra-departmental level.

At the beginning of each academic year all students are strongly advised by DSS to contact their Disability Liaison Officer to discuss any concerns
or support requirements. Sometimes it is useful to have a meeting with the student and the Disability Officer to discuss all items covered in the report.

**Confidentiality**

Students with disabilities are encouraged to disclose information on their disability/specific learning difficulty as part of the CAO application process. However, students can also disclose at any time during their studies in Higher Education. Such disclosure is encouraged so that the HEI can work with the student in ensuring that any reasonable accommodation required is identified and facilitated in conjunction with the student.

Any documentation or information presented in disclosing a disability is held by the DSS/Access Office and specific medical or other documentation will not be disclosed to any third party.

Where a student requests and is granted any form of reasonable accommodation, such as extra time in exams, or permission to tape record lecture notes, the HEI will, in consultation with the student, disclose relevant information to the individuals in those departments responsible for providing or facilitating students in accessing such accommodations. In such instances, only information relevant to the particular situation will be disclosed.

The information should still be treated on a “need to know” basis. Thus only those staff who teach or otherwise deal with the student should receive information.

Under equality legislation, if a student discloses a disability to you, the HEI as a whole is deemed to know. It is therefore important to act on information that is disclosed to you, bearing in mind data protection legislation etc.
FAQs

1. Many memos ask for the student to be provided with lecture notes. Is this necessary if notes are available online?

Where the request for lecture notes has been made by Disability Support Services (DSS), it is imperative that if it is not possible to provide such support, that the DSS is contacted immediately. This will enable the DSS to discuss alternative support with the student.

More and more departments and schools are now making copies of lecture notes available online, which is extremely beneficial for all students, not just those with notetaking difficulties. Some students however require notes to be provided to them in advance of lectures and in such cases, this should be done in a discreet manner i.e. students are not provided with the material in front of their peers. A system that has worked well to date is for a wallet/box for each student to be held in the Department office where staff can leave lecture notes. Students can call into the office to collect material on a weekly basis. An alternative to this is to email copies of notes to the student in advance, which again, avoids any contact with the student during the lecture.

2. One of my students has a notetaker accompanying him to class. What exactly is the role of the notetaker and should they be attending a class if the student is not present?

If a student has a notetaker accompanying them to class, it will be detailed in their support memo. Some students may choose not to sit beside their notetaker in class and it may not be apparent who the notetaker is. All notetakers are encouraged to make themselves known to the lecturer, to ensure that embarrassing situations do not arise, such as the notetaker being asked a question.
The role of the notetaker is to take notes only. They should not participate in class discussions or interact with other students. Notetakers should not attend a class if the student is not there. However, in exceptional circumstances, notetakers have been arranged to take notes for students who are sick and cannot attend, for reasons related to their disability. Notetakers are asked to report to DSS if a student habitually fails to turn up.

3. Whose responsibility is it to arrange accessible venues for students with disabilities?

It is the responsibility of the department or college, in conjunction with Room Bookings, where appropriate, to ensure that classes with students with mobility difficulties are given priority in booking accessible venues. Where difficulties arise in making such arrangements, it is essential that the Department contact DSS immediately to allow staff to assist in the negotiation process.

DSS endeavours to see those students with mobility or physical disabilities prior to the commencement of the new academic year to allow for the arrangement of timetables and accessible venues. If a student requires an accessible venue, this will be detailed in their support requirements memo.

4. Is there a policy on how much of an extension should be given to students who have been recommended “flexibility with deadlines”?

Within the support requirements memo from DSS, a recommendation, which may be detailed, is the request for flexibility with deadlines. The rationale as to why this is necessary is also detailed. Students are informed by DSS that they need to contact either their Disability Liaison Officer or the member of staff concerned for any extensions prior to the existing deadline for the work. Students are aware that they are not in receipt of a blanket extension for the academic year and that this is a
form of support not to be abused. Where a student has been ill as a result of their disability, medical notes can be provided by their GP to support any recommendations for extensions by DSS.

There is no policy or guideline as to how much time is reasonable. This will depend on the individual student’s circumstances and the lecturer involved. Deadlines are made for a reason, and sometimes it may not be possible to provide students with an extension e.g. work must be submitted before the next exam board meeting. However, where possible, staff and students should agree a suitable submission date between themselves.

5. How can I identify coursework of a dyslexic student when it is submitted anonymously?

DSS provide students registered with Disability Services with “stickers” which will identify their assignments as the work of a dyslexic student. The sticker will alert the markers to the student’s difficulties and enable them to give more detailed constructive criticism, taking spelling and grammatical errors into consideration.

6. Why are so many students with Specific Learning Difficulty/Dyslexia studying at College?

Dyslexia has always existed, but improved assessment techniques and greater awareness of dyslexia amongst teachers and lecturers has resulted in more students being identified as having dyslexia than ever before.
### Guidelines for marking the work of a dyslexic student

<table>
<thead>
<tr>
<th>What to Do</th>
<th>Rationale</th>
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<tbody>
<tr>
<td>Assess or discuss the level of correction that the learner will be able</td>
<td>The learner is usually best placed to advise on the form of correction that is most effective.</td>
</tr>
<tr>
<td>to use effectively.</td>
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<tr>
<td>Read quickly to assess ideas, understanding &amp; knowledge, ignoring</td>
<td>Holistic thinking does not lend itself to the linear nature of words; reading quickly may enable the reader to access the holistic pattern of thought.</td>
</tr>
<tr>
<td>grammar, spelling &amp; punctuation errors, without making corrections or</td>
<td></td>
</tr>
<tr>
<td>comments.</td>
<td></td>
</tr>
<tr>
<td>Comment on where the learner has done well and explain why a particular</td>
<td>Models of good practice and correct usage are easier to retain and replicate. Learners with SpLD find it difficult to “read between the lines”.</td>
</tr>
<tr>
<td>aspect of the work is good, rather than/as well as being critical.</td>
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</tr>
<tr>
<td>Explain what is required and what went wrong; use clear explicit English</td>
<td>A learner with SpLD is unlikely to know how to correct an error without some guidance or explanation; they are often unfamiliar with grammatical terms/rules.</td>
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<tr>
<td>avoiding innuendo, sarcasm and complex sentences; avoid using grammatical</td>
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<td>terms.</td>
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<tr>
<td>Inform the learner if you are marking for ideas, understanding and</td>
<td>Absence of lots of corrections (they are used to a lot) may create a false impression of improvement and can be demoralising when re-appraisal occurs.</td>
</tr>
<tr>
<td>knowledge and ignoring spelling, punctuation and grammar.</td>
<td></td>
</tr>
<tr>
<td>If you decide to mark for spelling, grammar and punctuation avoid</td>
<td>Numerous corrections can be demoralising; simply correcting spelling and grammar will not lead to improvement – helping the learner identify types of error together with models of correct usage will help.</td>
</tr>
<tr>
<td>marking every error – select and indicate about four types of error.</td>
<td></td>
</tr>
<tr>
<td>Use one colour pen to comment on ideas, understanding and knowledge and</td>
<td>Anything which helps to differentiate functions of words is useful for the learner with SpLD. Red often has negative associations from school days and can be demoralising.</td>
</tr>
<tr>
<td>a different colour for spelling, punctuation and grammar. Avoid using red</td>
<td></td>
</tr>
<tr>
<td>pens.</td>
<td></td>
</tr>
<tr>
<td>Use highlighter pens to indicate which areas of text “belong together” if</td>
<td>Anything which aids differentiation of text is helpful; colour is instantly recognisable and will give the learner an additional sense of control over the text.</td>
</tr>
<tr>
<td>you want to indicate where changes in structure or organisation are</td>
<td></td>
</tr>
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<td>necessary.</td>
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</table>
Inclusive teaching and assessment

Inclusive teaching means recognising, accommodating and meeting the learning needs of all students. Increasingly, third level institutions in Ireland and abroad are looking at ways of opening up the curriculum and making education more inclusive for people with disabilities. Often the style of teaching and assessment on a particular programme may inadvertently exclude some people with disabilities, who would otherwise participate in that programme. While maintaining academic standards, alterations can be made to both the delivery of course content and methods of assessment.

Inclusive teaching practices benefit the entire student body, not just students with disabilities. Academic staff should be aware that certain teaching methods might result in barriers to learning which do not provide students with the opportunity to succeed, and prevent those students from demonstrating their intellectual abilities. For example, in the process of reviewing how to describe a diagram to a blind student, it might become apparent that there is a more effective alternative method of presenting the information to all students.

The following factors should be considered when making teaching practices more inclusive:

- Potential barriers to learning that a student might face.
- Materials used (textbooks, lecture notes etc.).
- Method of delivery (lectures, tutorials, PowerPoint slides, videos etc.).
- Method of assessment.

**Teaching Practices**

The way that learning materials are presented can directly affect students’ acquisition of information. There are a number of adjustments that can be made to the structure of a course to make it more inclusive, such as:
Course materials should be designed so they can be produced in an accessible format on request. For example, electronic notes can be made accessible more easily than hand written notes. Materials that can be accessed digitally and on-line will be more accessible to a wider range of students.

Lecture notes/PowerPoint slides should be available in advance of the lecture and ideally in an electronic format.

Where possible avoid using out-of-print books as it is much more difficult and expensive to reproduce these sources in an alternative format such as large print, Braille or CD-Rom.

Provide reading lists in advance to facilitate early reading and planning. Indicate the most important books on a reading list and direct students to key points in their readings.

Provide an overview when introducing a new topic so students know what to expect – highlight the main argument and key points. Provide a summary at the end of a lecture/topic.

Provide a list of new terms and vocabulary, giving explanations where necessary.

Introduce new topics and concepts overtly and clarify new language.

Ensure that students receive advance warning of any changes to their normal routine.

Assignment topics should be provided early. Additional follow-up may be required to reinforce the deadline and to clarify what is expected.

Discuss the instructions for examination papers and their structure with students well in advance of the exam.

Facilitate the task of support workers, such as notetakers and library support workers, wherever possible.

Disability Support Services may advise and request specific accommodations for students with individual needs. Examples of some of these accommodations are:

- Some students may be absent from college for prolonged periods and may need direction from the lecturer on areas for revision. Clear guidelines on important lectures in the module, such as essential texts to read etc., would be extremely beneficial.
- Flexibility on attendance may be required, as it may not be possible for some students to be present at all lectures/tutorials.
Some students may require extra time to complete assignments. This should be pre-agreed with the student and a new deadline should be set for the assignment.

Some students with particular disabilities (e.g. fatigue difficulties) may tire easily and may require rest breaks during lectures or class tests.

Some students may find it difficult to work in a group. Alternative ways of completing group assignments may need to be considered.

### Placements and Field Trips

Forward planning is essential to ensure a successful student placement or work experience. Some examples of good practice include:

- Providing opportunities for disclosure in order to assess the impact of the disability on placement setting.
- Provision of support in identifying appropriate work placement providers who are aware of potential reasonable adjustments to work practices.
- Hosting discussions with student prior to placement to decide on individual practical solutions to overcoming barriers on placement/work experience or field trips.
- Provide opportunities for the student to discuss their needs with the placement supervisor.

When undertaking fieldwork, students with disabilities may experience problems with tasks such as:

- Taking accurate notes in non-classroom environments.
- Multi-sensory tasking; listening, observing, recording and reading.
- Speed of handwriting and legibility.
- Organisation of time.
- Orientation, reading maps.
- Slow reading speed for accurate comprehension.
Visual perceptual difficulties with poorly photocopied material, particularly black print on white background.

Remembering field trip arrangements.

Group work.

Recording data and making mathematical calculations.

If students with disabilities are to receive the support they need, it is important for staff to focus not only on the actual fieldwork itself but also on relevant activities before and after fieldwork. The pre-fieldwork phase is especially important in that this is the period of planning and preparation. This is the time when students should be invited to alert staff to their difficulties and to the kinds of assistance they may require. It is at this stage that students and academic staff are most likely to liaise with colleagues specialising in disability support and seek advice from them. The post-fieldwork stage is important both in the completion of assignments for assessment, and because this is a period of reflection in which to evaluate successes and problems.

Assessment

Very often an assessment can be made accessible by making a generic change to the assessment design or delivery. However, sometimes lecturers have to respond to the specific requirements of a particular student with a disability, making a change only applicable to that student. The challenge then is how to do this equitably, balancing accessibility against the maintenance of academic standards.

There are a number of ways to make reasonable assessment changes:

- **Making an adjustment** that does not change the proposed assessment: This may involve producing exam papers in an enlarged print or allowing extra time to complete the assessment. The rationale for this is that reasonable accommodations compensate for any disadvantage during the assessment process and allow the student to complete the assessment in the same manner as other students.

- **Modifying the assessment:** This means changing the assessment to make it more accessible. An example would be allowing a student with Asperger’s Syndrome to complete group work online rather than in person.

- **Alternative assessment:** This means substituting the proposed assessment with an alternative assessment. An example would be
substituting an oral presentation with a written assignment for a student with speech difficulties.

- **No change to the assessment process**: Current legislation states that the decision not to change the assessment process may be justified if academic standards are compromised, if there is a significant financial implication, and if there are concerns regarding health and safety and the practicality of the adjustment. To comply with the legislation, electing ‘no change’ must be considered on a case-by-case basis.⁴
Asperger’s Syndrome (AS)

Asperger’s Syndrome (AS) is a neurological condition which is recognised as being at the high functioning end of autistic spectrum disorder. People with AS develop cognitive or behavioural characteristics which can impact significantly on the person’s outlook on the world.

While people with AS experience difficulties with social interaction and working with groups of people, they may have an above average IQ which allows them to thrive in an academic environment, as they focus on a particular area of study or development of a particular competency. They are particularly good at memorising facts and figures, although they do experience difficulties with autobiographical memory.

People with AS can become easily stressed and anxious. Often, they can find a change of circumstances challenging due to their tendency to follow a rigid routine with ritualistic behaviour. The move to college where days are largely non-routine can be particularly difficult. More information on Asperger’s Syndrome is available from the Asperger Syndrome Association of Ireland (ASPIRE) at [http://www.aspire-irl.org](http://www.aspire-irl.org), telephone 01 878 0029.

Characteristics of Asperger’s Syndrome include:

- Difficulties with social interaction and communicating – often interrupting or misunderstanding people.
- Unusual body posture, inappropriate gaze or facial expression, unusual gait.
- Easily stressed, irritated or annoyed.
- Overly sensitive to particular sights, sounds, smells.
- People with AS often follow a rigid routine which can make it difficult to develop new interests or hobbies (this can also be seen as a positive aspect of Asperger’s Syndrome, as it can lead to the person pursuing an excellent career within their area of interest).
Impact on learning

- Student may be unable to complete tasks or assignments because of comprehension difficulties or poor organisation.
- Student may be demanding of tutor’s time or individual attention.
- Student may lose focus of lecture due to distraction from stimuli in the environment or poor concentration.
- Student may have difficulty attending to daily tasks.
- Student may have difficulty developing peer relationships.

How you can help

- Please refer to the section on Inclusive Teaching and Assessment.
- For meetings, choose a quiet venue, avoid having to reschedule and minimise distractions (put the phone on voicemail and a ‘do not disturb’ sign on the door).
- Students may find abstract language and metaphors impossible or difficult to understand. Try to use literal language whenever possible and be explicit about precisely what you mean.
- When giving instructions do not assume that the student has understood. Patient questioning and listening, a willingness to rephrase questions and added explanations may be necessary.
- Written information is especially helpful for people with AS, many of whom have visual learning styles.
- Be careful about making jokes – students with AS are often unable to perceive that a joke is a joke.
- Some students may find it difficult to work in a group. If it is possible and appropriate, consider alternative ways of completing group assignments.
- Be watchful for possibly bullying by other students.

Exam accommodations

- Separate examination room to avoid distraction.
- Extra time.
- Use of a computer.
- Rest break during the exam.

<table>
<thead>
<tr>
<th>Asperger’s Syndrome Quiz</th>
<th>Yes?</th>
<th>No?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is there one single treatment for Aspergers?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is there a delay in language or cognitive development?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Is Aspergers Syndrome a mental health condition?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Yes 2. No 3. Yes
Attention Deficit Hyperactivity Disorder (ADHD)

Attention Deficit Hyperactivity Disorder (ADHD) is characterised by three dominant behaviours – inattention, impulsivity and hyperactivity. Individuals with ADHD exhibit behaviour that is often seen as impulsive, disorganised, overly sensitive, intense, emotional, or disruptive. Positive aspects include a tendency to be highly intuitive and imaginative.

Impact on learning
- Student may not be able to complete tasks or assignments.
- Student may miss information in lectures or classes because of poor concentration / leaving early due to restlessness.
- Student may have poor attendance due to poor time planning.
- Student may lose the focus of a lecture due to distraction from stimuli in the environment.
- Student may have difficulty attending to daily tasks.
- Student may have difficulty meeting deadlines.
- Student may have difficulty waiting to take turns in group activity.
- Student may have inappropriate behaviour in class or social settings.

How you can help
- Please refer to the section on Inclusive Teaching and Assessment.
- People with ADHD are easily distracted. Try to remember this when giving instructions or directions.
- Be patient; remember that unusual or inappropriate behaviour is not their fault.
- In many instances a student with ADHD may also have an associated learning difficulty. If necessary please refer to the guidelines for specific learning difficulties.

Exam accomodations
- Separate examination room to avoid distraction.
- Extra time.
- Use of a computer.
- Scribe.
- Rest break during the exam.

<table>
<thead>
<tr>
<th>ADHD Quiz</th>
<th>Yes?</th>
<th>No?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is there medication available to help children with ADHD?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Can symptoms of ADHD reduce with maturity?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Is ADHD more common in boys than girls?</td>
<td>1. Yes</td>
<td>2. Yes</td>
</tr>
</tbody>
</table>
A lot of people don’t realise that most vision impaired people can see something, or that how much someone can see will vary from person to person. A minority of people can distinguish light but nothing else. Some people have no central vision, others have no side vision. Some people see everything as a vague blur; others see a patchwork of blanks and defined areas.

More information is available from the National Council for the Blind at http://www.ncbi.ie or by calling 1850 33 43 53.

Impact on learning
- Student may have difficulty seeing print, presentations and blackboards.
- Student may have difficulty following lectures with a heavy emphasis on visual aids (i.e. diagrams, tables, pictures and overheads).
- Student may have slower speed of reading, or difficulty reading for long periods.
- Student may have slower speed of work when using magnification or specialist software.
- Student may have difficulty seeing things in the distance.
- Student may have difficulty seeing things up close.
- Student may have problems with orientation and mobility (laboratories, field trips). Changes to the timetable or room changes can be problematic if the student is not informed.
- Student may have adjustment problems if diagnosed recently (both practical and emotional).

How you can help
The effect of a vision impairment varies widely, depending on the
condition, its progress and the person’s coping skills. Depending on the individual, it may be appropriate to consider some of the following guidelines:

- Please refer to the section on *Inclusive Teaching and Assessment*.
- Greet a person by saying your name, as he or she may not recognise your voice. Do not ask or expect them to guess who you are, even if they know you.
- Do not go out of your way to avoid using phrases such as “see you later” or “it’s great to see you” – people who are blind or vision-impaired say these things too.
- A person using a cane or guide dog has only one hand free for opening doors and carrying belongings. Offer assistance if you think it is needed but do not be offended if your offer is refused.
- NEVER make a fuss of, or feed, a guide dog – he or she is working and should not be distracted when in harness. Always ask the owner’s permission first.
- When guiding a person who is blind or vision impaired, walk slightly ahead of them, allowing them to take your arm just above the elbow. Mention any stairs (saying whether they are up or down), or obstacles in advance.
- When walking with a person who uses a cane or a guide dog adjust your pace to match theirs.
- Reading lists should be provided well in advance to allow for conversion of books into the appropriate format for the student. Reading lists should be prioritised, as conversion of books into an alternative format is a time consuming and expensive task.
- Lecture notes and handouts should be provided in advance and in the student’s preferred format or in a format that can be easily converted by the student.
- Ensure that students with visual impairments are notified of organisational changes.
- Convey orally whatever you have written on the board or shown on overheads.
- If you are planning to use a video tell the student and discuss alternative ways to approach the information that the student may miss.
Exam accomodations

- Use of a computer with appropriate magnification / screen reading software for vision impaired students.
- Use of scribe. Provision of a scribe should be a temporary support until the student’s keyboard skills improve.
- Extra time.
- Examination paper available in correct format – enlarged text, Braille etc.
- Reader.

<table>
<thead>
<tr>
<th>Blind or vision impaired Quiz</th>
<th>Yes?</th>
<th>No?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Should you feed a guide dog when he/she is working?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Should you read out what is on Powerpoint slides?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are smokers more likely to develop cataracts?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Yes 2. Yes 3. Yes
Deaf / Hard of Hearing (HOH)

Hearing loss is measured in decibels hearing level (dBHL). A person who can hear sounds across a range of frequencies at 0 to 20dB is considered to have normal hearing. The thresholds for the different types of hearing loss are as follows:

- **Mild**: 25 – 39 dBHL
- **Moderate**: 40 – 69 dBHL
- **Severe**: 70 – 94 dBHL

Profoundly deaf people, who cannot hear sounds quieter than 95dB, often communicate using sign language and lip reading. Some D/deaf people use cochlear implants or hearing aids, which allows for some oral communication.

Some D/deaf individuals identify themselves as members of an Irish linguistic and cultural minority and not as individuals with a disability. Irish Sign Language (ISL) is the principal form of communication for D/deaf people in Ireland and is usually regarded as a D/deaf person’s first language. Sign language arose from within D/deaf communities and was developed by D/deaf people themselves. It is NOT an artificial tool devised by hearing people, or an incomplete form of English on the hands – it is a full and complete language.

More information is available from DeafHear at [http://www.deafhear.ie](http://www.deafhear.ie) or by calling 01 817 5700.

**Impact on learning**

Student may have significant difficulties with learning and communicating through English such as:

- Reading for meaning; including lecture notes, assignments and reference notes.
- Linguistic difficulties and difficulties writing fluently and expressively in English.
- Restricted English vocabulary, errors in grammar and spelling.
- Misinterpreting information particularly where there is possible ambiguity in terminology.
- Speed of work is slower due to difficulties with reading comprehension and written expression. As a result the student may have difficulty meeting deadlines.
- Student may have difficulty completing assignments if they have missed information during lectures or classes.
- Student may have difficulty communicating orally and participating in group activity.
- Student may miss out on information during lectures or classes.
- Student may have feelings of isolation.
- Student may have greater risk of accidents because they may not hear warnings.

Guidelines regarding sign language interpreters

- Please ensure that the interpreter receives a copy of any handouts or materials to be used.
- Interpreting is a highly concentrated and tiring task. An interpreter will need to take breaks during lectures that are long or very intensive. A 10 minute break after every 50 minutes of continuous interpreting is recommended.
- In some instances two interpreters may cover lectures that are particularly long and intensive.
- The student will have a number of different interpreters each week and may have more than one interpreter on busy days.
- Ensure that the lecture hall is well lit so that the student can see the interpreter clearly.
- When communicating speak and look directly at the D/deaf person. The interpreter will convey the message in the first person and will communicate the meaning and content of what you are saying.
- Speak to one person at a time in group situations. The interpreter can only interpret for one person at a time.
- During lectures the interpreter will sit at the top of the class and the student will be seated in the front row.
- Avoid walking between the interpreter and the student – this is an interruption.
- Allow for the additional time that it takes the interpreter to translate a message from its original language into another language.
- Be mindful not to engage the interpreter in conversation while they are interpreting.
- Avoid words such as “this” or “that” when referring to something being demonstrated. Since the student’s eyes are focused on the interpreter by the time they look at what you are referring to, they will have missed it. Instead, identify objects by name.
- Be aware that sign language is not a word-for-word rendition of English. Often sign language does not have signs for specialised or technical words and the interpreter will need to fingerspell these words. It can be helpful to define these terms and list any new vocabulary on the board or on handouts.
- Similar to a student asking a question during a lecture, the interpreter may seek clarification on a particular point in order to explain it more clearly to the student.
- Be aware that interpreters cannot actively participate in communication during a session.

How you can help
- Please refer to the section on Inclusive Teaching and Assessment.
- D/deaf students are at a distinct disadvantage during lectures as the medium of teaching is through the spoken word. D/deaf students also have significant difficulties learning through English and find reading comprehension and written expression particularly challenging. Inclusive teaching practices will help to alleviate the disadvantage of learning through English.
- Very often the interpreter and the student will encounter new words during a lecture that have no corresponding sign in ISL. The flow of the lecture is interrupted as the interpreter either finger spells the word or agrees a new sign with the student. Provide a list of new technical terms so that new signs can be agreed in advance of lectures.
- Repeat questions or remarks from other people in the room.
- Ensure that both the student and the interpreter have a copy of all handouts before the lecture.
- D/deaf students can only attend to one source of information at a time i.e. the lecturer (via the interpreter) or the visual aid (overheads, slides etc.).

Exam accommodations
- Extra time in exams.
- Interpreter present for all exams to translate exam questions into ISL and communicate with invigilators etc.
- Exam questions should be reviewed to ensure that the language used is linguistically friendly, i.e. accessible to D/deaf students. Language may need to be modified if deemed confusing or ambiguous, e.g. the signs for ‘compare’ and ‘contrast’ are identical in ISL.
- Multiple choice questions can be problematic for D/deaf students as often the subtleties between questions do not translate well into ISL. An alternative to multiple choice questions may be necessary.
- Use of a computer.
- Students with a hearing impairment should sit near the front of the examination hall and the invigilator should be aware that the student may miss verbal instructions.
- Where written expression is significantly restricted the option of a signed exam to video may need to be considered.
- More emphasis / weighting on continuous assessments may need to be considered.

<table>
<thead>
<tr>
<th>D/deaf/hard of hearing Quiz</th>
<th>Yes?</th>
<th>No?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Are all deaf people dumb?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is Irish Sign Language an actual language?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Should all people who are hard of hearing wear aids?</td>
<td></td>
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</tbody>
</table>
Epilepsy

Epilepsy is caused by abnormal electrical impulses in the brain, which result in recurring seizures. These seizures can vary from person to person and for most, epilepsy will only affect them for a short period in their lives. For others, however, the consequences can be more lasting. Most seizures are controllable through medication. There are two categories of seizures – generalised or partial.

1. A generalised seizure means that the whole brain is affected and the person invariably loses consciousness. The seizure usually ends naturally after a few minutes. On returning to consciousness, the person may feel confused and sleepy but many people are able to resume their normal activities after resting for a short while.

2. A partial seizure means that only part of the brain is affected and the person may remain conscious throughout the seizure.

Only about 3-5% of people who have epilepsy are photosensitive and may have a seizure in response to flickering lights e.g. strobe lights, or even the flickering of sunlight through trees. Most people can use computers safely provided some minor adjustments are made (such as a LCD screen).

More information on epilepsy is available from Brainwave at http://www.epilepsy.ie or by calling 01 455 7500.

Guidelines regarding seizures

Major Seizure:
At the start of the attack the person may cry out, usually stiffens and then falls. Their arms and legs may jerk or twitch. You will not be able to rouse them (and do not attempt to). Seizures mostly last a few minutes, but can sometimes go on for much longer. During the seizure the person will often go blue in the face. There is nothing you can do about this until the attack is over.
During the Convulsive Seizure DO NOTHING except:

- Make the person comfortable (lying down) and put something soft under their head if you can. Only move the person if they are in a dangerous place, such as, on the road or by a fire.
- Keep other people away.
- DO NOT put anything into their mouth.
- DO NOT attempt to rouse the person.

At the end of an attack:

Twitching will stop. The person usually takes a deep breath, the blue colour goes and they slowly wake up. The person is often muddled and will not know where they are for a short while afterwards. They may well be wet and soiled.

- DO stay with the person. Talk to them quietly until you are certain that they can find their way home.
- DO NOT try to wake the person up. Let them come to in their own time.
- DO NOT give them anything to drink until you are sure that they are fully awake.
- DO NOT send for an ambulance except in the following cases: one seizure runs into another; the person does not wake up after five minutes (they may be carrying a card which tells you how long they take to wake up); they are having trouble breathing or they are injured.

If, at the end of the seizure, they remain blue or are struggling for a breath:

- Put your fingers under the angles of their jaw and lift it forward.
- Put your fingers gently into their mouth and check that their dentures or tongue are not blocking the back of their throat. DO NOT attempt this during a seizure.
- Roll the person onto their side with their chin raised.
- Perform mouth-to-mouth resuscitation if the above steps have not worked. This will not be necessary very often.
Impact on learning

- Learning can be affected if epileptic activity takes place without any obvious outward signs.
- The medication used to control seizures can cause a variety of side effects including drowsiness, aches and pains, restlessness, nausea, dizziness, disorientation and difficulties with concentrating and remembering.
- Memory or concentration problems related to their epilepsy or may be side effects of medication.
- Absence from college following a seizure.

How you can help
Please refer to the chapter on *Inclusive Teaching and Assessment*.

Exam accommodations

- Students may perform well below their capability for several days before or after a seizure.
- Extra time.
- Rest periods during the exam.
- Permission to eat or drink during the exam.

<table>
<thead>
<tr>
<th>Epilepsy Quiz</th>
<th>Yes?</th>
<th>No?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Should you place a spoon in the mouth during a seizure?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Are people with epilepsy banned from driving?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Epilepsy Quiz

- 1. No
- 2. No
- 3. No
Medical Conditions

Some students have ongoing medical conditions which may impact on their studies. These are often referred to as ‘hidden disabilities’ and examples include Diabetes, ME, Haemophilia, Cystic Fibrosis, Chronic Fatigue Syndrome, Crohn’s Disease and many more. Many conditions may be stable, others may be variable and some will be progressive. The impact on the student depends on the severity of the condition, but in most cases stamina is affected.

Impact on learning
- Student may have recurrent or long-term absences from College due to hospitalisation.
- Student may be unable to attend or complete lectures due to fatigue. A full day of lectures and long exams will be very tiring.
- Student may have difficulties with concentration and completion of tasks or assignments due to exhaustion.
- The medication used to control various medical conditions can cause a variety of side effects including drowsiness, aches and pains, restlessness, nausea, dizziness, disorientation, and difficulties with concentrating and remembering.
- Some students may have difficult walking, climbing stairs, or remaining in one position for long periods of time. Writing and other fine motor activities may also be affected.

How you can help
- Please refer to the chapter on Inclusive Teaching and Assessment.
- Allow for the time and fatigue factors that may arise as the student moves between lectures.
- Be conscious that the student may tire easily and may require rest periods / breaks during lectures, tutorials or class tests.

Exam Accommodations
Student may require some or all of the following:
- Extra time.
- Rest periods during the exam.
- Use of a computer or scribe.
Mental Health Difficulties

Mental health difficulties are as common as heart disorders and three times more common than cancer. Although figures and definitions vary, it is clear that thousands of people in Ireland will themselves encounter difficulties, or know someone encountering difficulties.

Mental health difficulties include anxiety, obsessions, phobias, depression, bipolar depression, eating disorders and schizophrenia. Many difficulties are temporary and may respond to rest, counselling or medication. Individuals may also experience long term difficulties which are interspersed with periods of good and poor health. The most common symptoms of mental health difficulties are social withdrawal and depression.

Impact on learning – student may:
- have difficulties concentrating during class.
- be unable to organise their time effectively.
- be unable to complete assignments on time.
- be absent from college for prolonged periods.
- have problems attending class or studying due to side effects of medication, e.g. drowsiness, gastrointestinal upsets.

How you can help
- Please refer to the section on Inclusive Teaching and Assessment.
- Assessments, particularly when formal (assignments and examinations), can be stressful and cause the student to perform below standard. Practice, reassurance and possible extensions on assignments may help a student to overcome this.
- For many students, a condition may be variable and they may experience periods of particular difficulty. This may require some understanding and flexibility.
- The combined effects of medication and the disturbed sleeping patterns of many people with mental health difficulties can affect a student’s ability to participate and to keep up-to-speed with College work. Flexibility around deadlines is recommended.
- People are not always willing to open up about their problems but you can help by offering to listen whenever they feel ready to talk.
- If you do not feel equipped to help, encourage them to talk to a
professional or expert. Offer to arrange an appointment with the Student Counselling Service, Disability Services or the College Health Centre.

Exam accommodations
- Separate room.
- Extra time.
- Rest breaks during the exam.
- Permission to eat / drink during the exam.

<table>
<thead>
<tr>
<th>Mental Health Quiz</th>
<th>Yes?</th>
<th>No?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Do mental health problems cause trouble concentrating?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Can medication control mental health difficulties?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are all schizophrenics dangerous people?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Yes</td>
<td>2. No</td>
<td>3. No</td>
</tr>
</tbody>
</table>

DAWN Handbook  page 37
Physical disabilities

Physical disabilities can be caused by anything from arthritis to amputation to spinal cord injury. People with physical disabilities are more likely to be challenged by the physical environment and or the attitudes and beliefs of society than by the disability itself.

Cerebral Palsy (CP) is a result of injury to the largest part of the brain, the cerebrum. It is characterised by impaired muscular function.

Multiple Sclerosis is a progressive disease of the central nervous system characterised by decreased nerve function.

Muscular Dystrophy is a group of inherited disorders characterised by the deterioration and wasting of muscle fibres.

Spina Bifida or Hydrocephalus can occur when one or more vertebrae in the spine fail to form properly in early pregnancy. When this happens, the nerves in the spine may be unprotected and this can lead to damage to the central nervous system.

Impact on learning

- Physical access.
- Difficulty writing, holding or manipulating objects, and carrying out specific tasks.
- Those who use wheelchairs, calipers, crutches, canes or prostheses often find it difficult moving about especially within the time constraints imposed by timetables.
- Decreased stamina.
- Transport difficulties.
- Student may be absent from college for hospital appointments.
- Fatigue and weakness leading to problems completing exams / lectures etc.

How you can help

- Please refer to the section on Inclusive Teaching and Assessment.
Allow for the time and fatigue factors that may arise as the student moves between lectures.

Be conscious that the student may tire easily and may require rest periods or breaks during lectures, tutorials or class tests.

Never push a person’s wheelchair without their permission – offer help if you think it is required but do not impose it.

When talking to a person who uses a wheelchair sit down (if possible) so that you are both on the same level.

People who walk using sticks or crutches may appreciate help with carrying belongings or opening doors

Try to keep walkways, corridors and aisles free from obstructions.

When walking with a person who uses crutches or a wheelchair adjust your pace to match theirs.

Exam accommodations

Extra time.

Rest periods during the exam.

Use of a computer or scribe.

Permission to eat / drink during the exam.

Ergonomic furniture.

<table>
<thead>
<tr>
<th>Physical disabilities Quiz</th>
<th>Yes?</th>
<th>No?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is impaired muscle function characteristic of CP??</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Do physical disabilities affect a person’s stamina?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Do self-propelled wheelchairs solve access problems?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Yes 2. YES 3. NO
Specific Learning Difficulties

Specific Learning Difficulties (SpLD) is a term given to a number of conditions that affect a person’s ability to learn. SpLD are characterised by particular difficulties with one or more of the processes required for fluent reading, writing and number work. They might include difficulties with memory, organisation and co-ordination. People with SpLD have average or above average intelligence, but they perform less well in some aspects of learning than in other activities. Examples of SpLD are dyslexia, developmental coordination disorder, dyspraxia and dyscalculia, with dyslexia being the most commonly diagnosed. The characteristics of these conditions overlap and vary in degree between individuals.

Those affected by dyslexia, developmental coordination disorder (dyspraxia) and dyscalculia or any combination of these learning difficulties, often underachieve within the education system unless they receive appropriate support enabling them to minimise their weaknesses and utilise their strengths. Many underperform in examinations.

Dyslexia

Dyslexia is a language based learning difficulty and refers to a cluster of symptoms which result in people having difficulties with specific language skills. Although individual cases vary, many people with dyslexia can experience difficulties in at least one of the following areas:

- Memory
- Reading
- Writing
- Spelling
- Handwriting
- Maths
- Organisation
- Speech
While many people with dyslexia share the above difficulties, it is worth remembering that the condition can vary greatly in its symptoms from one person to another. Hence, make no assumptions about a student’s requirements – ask them what support they need. Many students with dyslexia have developed compensatory strategies to cover their difficulties. This allows many to cope well with their coursework. For others, however, the demands placed on them at third level mean that they may have to abandon old habits and develop new coping and learning strategies.

More information on dyslexia is available from the Dyslexia Association of Ireland at http://www.dyslexia.ie or by calling 01 679 0726.

**Developmental Coordination Disorder (Dyspraxia)**

A student with Developmental Coordination Disorder may experience difficulty in the organisation of movement, often appearing clumsy. Gross motor skills (related to balance and co-ordination) and fine motor skills (relating to manipulation of objects) are hard to learn and difficult to retain and generalise. Writing is particularly laborious and keyboard skills can be difficult to acquire. Individuals may have difficulty organising ideas and concepts. Pronunciation may also be affected and people with Developmental Coordination Disorder may be over- or undersensitive to noise, light and touch.

**Dyscalculia**

Dyscalculia is a learning difficulty involving the most basic aspect of arithmetical skills. The difficulty lies in the reception, comprehension, or production of quantitative and spatial information. Students with dyscalculia may have difficulty in understanding

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<thead>
<tr>
<th>Dyslexia Quiz</th>
<th>Yes?</th>
<th>No?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does every dyslexic have different problems?</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>2. Can dyslexia be cured?</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>3. Can you become dyslexic during your life?</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dyscalculia Quiz</th>
<th>Yes?</th>
<th>No?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Can you have both dyslexia and dyscalculia?</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>2. Does dyscalculia affect your IQ range?</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>3. Does dyscalculia affect 10% of the population?</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>
simple number concepts, lack an intuitive grasp of numbers and have problems learning number facts and procedures. These can relate to basic concepts such as telling the time, calculating prices and handling change.

Impact on learning
The characteristics of SpLD overlap and vary in degree between individuals. Characteristics include:

- Limitations in short-term memory and cognitive processing mean that they have difficulty following sequences or complicated directions and with integrating material from a number of sources.
- Information overload leads to confusion resulting from having more ideas than they can translate into acceptable words or structures.
- Difficulties with ‘search and locate’ strategies and in independent learning generally.
- Slow reading rate and comprehension creates difficulties where students must deal with a large amount of material in a short space of time, or when many new words or concepts must be learned and incorporated into understanding.
- Heightened anxiety levels are common in test or performance situations – anxiety about performing in front of others may affect participation in tutorials.
- First year students, in particular, may find the unstructured freedom of third level uncomfortable in comparison to the structured, controlled environment of the school system and will need input to help them plan and manage their time effectively.

Despite their individual characteristics, students with SpLD are known to share a common learning style, which is characterised by:

- A tendency towards holistic thinking (looking for overall patterns and relationships and different sides to a situation or task).
- Original and lateral problem-solving skills.
- Developed visual or spatial skills.
- A preference for intuitive non-rational thought rather than rational explanations.
- A reliance on long-term memory and a need to associate ideas in order to fit them into memory.
A need to compensate for poor short-term memory by over-learning facts.

Difficulty in tracking direction and time and using numbers.

**How you can help**

*During Lectures*
- Please refer to the section on *Inclusive Teaching and Assessment*.
- Be sensitive of possible self-consciousness by the student about speaking or reading aloud in lectures and tutorials.

*Written Material*
- Keep writing style clear and concise.
- Try to use printed text rather than handwritten notes.
- Keep the layout clear and simple.
- Avoid patterned backgrounds.
- A clear font such as Arial or Comic Sans is easier to read than a serif font such as Times Roman.
- Don’t use too many font styles.
- Try not to use dense blocks of text – use paragraphs, headings and subheadings, bullet points, numbered lists etc.
- Highlight text by using bold font, rather than underline or italics.
- Avoid red and green ink, as these colours are particularly difficult to read (this will also benefit those students who are red-green colour-blind).
- Use alternative ways of presenting information as well as text — flow charts, diagrams, graphs etc.

**Exam accommodations**
- Academic departments will be informed that the student has difficulties with spelling and grammar as well as syntax, structure and cohesion. Departments receive guidelines for the correction of examination scripts and continuous assessments
- Extra time.
- Use of a computer or scribe.
- Reader.
References


2 The ‘Power of Language’ is taken from Guidelines for Disability Advisors (2008), Queen’s University Belfast.

3 All figures are taken from AHEAD (2008), Participation Rates of Students with Disabilities in Disabilities in Higher Education 2005/06, Dublin, AHEAD Education Press.

4 ‘Inclusive Teaching and Assessment’ is taken from Guidelines for Disability Advisors (2008), Queen’s University Belfast.

5 Good Practice Guidelines for Marking the Work of Students with Dyslexia (2008), Oxford Brookes University.

6 ‘First Aid for Seizures’ leaflet by Brainwave, the Irish Epilepsy Association.
This Handbook is a resource for academic staff, informing them of the help available to accommodate students with disabilities. The Handbook gives guidelines on how teaching and learning methods can be easily adapted to maximise the inclusion of students of all abilities. In the second part of the Handbook, information about different types of disabilities is listed, along with recommendations on how to accommodate them.

The Disability Advisors Working Network (DAWN) is the professional organisation for Disability Officers supporting learners with disabilities in higher education in Ireland. DAWN has produced this handbook with the assistance of a number of organisations involved in supporting people with disabilities.

The National Academy for the Integration of Research & Teaching & Learning is a collaborative initiative between University College Cork, Cork Institute of Technology, National University of Ireland Galway, Trinity College Dublin and Waterford Institute of Technology. NAIRTL is supported by the Higher Education Authority through the Strategic Innovation Fund.