

# *National Capacity Building Institute Proceedings*

*When*

Wednesday, March 31 and  
Thursday, April 1, 2004

*Where*

Sheraton Waikiki  
Honolulu, Hawai'i

Issues of Transition and Postsecondary Participation for Individuals with

# **Hidden DISABILITIES**

Sponsored by:

**National Center on Secondary Education  
and Transition**, University of Minnesota

**National Center for the Study of Postsecondary  
Educational Supports**, University of Hawai'i



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## **“Issues of Transition and Postsecondary Participation for Individuals with Hidden Disabilities”**

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**National Center for the Study of Postsecondary Educational Supports**  
University of Hawai'i



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## Introduction

The National Capacity Building Institute on **Issues of Transition and Postsecondary Participation for Individuals with Hidden Disabilities** was held in Honolulu, Hawai'i, on March 31 and April 1 of 2004. It was co-sponsored by the National Center on Secondary Education and Transition (NCSET) and the National Center for the Study of Postsecondary Educational Supports (NCSPEs).

Prior to the Institute, participants had an opportunity to read and discuss papers written by scheduled presenters, and to raise issues and questions both with the authors and with one another. Excerpts from those dialogues are included in these proceedings, and both the speaker papers and the full content of the discussions are available online at [www.ncset.hawaii.edu](http://www.ncset.hawaii.edu) **For alternative format copies of these proceedings**, please contact Velina Sugiyama, Administrative Assistant, Center on Disability Studies, University of Hawai'i, 1776 University Avenue, UA 4-6, Honolulu, HI 96822. Tel. 808-956-5688. E-mail: [velina@hawaii.edu](mailto:velina@hawaii.edu)

During the Institute, presentations by invited speakers were interwoven with facilitated small-group discussions. Each of the eight discussion groups brought together people from a range of experiential, professional, and identity-based backgrounds. Participants had the opportunity to dialogue, clarify issues, and generate recommendations for research, policy, and practice. Seven key themes emerged from these dialogues:

1. Preparation needs for post-secondary, workplace, and adult living;
2. Issues of equity and universal access;
3. Culturally grounded awareness and resources;
4. A need for increased coordination, communication, and partnerships;
5. Self-advocacy, action, and choice;
6. Awareness, education, and the need to dispel myths; and
7. Assistive technology and other tools.

A common thread throughout was a growing recognition of the need to ensure both cross-disability and broad-based multicultural representation. Participants also expressed a consistent desire for more concrete, tangible models and strategies that work, as well as for greater efforts to provide holistic and centralized services and resources.

We would like to thank all of the speakers and participants for enriching, inspiring, and educating our communities! Please look for information on upcoming Institutes on the NCSET website, and join us in continuing this work!

**March 31<sup>st</sup> & April 1<sup>st</sup>**  
**Capacity Building Institute Agenda**

| <b>WEDNESDAY</b> | <b>ACTIVITY</b>   | <b>LOCATION</b>                         |
|------------------|---|---|
| 8:30-9:00am      | <i>Registration and Continental Breakfast</i>   | Lanai Ballroom                          |
| 9:00-9:30am      | <i>Introduction - David Johnson and Madeline Harcourt</i>   |   |
| 9:30-10:30am     | <i>Embracing the Monster: Running from the Past and Into Reality - Veronica Crawford</i>  |   |
| 10:30-11:00am    | <i>Short Break and Group Introductions</i>  |   |
| 11:00-Noon       | <i>Learning Disabilities and Assistive Technology: Choosing and Using Technology as a Creative Learner - Christopher Lee</i>                          |   |
| Noon-1:00pm      | <b>Lunch</b>  | Molokai Ballroom                        |
| 1:00-2:00pm      | <i>VCU Supported Education Model: Effective Strategies and Supports for College Students with Disabilities - Elizabeth Getzel and Shannon McManus</i> | Lanai Ballroom                          |
| 2:00-3:00pm      | <i>Short Break and Group Discussion</i>   | Lanai Ballroom, Iao Needle, Akaka Falls |
| 3:00-4:00pm      | <i>Learning Disability Versus Learning Difference: How to Avoid Conflict in the Workplace - Robert Crawford</i>                                       | Lanai Ballroom                          |
| 4:00-5:00pm      | <i>Short Break and Group Discussion</i>   | Lanai Ballroom, Iao Needle, Akaka Falls |
| 5:30-7:30pm      | <b>Networking Reception</b>   | Nihau Room                              |

| <b>THURSDAY</b> | <b>ACTIVITY</b>  | <b>LOCATION</b>  |
|-----------------|--|--|
| 6:15-7:45am     | <i>Enjoying the Great Hawaiian Morning: Canoe Paddle (optional)</i>  | Meet at the Sheraton pool by the snack bar at 6:15 am for walk to the Canoe Club |
| 8:30-9:00am     | <b>Continental Breakfast</b>   |  |
| 9:00-10:00am    | <i>Key Issues in the Transition to Postsecondary Education and Employment for Individuals with Psychiatric Disabilities - Joe Marrone</i>            | Lanai Ballroom   |
| 10:00-11:00am   | <i>Short Break and Group Discussion</i>  | Lanai Ballroom, Iao Needle, Akaka Falls  |
| 11:00-Noon      | <i>Panel Discussion on Traumatic Brain Injury- Alpheus Mathis (facilitator)</i>  | Lanai Ballroom   |
| Noon-1:00pm     | <b>Lunch</b>   | Molokai Ballroom   |
| 1:00-2:00pm     | <i>The Emergence of Psychiatric Disabilities in Postsecondary Education - Michael Sharpe</i>   |  |
| 2:00-3:00pm     | <i>Individuals with Psychiatric Disabilities in Postsecondary Education: Universal Design, Accommodations and Supported Education - Alfred Souma</i> | Lanai Ballroom   |
| 3:00-4:00pm     | <i>Short Break and Group Discussion</i>  | Lanai Ballroom, Iao Needle, Akaka Falls  |
| 4:00-5:00pm     | <i>Synthesis and Group Presentations</i>   | Lanai Ballroom   |
| 5:00pm          | <i>Adjourn</i>   |  |

## Speaker Key Points

### Veronica Crawford

- Need to prepare students with Learning Disabilities (LD) for the deep anxiety that they are likely to experience around “small” day-to-day obstacles.
- Many co-morbid conditions experienced by students with LD stem from frustrations related to lack of support/ accommodations rather than from the LD itself.
- Learning disabilities are different from learning difference: disabilities must affect people in major life areas, and are legally protected under the ADA.
- Early school experience can shape lifelong patterns and self-perceptions that can sabotage educational success later on. Internalizing messages about stupidity, laziness, or lack of motivation can be particularly harmful.
- Fear associated with disclosure can prevent accessing necessary resources that level the field.

### Christopher Lee

- Assistive technology (AT) and having a “task driven” action plan for educational success are important strategies for students with disabilities. The task plan involves evaluating each task, breaking it into smaller subtasks, and identifying necessary strategies, resources and supports for successful completion.
- Students have a legal right to access AT.
- Useful websites offer information, free trial downloads, equipment loans, and support.
- People with LD should explore AT tools that are an effective match for their individualized needs.

### Elizabeth Getzel and Shannon McManus

- A supported education model is successful for working with students with Attention Deficit / Hyperactivity Disorder (ADHD) and learning disabilities (LD).
- Support providers need to get detailed information beyond traditional documentation of the disability. Knowledge of sleeping and eating habits can provide critical information for holistic support, while identifying strengths and interests helps tailor learning approaches and increases self-esteem.
- Students are often unaware of their particular learning styles and needs, and may not know what accommodations to request. Even when that awareness is present, fear of stigma can impede seeking support.
- Key components of an academic support plan include customized technology, campus/ community resources, peer as well as staff support, and enhancement of self-advocacy skills. The most successful plans start with an assessment of unique needs, and are then tailored to each student.

- Internships can be extremely helpful for both career exploration and transition. When internships are tied to a particular grade point average, this can serve as an institutional barrier for students with LD or AD/HD.
- Students are more likely to use accommodations when combined with services.
- Enhanced collaboration between high schools and post-secondary educational programs is essential.

### **Robert Crawford**

- Current proposals for changes in special education law are likely to create huge setbacks for students with LD. Of particular concern is lengthening the time period for an individualized educational plan (IEP) from one year to three years.
- Reconciling contradictory legislation—such as discrepancies about elementary school testing under IDEA and NCLB—is critical.
- Diagnostic testing requirements for documentation purposes in both educational and occupational settings present a barrier to accessing supports for people with LD.
- Increasing use of the term “learning difference” as a euphemism for LD is risky, both in terms of recognition of LD and AD/HD as “legitimate” disabilities, and in terms of preserving legal rights currently protected under the ADA.
- Research on the brain shows distinct differences in the brains of people with and without LD. This goes beyond the issue of “learning preferences.”
- Need increased education for the general public about what it means to have a learning disability or AD/HD, as well as expanding research on the impact of LD beyond academics, to include vocational and daily living skills.
- Average cost of an accommodation is \$500.00, although the perception among many Human Resources professionals and potential employers is that the figure is much higher.
- Several assessment tools are useful for people with LD. One example is CAMS (compensatory accommodations, modifications, and strategies).

### **Joe Marrone**

- Need for more holistic understanding of transition issues, encompassing developmental and social dimensions and measuring success beyond outcomes.
- Need for distinction between disclosure and confession. Students with disabilities need to identify what they hope to accomplish and tailor their disclosure to those needs.
- Undiagnosed depression among students with cognitive and other disabilities is a major issue.
- Need a stronger emphasis on peer support, and stronger partnerships.
- System change does not come about through planning, but through action!

## **Panel on Traumatic Brain Injury (TBI): Alpheus Mathis, Facilitator**

- Depression and other psychiatric illnesses are common following TBI.
- There is a distinction between TBI and acquired brain injury; TBI is an external blow to the head, while acquired brain injury results from illness.
- TBI can be mild, moderate, or severe. The impact ranges from individual to individual, and changes can be cognitive, physical, and/or behavioral.
- TBI impacts working or short-term memory, often leaving episodic memory (of past episodes with strong emotions attached), and procedural memory (sequence that one follows to accomplish a given familiar task) intact.
- Executive functioning, which includes inhibition, initiation, and problem solving, is also significantly impacted by TBI. It also slows down speech, thought, and processing, and impacts organization, sequencing, and self-perception.
- After an injury, people with TBI focus first on survival and then on rehabilitation.
- Recommended accommodations for students with TBI include note-takers and tape recorders. It is also advisable to inform the instructor.
- Only “cure” for TBI is prevention.

## **Michael Sharpe**

- There has been a significant increase in post-secondary students who declare a psychiatric disability, resulting from broadening the scope of the term and improvements in diagnostic criteria and treatment options.
- There is a need for more research in this area, as these trends are being observed and reported by service providers, but have yet to be systematically measured.
- Approximately one in five people in the United States experience a diagnosable psychiatric disability in any given year. These include major depressive disorders, schizophrenia, eating disorders, and anxiety disorders (National Institute of Mental Health, 2000).
- Although a supported education model would better serve the needs of students with psychiatric disabilities, most are served by campus Disability Services offices, where training is more likely to focus on learning disabilities and AD/HD.
- Five major barriers for students with psychiatric disabilities are: stereotypes and stigma, complex nature of psychiatric disabilities, access to resources, access to information and services, and organizational and institutional barriers.
- Four successful strategies for combating these barriers are: implementing Universal Design for Learning (UDL), creating sub-communities to foster social connections for students with psychiatric disabilities, improving clarity, coordination, and communication with all key stakeholders, and increased training and resource provision for all key stakeholders.

## **Alfred Souma**

- Increased awareness and academic support is needed for students with psychiatric disabilities in postsecondary education.
- The ability of students with psychiatric disabilities to access needed supports and services is undermined by lack of knowledge about their rights, stigma caused by stereotypes and misperceptions, and attitudes suggesting that they don't have a "legitimate" disability.
- Need to address the high dropout rates of students with psychiatric disabilities, particularly at the high school level.
- Using Universal Design principles in the classroom also supports students who have not been diagnosed, have not disclosed, and/or who lack documentation.
- University career services centers need better training in understanding and supporting students with disabilities.
- Students with psychiatric disabilities should have a more active role in designing their services, including as paid staff people, advisory board members, and committee representatives.
- Students with hidden disabilities need better information about their disabilities, improved transition support, and more extensive resources about/ access to accommodations.

# Discussion Group Key Points

## 1. PREPARATION NEEDS (POST-SECONDARY, WORKPLACE, AND ADULT LIVING)

### CORE ISSUES

- Need to take a holistic approach, inclusive of educational, social, and daily living needs/ skills.
- Balance between high expectations and “realistic” expectations.
- “Self-sufficiency” (within one’s own cultural context) and support are not mutually exclusive.
- Earliest recognition of disability opens most options for success and choice, and interrupts internalization of failure before it “spirals out.”
- Late age identification/ diagnosis can occur when strategies that worked in high school are no longer adequate.
- Important to familiarize students with requirements and processes for all stages and aspects of application process: financial aid, admissions, registration, etc.. As with first generation college students, “don’t assume that students understand basic components of college and work life.”
- Same is true for work life and basic life skills—finding an apartment/ home to rent or buy, budgeting, job applications, time management, etc.
- Explicitly address strategies and challenges in how to adjust to change.
- A non-judgmental assessment of functional limitations and assets is critical.

### PRACTICE RECOMMENDATIONS

- Provide early and consistent self-advocacy training. (see issue #5)
- Ensure that students with disabilities are not being tracked into dead-end “sheltered workshops.”
- Need for resource sharing, resource mapping, and redirection of resources to fill gaps.
- Identify successful models (such as Transition Councils) and modify/ tailor to own institutions.

### POLICY IMPLICATIONS

- Create institutional structures that promote and ensure regular communication and collaboration between High School and post-secondary institutions.
- Standardize documentation requirements across institutions and levels so that high school documentation is accepted by Institutions of Higher Education (IHE).
- Improve teacher training at all levels for earlier recognition and referral and improved teaching strategies.
- Require active student participation/ voice in design and implementation of IEP at all stages.
- Enforce implementation of testing laws at all secondary institutions, including regular testing intervals.

## RESEARCH NEEDS

Cross-cultural, cross-disability research is needed that:

- Strengthens needs assessment tools.
- Identifies specific interventions that work for obtaining (and retaining) quality employment and advancement.
- Identifies the most effective strategies/ training/ approaches for academic success among students with disabilities.
- Examines the behavioral and life-span impact of hidden disabilities.
- Tracks students with disabilities longitudinally, from elementary school all the way through post-secondary education.
- Identifies successful models for restructuring schools.

## 2. EQUITY AND UNIVERSAL ACCESS

### CORE ISSUES

- Universal Design for Learning (UDL) is a key philosophical and strategic approach for increasing educational access and success for students across disability. It proactively includes the divergent needs of a wide range of populations at the design level, rather than trying to modify or accommodate “after the fact” on a case-by case basis. This approach increases usability for everyone. Please go to [www.cast.org](http://www.cast.org) for more information.
- Need to move beyond providing the “minimal required by law.”
- Language issues; “special rights,” “entitlements,” and “accommodations.”
- Promoting a “multiple points of entry model” instead of perpetuating a “duplication of services model.”
- Finding ways to diminish the fear of stigma, both in terms of self-concept/ self-esteem and in terms of issues of diagnosis, documentation, and self-advocacy.
- Promoting a shift to universal design would increase cross-disability awareness.
- Challenging and rejecting “deficit models” and encouraging/ promoting “empowerment models.”

### PRACTICE RECOMMENDATIONS

- Create more holistic educational and service environments.
- Increase awareness of CAST model (among others) in order to assist faculty in redesigning their courses for UDL.
- Identify and dismantle external obstacles/ barriers that make a disability out of a difference.
- Design and present short modules on UDL at conferences for administrators, principals, Student Affairs officers, Academic Affairs officers, Diversity officers, and others who could become partners in promoting and implementing these changes.
- Ensure that disability issues are a core part of diversity training.

## POLICY IMPLICATIONS

- Encourage faculty to broaden their access statements beyond students with a “documented disability.”
- Incorporate training on access issues into the job descriptions and performance evaluations of teachers and service providers.

## RESEARCH NEEDS

- Comparative outcome studies of post-secondary students who had “traditional” vs. UDL learning environments.
- Identify components of successful universal design and implementation in learning, living, social, and work environments.
- Comparative research of how other targeted groups have identified, framed, and responded to similar issues.

## **3. CULTURALLY GROUNDED AWARENESS AND RESOURCES**

### CORE ISSUES

- Do not assume that a trait (such as independence) that is valued in one cultural tradition will be similarly valued or framed in another. Be careful about universalizing outcomes and goals.
- Ensure that policies and practices are inclusive of culturally grounded understandings of “appropriate” roles and proximity of families and the broader community.
- Value the various aspects of a person with a disability’s identity; don’t create environments where they must “choose” a “primary” identity.
- Address ways in which culture influences family decisions around areas such as diagnosis, support, and allocation of resources.
- Be aware of possible cultural dynamics around issues of shame or blame associated with disability.

### PRACTICE RECOMMENDATIONS

- When planning conferences, trainings, services, or resource guides, ensure core-level representation across cultures as well as across disabilities.
- Do not approach cultural awareness from a deficit model; look for all of the positive dynamics that different cultural beliefs bring to these various issues.

### POLICY IMPLICATIONS

- Ensure that diversity training includes disability issues and that disability awareness training incorporates multiculturalism.
- Codify cultural competencies within disability awareness into job descriptions, performance evaluations, and criteria for promotion.

## RESEARCH NEEDS

- More research that is specifically focused on the intersections of disability identity /experience with racial and cultural identity/ experience.
- Increased commitment and awareness is needed to make more generalized research on disability culturally inclusive from the design level forward.

## 4. COORDINATION/COMMUNICATION/PARTNERSHIPS

### CORE ISSUES

- Workplace transition issues call for different partnerships than educational transition. Avoid superimposing a model that may not fit.
- Partnerships should begin as early as possible in the student's educational experience.
- Service providers and educators must assume shared responsibility for meeting the needs of students with disabilities, rather than "leaving it" to special education or other areas.
- Partnerships/ communication must be both vertical and horizontal, such as those between K-12 and college or employers; between school and parent/ guardian (until adult), or between direct service providers and researchers.
- More consistency is needed in types of documentation required across institutions.
- Fears around legal issues regarding confidentiality and disclosure can create unnecessary obstacles to improving communication.
- Improve consistency/ continuity of clearly communicated goals and expectations, both across levels and with student directly.
- Academic advisors need to partner with employers around internships.
- True interagency collaboration with shared resources and active consumer participation.
- Need for cross-environmental education, i.e. adult organizations (including PSE, employers, etc.) invited to secondary school and vice versa.
- Increased networking is needed. Listservs are a useful and low cost way to supplement resources and information.

### PRACTICE RECOMMENDATIONS

- All IEPs need to explicitly address transition to next stage.
- Implement more "buddy system" programs, pairing post secondary students with high school students, and high school students with elementary school students. This form of mentoring benefits both groups, and provides important models of students with hidden disabilities succeeding.
- Train employers on the ease of modifying positions to maximize strengths.
- Provide professional development training on hidden disabilities to all educators rather than only to special education teachers.

## POLICY IMPLICATIONS

- Improve transition plans and set up transition councils.
- Streamline services in a holistic manner to enable provision of multiple services in one location.

## RESEARCH NEEDS

- Case studies of successful interagency collaboration.

## **5. SELF ADVOCACY, ACTION, CHOICE**

### CORE ISSUES

- Decisions about disclosure should be made on an individual basis, although participants acknowledged that increased disclosure benefits people with hidden disabilities as a group.
- Students need to understand general aspects of disability as well as how they individually experience their own disability. If an offered strategy or tool does not fit for them, it is important to request something that does.
- Need to learn skills/ tools/ confidence to self-advocate. Service providers can support students by providing practice interviews, giving feedback on a written request for an accommodation, or role-playing a conversation with a future employer about an important issue.
- Students need to be actively involved in the design and implementation of all stages of their own IEP and transition plan.
- Important to have balance between guidance from others and room to explore one's own interests/ goals/ options.

### PRACTICE RECOMMENDATIONS

- Be aware of apologetic undertones in requesting accommodations that one is ethically and legally entitled to.
- Find creative ways to incorporate parents, students, and peers in support groups and educational programs regarding self-advocacy and student rights.
- Create consistent gathering spaces for students with disabilities to network and share experiences and strategies.
- Identify successful models for providing more personalized services to students.

### POLICY IMPLICATIONS

- Ensure broad-based representation of people with disabilities whenever researching, designing, or implementing policy and/or services.
- Better job by students/ employers of both "normalizing" disability and making people with disabilities aware of available tools, support, and services.

## RESEARCH NEEDS

- More extensive research on tangible skills and models that have been successful.

## 6. AWARENESS/ EDUCATION/ DISPEL MYTHS

### CORE ISSUES

- Better awareness within our communities across disabilities.
- Increased awareness of individual range within each disability. Information and strategies are not necessarily generalizable, especially for disabilities with a large continuum, such as AD/HD.
- Self-awareness is a critical component of broader education.
- People with disabilities benefit from keeping informed of their rights and staying current on disability-related laws. This enhances our ability both to educate others and to lobby for needed changes.
- Need to insist on better education of broader communities (work, school, living, etc.) about disability issues.
- Early information for parents is critical. Fear of stigma, denial, or shame can prevent testing and accurate diagnosis, as well as early intervention.
- Learning disabilities and AD/HD are often minimized/ downplayed/ discounted, while mental and psychiatric disabilities are often demonized.
- Psychiatric disabilities can be hard to diagnose, and there is very little awareness among teachers.
- There is a high degree of discomfort about psychiatric disabilities due to lack of accurate information.

### PRACTICE RECOMMENDATIONS

- Share information about disabilities both formally and informally with parents, teachers, employers, students, and advocates.
- Join organizations or listservs that keep current on disability rights and legal issues.
- Universities need to see their role in terms of dealing with mental health issues.

### POLICY IMPLICATIONS

- Incorporate training on disability issues (across disability) for faculty, instructors, staff, students, and service providers. Include basic information as part of new student orientation, new faculty orientation, and similar venues.
- Ensure that new laws/ policies are not inconsistent with / contradictory to existing ones unless explicitly overturning or modifying earlier laws.

## RESEARCH NEEDS

- Identify inconsistencies and contradictions in existing law/ policy (i.e., NCLB and IDEA) and make specific recommendations for change.
- Measure awareness levels and attitudes about disability among general education teachers; identify needs and problem areas.

## 7. ASSISTIVE TECHNOLOGY / TOOLS

### CORE ISSUES

- Need better education/ awareness of what is currently available.
- Train employers/ faculty about low cost and higher cost assistive technology (AT) options. Most AT accommodation cost less than \$500.
- Students with hidden disabilities need to be able to self-advocate for their AT needs.
- Many issues arise around allocation—such as who gets what, or levels of documentation required.
- Teachers (at all levels) need to be trained about the importance of AT tools as well as their use, to improve their ability to both advise and train students.

### PRACTICE RECOMMENDATIONS

- Hire full-time tech support.

### POLICY IMPLICATIONS

- Schools need to invest more in AT despite shrinking budgets, possibly sharing costs/ location (i.e., 1 AT person for 2 schools).
- Provide professional development opportunities that enhance staff knowledge of AT.
- Need federal support for development.

### RESEARCH NEEDS

- Tracking various hidden disabilities, measure the types and extent of AT use.
- Measure the correlation of AT use with self-esteem, and with academic and professional success.

## **Excerpts From the Online Discussion**

**How is a “learning difference” distinct from a “learning disability”? What are the benefits and drawbacks of having a learning “difference” rather than a learning “disability”?**

- There is a difference in how information is processed, which is by neurological, cultural, and environmental factors.
- The law requires proof of a disability in order to access accommodations....Until the law recognizes “differences” we are stuck with disabilities.
- If we call learning disabilities “learning differences,” what about people with other types of disabilities? Do we say “visual difference,” “mobility difference,” etc.?
- I feel that learning difference is a preferred term. Disability may connote lack of ability whereas difference implies what I have felt when interacting with people called learning disabled. I believe that people so labeled have different perceptions and experiences of the world. I believe that we as a society need these perceptions and the variety of abilities that are brought.

**What are the key issues that professionals and teachers need to know about to help youth with disabilities transition to postsecondary education and employment?**

- I am not an educator, but I benefited from a patient teacher, who at a critical time in my development, built on my strengths.
- There still needs to be real accommodations that actually make things functional, not just accommodations that are legally “reasonable.”
- We need to start with the preschooler or early elementary student.
- Remember that learning disabilities go beyond academics. It’s everything from getting around from place to place, to interacting with people, connecting to the outside world, as well as on-the-job and everyday experiences.
- A resource log book with specific resources and strategies that have been helpful or not.

**Do people with hidden disabilities have a tougher time identifying themselves as a person with a disability because it is easy for them to “pass” as not having a disability?**

- Passing made it possible for me to build other coping skills, but it prevented me from moving forward through self-advocacy...disclosure gave me more freedom, better self-advocacy skills, and support systems that I positively needed.
- 31% of people with disabilities who graduated from college (mostly hidden disabilities, especially psychiatric disabilities and AD/HD) were not identified until high school or college.

- I think for the most part, people with a hidden disability do not identify themselves as a person with a disability. Sadly, as a result, many do not receive the services they deserve and need.

**What disabilities are considered “hidden disabilities”? What are the guidelines for recognizing if someone has a hidden disability?**

- I see it as not medical conditions, but neurological, cognitive, and emotional/behavioral in nature. They would include the obvious LD, AD/HD, and also bipolar, Asperger’s, autism, Tourettes, seizure disorder, anxiety, Traumatic Brain Injury (TBI), and Obsessive Compulsive Disorder (OCD).
- Endometriosis...is not well understood, has no clear cause and no cure, and can severely limit daily functioning.
- Deafness, cancer, cardiopulmonary, orthopedic (i.e., back issues), gastrointestinal, diabetes, lupus, sickle cell, Crohn’s, fibromyalgia, diverticulosis, seizures, concussions, aneurysms, and meningitis.

## Participants

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## Speaker Biographies

**Robert Crawford** is the founder and C.E.O. of the Life Development Institute (LDI) in Glendale, Arizona. Since 1982, LDI has provided three tracks of services leading to college, vocational/technical/ and competitive employment placements for thousands of older adolescents and adults with Learning Disabilities, ADHD, Autism Spectrum Disorders, and related conditions. Mr. Crawford received a Presidential Point of Light Award in 1992 from President and Mrs. Bush at the White House. Mr. Crawford is active with many organizations and has served as a state President and national board member for the Learning Disabilities of America. He is an experienced presenter and published author specializing in vocational assessment, career development, and advocacy/leadership training for individuals with hidden disabilities.

**Veronica Crawford** holds a Masters of Art in Human Resources Development and is a Certified Senior Disability Analyst. She is the author of *Embracing the Monster: Overcoming the Challenges of Hidden Disabilities*. Veronica has presented over 400 programs nationwide and has served on many committees as well. She is committed to the needs of young adults with hidden disabilities. Veronica is the President and Chief Operations Officer of Life Development Institute in Phoenix Arizona. Veronica is an adult with LD and Bi-Polar disorder.

**Elizabeth Getzel, Ph.D.**, has been a Research Associate at the Virginia Commonwealth University RRTC for the past 15 years and currently directs a project on workplace supports. Dr. Getzel has worked for a research and development center at the University of Wisconsin-Madison developing evaluation strategies that enabled individuals to talk about their experiences in a particular service or educational program. Dr. Getzel has also been involved in a number of evaluation studies in the field of special education, specifically focusing on transition services for youth with disabilities and those attending postsecondary education programs.

**Madeline Harcourt** is a doctoral student at the College of Education, University of Hawai'i, specializing in Exceptionalities. She is a Leadership Trainee at the Center on Disability Studies (CDS) where she developed Great Expectations trainings for new faculty and teaching assistants to educate them about disability issues. She is author of *Great Expectations: Creating a Welcoming Classroom Environment for ALL Students*, a companion handbook. She served on various CDS Committees that worked towards accessibility for people with disabilities including learning disabilities. Madeline was one of ten people nationwide to receive a National Service Inclusion project grant. She created and developed Ready, Set, Go! a project for people with disabilities who want to enter national service. Madeline Harcourt is a person with learning disabilities who is committed to helping others like herself become successful.

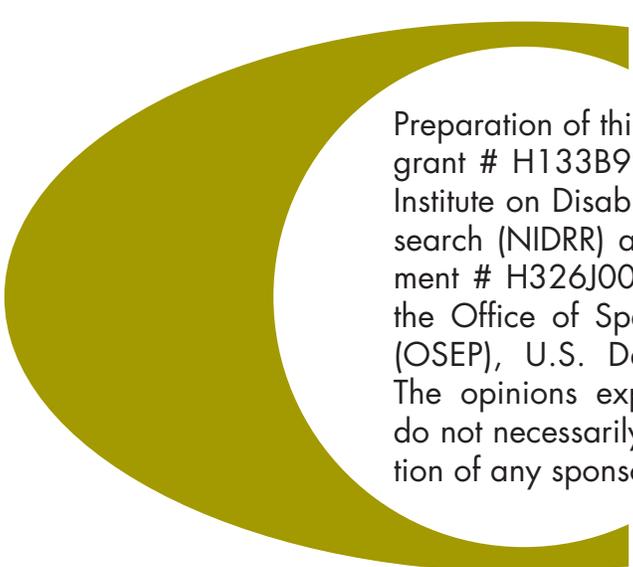
**Christopher Lee** is a creative learner who graduated from the University of Georgia in 1990. He is currently Director of the Georgia Assistive Technology Project, Tools for Life, and devotes extra time to public speaking and writing on self-advocacy and assistive technology issues. Lee also serves as president of LD Adults of Georgia as well as president of the Learning Disabilities Association of Georgia. He is currently enrolled in the Ph.D. program at Union Institute. Christopher is a nationally renowned consultant in the field of learning disabilities. In his most recent book, *What About Me? Strategies for Teaching Misunderstood Learners*, he and co-author Rosemary Jackson provide specifics to help teachers and parents of misunderstood learners. He also published a book in 1992, *Faking It: a Look into the Mind of a Creative Learner*, which provides insight into his educational experiences in growing up and getting through college, not knowing that he had severe learning disabilities until he was a student at the University of Georgia.

**Joseph Marrone**, Senior Training Associate at the Institute for Community Inclusion, has consulted, trained, and lectured to/for professionals in Vocational Rehabilitation, Mental Health, and Developmental Disabilities, consumers, family members, employers, government officials, academics, and the general public in 48 states, Canada, Puerto Rico, and Europe. He has over 28 years direct service/administrative experience in delivering rehabilitation services in community mental health - with major emphases on services to people with serious mental illness. Mr. Marrone has been a staff member at the New England Psychiatric Rehabilitation Training Program and the University of Massachusetts at Boston, the Michigan State University Long -Term Training Grant in Psychiatric Rehabilitation as well as of the University of Pittsburgh/Western Psychiatric Institute's National Psychiatric Rehabilitation Training Grant. He has also been an Adjunct Faculty Member of the New England School of Professional Psychology and the Boston University School of Medicine.

**Alpheus Mathis** received a Bachelors of Science in Occupational Therapy (OT) from the University of Puget Sound in 1983 and received his Masters Degree in Public Administration from University of Hawai'i in December 2003. His area of concentration is organizational reform, applied research in organizational performance, and community capacity building. He is currently an Occupational Therapist with the Department of Health / Hawai'i State Hospital. He was a member of the Hawai'i Department of Health team that submitted the Planning and Implementation grant applications to the Maternal and Child Health Bureau to foster sustainable change in Hawai'i's system of community services and to support best practices in the field of Traumatic Brain Injury (TBI). He has over 18 years in public service for persons with various disabilities. He is an advocate, mentor, and professional involved with various capacity building initiatives for persons with disabilities.

**Michael N. Sharpe, Ph.D.**, is currently a Research Associate at the Institute on Community Integration, at the University of Minnesota. Dr. Sharpe has had the opportunity to become involved in a wide range of research and evaluation activities with such agencies as the University of Minnesota's Center for Applied Research and Educational Improvement, the Minnesota Department of Children, Families and Learning, the Minnesota Department of Human Services and the National Research Institute. As a result of his experiences as a school psychologist for over 20 years, Dr. Sharpe has also accumulated a significant amount of field experience working with teachers, students, and their families. Dr. Sharpe's main areas of interest are in those applied research activities that help to solve "everyday" practical problems faced by educators and students with disabilities.

**Alfred Souma** is a Rehabilitation Counselor coordinating Disability Support Services since 1991 at Seattle Central Community College in Seattle, Washington. In addition, he worked as a Rehabilitation Counselor at an inpatient psychiatric setting in Madison, Wisconsin and also did outpatient work in Santa Barbara, California for a total of 14 years. Mr. Souma speaks nationally on the topic of "Accommodating Students with Psychiatric Disabilities in the Classroom." He has presented over 30 workshops across the country as well as seminars for national organizations such as ACPA, NASPA and AHEAD. Mr. Souma is the 2002 recipient of the Association of Higher Education and Disability's (AHEAD) Professional Recognition Award as well as the Meritorious Service Award presented by the Washington Association on Post Secondary Education and Disability.



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