



Part I: Follow-up Assessment Report Template

Date of Follow-up Report Submission: October 11, 2021

Name of Department / Unit: Center for Students with Disabilities

Name of Contact Person: Lavonne Kopca

Name of Person(s) Completing Follow-up Report: Lavonne Kopca

I. Follow-Up on Last Year's Assessment Report Recommendations

- *Recommendation #1: Organize a committee comprised of CSD staff who facilitate the Student Success Group (SSG) and the advisor of the Delta Alpha Pi (DAPi) Honor Society to design research-based learning experiences intended to foster a sense of belonging in college students with disabilities.*

Specific Actions: As noted in the 2019-2021 CSD Assessment Project, the recommendations and action plan could not be successfully implement during the 2020-2021 academic year due to the COVID-19 pandemic. Therefore, target dates were delayed until the 2021-2022 academic year. As of this writing, four CSD staff members have been identified to sit on the committee and meetings have been scheduled for the Autumn 2021 term. The committee is charged this term with identifying key themes in the literature related to understanding the benefits of engaging in supportive social groups in order to foster a sense of belonging in the university learning community for students with disabilities.

Results: By the end of the Autumn 2021 term, the established committee will propose 4-5 core concepts for developing a sense of belonging around which to design programming for the SSG and the DAPi Honor Society. These will be further developed in the winter and spring 2022 terms when faculty/staff partners from throughout the University are invited to join the committee.

- *Recommendation #2: The CSD committee established to create evidence-based practices to foster a sense of belonging for program participants should collaborate with select institutional partners to bring a variety of activities to these programs to meet the diverse needs of CSD students and challenge successful students to go further in internalizing the benefits of a supportive social community to meet their individual needs.*

Specific Actions: This writer has been in communications with faculty member Kelly Tzoumis who collaborates with faculty member Kent Klaus on a DePaul grant, AGIF, to recruit learners with disabilities. Dr. Tzoumis has expressed interest in partnering with our committee to achieve our similar goals. Dr. Tzoumis indicated Dr. Klaus is also interested in collaborating with our committee to further our shared interests. Additional committee members will be identified for the final phase of committee work for spring 2022 term.

Results: In-progress – delayed due to COVID-19 combined with staff shortages in the CSD.

- *Recommendation #3: Explore external support programs that have a high-touch format to provide more intensive services for students with communication and social needs that impede their ability to engage in supportive social groups so that students with ASD and mental health challenges have the necessary resources to help them thrive academically, socially/emotionally and developing a career identity to build on the SSG programming.*

Specific Actions: CSD Graduate Interns are conducting research on external agencies and organizations that align with SSG programming that will provide low or no-cost skill-building opportunities for SSG or CSD students in general that will allow for additional opportunities for students to engage in supportive social groups to foster a sense of belonging and improve academic, personal, and career outcomes for participants. The GIs are focusing their work in three external areas: 1.) Institutions of higher education, such as the CANS- the Coalition for Autistic and Neurodivergent Students available through the University of Illinois Chicago. CANS is open to all students who identify as autistic or neurodivergent, including those with Asperger's, intellectual disability, learning disability, psychiatric disabilities, or other neurodivergent conditions and across all levels of college education from junior college to grad school. 2.) Government agencies such as the Department of Rehabilitation Services (DRS), the Illinois Board of Higher Education (IBHE), or The Autism Program of Illinois (TAP). 3.) Local grass-roots non-profit organizations such as the Chicago Autism Connection or the Illinois Center for Autism.

Results: Graduate interns will produce a report outlining their research at the end of each term of the 2021-2022 academic year. This report will inform the work of the committee that will produce a formal curriculum for the SSG to be used with the group for the 2022-2023 academic year.



Part II: Annual Assessment: Student Needs

Academic Year: 2020-21

Date of Report Submission: October 11, 2021

Name of Department: Center for Students with Disability

Name of Contact Person: Gregory Moorehead, Director

Name of Person(s) completing report or contributing to the project: Gregory Moorehead

Abstract

The COVID-19 pandemic has significantly impacted higher education, and students with disabilities, particularly students with anxiety disorders have been impacted in ways that are noticeably different from the general student population. This project was designed to identify the needs of students enrolled with the Center for Students with Disabilities (CSD) with anxiety as a diagnosis and: how the various modalities of course delivery impact levels of anxiety; student needs; which services they utilize; and the perceived effectiveness of those services and activities. A survey was designed and emailed to students during Spring Quarter 2021. There were 542 enrolled with the CSD with anxiety as a diagnosis. Of those, 36 completed the survey. Our findings showed that students enrolled in asynchronous courses reported better levels of anxiety than students enrolled in courses delivered in alternate modalities. The findings also show that students who participated in support groups perceived the effectiveness of those services more beneficial than the other support services or activities provided by the CSD.

Assessment Question

What impact did the COVID-19 pandemic have on CSD students with anxiety as a diagnosis?

Introduction & Context

Project Overview

This project seeks to identify the needs of CSD students with anxiety; the CSD services and activities those utilized, and the perceived effectiveness of those services and activities in relation to their needs.

Data Collection & Methodology

Population and Sample

A survey was emailed to CSD students with anxiety as a diagnosis. There were 542 students with that classification at the time the survey was designed. The survey was comprised of three areas: There were 36 students who completed the survey. Descriptive Statistics (i.e. raw numbers and percentages) were used to summarize the data collected. This population was selected because of the anecdotal experiences shared with CSD staff during the COVID-19 pandemic. These students frequently reported increased anxiety, and the barriers it presented in regards to attending class, participating in class, completing assignments and meeting deadlines. To assess needs we looked participation and perceived effectiveness across three

services/activities provided by the CSD: Walk-in appointments/meetings with administrative staff, clinician sessions, and student groups.

Data & Findings

Course Delivery Modality

Question: How would you rate your anxiety when attending class?

44% (6/36) indicated that their anxiety was much better, or somewhat better when taking in-person classes.

19% (3/36) indicated that their anxiety was somewhat better when taking synchronous courses.

47% (10/46) indicated that their anxiety was much better or somewhat better when taking asynchronous courses.

Students with anxiety have needs that mirror our assumptions about their needs. When students were asked based upon the courses they took how they would rate their anxiety based upon the type of class, Students reported better or much better anxiety in asynchronous courses. Relative to in-person or synchronous courses.

Student Needs

Question: It is difficult to ask for help?

Yes: 69% (25/36)

No: 31% (11/36)

Yes/No: It can be difficult for me to focus.

Yes: 92% (33/36)

No: 8% (3/36)

Yes/No: I can procrastinate because my work may not be good enough.

Yes: 78% (28/36)

No: 22% (8/36)

Yes/No: I worry what others might think about me.

Yes: 83% (30/36)

No: 17% (6/36)

Utilization

Was some sort of student support utilized by the students?

19% (7/36) had regular meetings with CSD Clinicians

42% (15/36) had walk-in assistance/meetings with administrative staff member

36% (13/36) Participated in CSD student support groups

42% (15/36) did not participate or seek assistance

Effectiveness of Support

71% of the students who used the clinician services rated them extremely effective or very effective.

60% of students who had walk-in meetings rated them extremely or very effective.

92% of the students who participated in CSD support groups rated them extremely or very effective.

Needs of students who participated in any activity

When we look at students who participated in the CSD support groups:

69% said that it's difficult to ask for help.

100% said it's difficult to focus.

77% said they procrastinate because their work may not be good enough.

77% worry about what others might think of them.

Support groups are considered very effective and they may be effective in helping students address one or more of these needs. There is no empirical data to support this claim, but it does provide a framework for thinking about which services may be more effective in addressing students 'needs.

Explore needs of students who participated in meeting with CSD administrative staff

73% said that it can be difficult to ask for help.

100% said that it is difficult to focus.

60% said they procrastinate because their work may not be good enough.

60% said they struggle because of what others may think of them.

Explore needs of students who participated in meeting with clinician staff

71% said that it can be difficult to ask for help

100% said that it can be difficult to focus

71% said that they procrastinate because their work may not be good enough.

71% worry about what others might think of them

Effectiveness of services utilized

Asking for help

60% of the students who say that they struggle asking for help said that clinician services were very effective.

63% who say they struggle asking for help found walk-in appointments with administrative staff extremely or very effective.

100% of students who struggle asking for help found student support groups extremely or very effective.

Focusing

71% of students who said they have difficulty focusing said that clinician services were extremely or very effective.

60% of students who said they have difficulty focusing said that walk-in meetings were extremely or very effective.

92% of students who said they have difficulty focusing said that student support groups were extremely or very effective.

Procrastination

60% of students who struggle with procrastination found clinician services extremely or very effective.

67% of students who struggle with procrastination found clinician services extremely or very effective.

100% of students who struggle with procrastination found student support groups extremely or very effective.

Worry about perception of others

60% of students who worry about how they are perceived by others found clinician services extremely or very effective.

67% of students who worry about how they are perceived by others found walk in meetings with administrative staff extremely or very effective.

90% of students who worry about how they are perceived by others found student support groups extremely or very effective.

Discussion

The findings show that students prefer asynchronous courses over other modalities which aligns with the experiences students with mental health concerns have shared with CSD staff since the start of the pandemic. Students with some mental health concerns find social settings stressful. Asynchronous course allows students to attend class without the stress of being in a classroom with other students and the instructor. Unlike in-person or synchronous courses, students don't have to worry about being seen by faculty or classmates so at least that source of stress is eliminated.

Based upon what we know about students with mental health concerns from neuropsychological testing we would expect that those students would have some difficulty: focusing, asking for help, procrastinating, and worrying about what others may think about them. Supporting students with these diagnoses is far more complex than supporting students with cognitive or physical disabilities, due to the episodic nature of the symptoms involved. The CSD has developed an accommodation to assist these students which requires that they contact their professor and their CSD Advisor whenever they are unable to attend class or meet a deadline for an assignment due to the severity of their symptoms. As soon as those symptoms abate the student is required to follow up with the instructor to inquire about the possibility of making up any missed credit. Even with this accommodation in place we often find that: 1) Students do not contact their professors or CSD Advisor when they cannot attend class or meet a deadline for assignment due to their symptoms. Instead students simply do not attend and fail to communicate/ask for help. 2) We find that student will delay/procrastinate communicating with their instructor or CSD Advisor. This often means that students are absent for extended periods and the instructor and the CSD advisor only learn after the fact that it was due to their disability.

The CSD offers different services to assist students: Walk-in appointments/meetings with administrative staff; clinician appointments, and small student group meetings. The largest number of respondents utilizing services were those who took advantage of walk-in appointments with administrative staff. This finding isn't surprising because this is a service available to every student enrolled with the CSD, and no application or appointment is required unlike the other services.

Student Support Groups were the next most utilized of services mentioned by students. This is a bit surprising because the CSD only has one official student group run by clinicians, as well as

an honor society for students with disabilities (Delta Alpha Pi). Participation in the former group is limited to very modest number of students. Traditionally this group has served no more than 9 students annually. Thus, it's counter-intuitive this would be the second most utilized service offered by the CSD. We will need to look a bit more closely verifiable data to determine in which groups these students are referencing.

Clinician Services was the group least utilized by respondents. This finding is rather surprising because, annually, 100-140 students are served by clinicians in one-on-one weekly meetings with students.

As many respondents indicated that they utilized no services as the number of respondents that indicated that the used walk-in appointments.

When it came of effectiveness of the services used by students, the findings were again inconsistent with conventional notions held by CSD staff. Let's start with which service students reported as the most effective, Small Groups. Again this is surprising for a couple of reasons: 1) Because of the limited number of small group activities provided by the CSD; and 2) The relatively recent advent of this type of service when compared to walk-in appointments and clinician services both of which have a much longer history in the department.

Across all of the stated needs: focusing, asking for help, procrastination, and worrying about what others think, Small Groups came out on top in terms of effectiveness. Perhaps it's not altogether surprising however in that this setting allows students to learn from each other, and share from their own experiences in regards to their focusing concerns. At the same time this setting provides perhaps a more favorable setting where students can model some of the desirable behaviors in relation to asking for help. This setting can also allow students to build their confidence in demonstrating help-seeking behavior in a safe environment. Further, this model also suggests some opportunities for more effective utilization of limited resources in addressing students' needs.

One-on-one instructions and services for students have for many years been the preferred model even though resources often cannot support such designs. Thus it was surprising to find that clinician services were not deemed the most effective among respondents. Clinician Services are designed so that students meet with the same clinician in a one-to-one setting, each week of the term. These findings suggest that clinician services could be supported by more Student Support Group activities.

Walk-in Appointments were the least effective according to respondents. This finding isn't necessarily surprising because unlike clinicians and Student Group activities, administrators have little preparation for the concerns the student will present since these meeting are impromptu. Additionally, in these settings students are often presenting concerns that are sufficiently complex and cannot be effectively addressed by the other methods. These discussions also frequently include intervention and/or collaboration from other campus offices. The lack of preparation, the impromptu nature of the meeting along with the complexity of the matters being discussed diminish the possibilities for satisfactory resolution in many instances.

Recommendations

CSD staff should refine and sharpen their skills in relation to working with students with anxiety. Staff should review how they engage, advise and support those students in relation to their condition.

In supplemental advising sessions with students CSD staff should consider encouraging students with anxiety to consider asynchronous courses. The CSD director may also consider sharing this finding with DePaul Advising Network, but caution should be employed in sharing this message due to the small N.

The CSD may consider expanding the number of student groups to complement walk-in appointments and clinician meetings in relation to addressing students' needs. For instance when student sign up for clinician sessions could some Student Support Group activities be a part of the services the CSD provides for a fee? Perhaps there's student group activities which address focusing, asking for help, avoiding procrastination and managing worries about others perceive. These activities could be strategically scheduled at critical junctures in the term.

The CSD could also consider partnering with other campus departments to offer student group activities in a small setting. Making this kind of resource available more broadly would be consistent with best practices incorporated in Universal Design. Creating opportunities for professionals with skills and experience in working with students with disabilities in a general population setting also works to reduce the stigma associated with accessing such services while providing support to some students with these challenges who may or may not have disabilities and may or may not be enrolled with the CSD. In this model students may come to different people with different needs. Thus, when students mention that they struggle with procrastination or what others may think of them, those student may be referred to the support group. This means that we have one staff member working with a support group, rather than several staff members in one-on-one individual sessions. Thus, can we be more judicious in tasking clinicians, administrative staff and others with supporting students with anxiety.