Psychiatric Disabilities in Postsecondary Education

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Defining the Issue:

Although they are often thought of as “hidden” disabilities, psychiatric disabilities are very real and apparent for those who harbor them and endure daily discrimination as a result. The barriers that exist for those with psychiatric disabilities in postsecondary education are unique to those experienced by individuals with other disabilities. A large part of the problem is the stigma associated with mental illness in our society. This often causes those suffering from psychiatric disabilities to feel isolated and embarrassed of their condition which, in turn, makes it all the more difficult to ask for accommodations and special services. Furthermore, there are very few resources available for those with psychiatric disabilities. A single resource outlining their rights and accommodations and providing them with proper services does not, at this time, exist. Those with psychiatric disabilities often feel isolated and, as a result, choose not to continue their education, which, as time progresses, exacerbates their situation further. In the following brief, these obstacles are summarized and the barriers, accommodations and future needs of those with psychiatric disabilities in postsecondary educational settings are discussed.

For Clarification…

The difference between mental illness and psychiatric disability is in the context of debilitation. Mental illness refers to the collection of all diagnosable mental disorders causing severe disturbances in thinking, feeling, relating, and/or functional behaviors. It can result in a substantially diminished capacity to cope with daily life demands (Souma, Rickerson & Burgstahler, 2001). This is considered a psychiatric disability when symptoms begin to interfere with educational goals.

Summary of the Issue

Introduction

• “More than 400,000 students enrolled in American postsecondary institutions report having a disability (Lewis, Farris, & Greene, 1999). Of that total population, over 33,000 report having a mental illness” (Souma, Rickerson, Burgstahler, 2001).
• In recent years, there has been an increase in students with psychiatric disabilities attending post-secondary school due to improvement in psychoactive medications, allowing individuals to function more effectively in educational environments.
• Some of the primary mental illnesses seen as psychiatric disabilities include:
  □ Depression: Someone suffering from depression may experience a loss of energy and interest, develop feelings of guilt and worthlessness and have
difficulty concentrating. They may experience a loss of appetite, insomnia, or hypersomnia as well as having suicidal thoughts. In severe forms or depression, individuals also may experience delusions or hallucinations (Timonen, 2003).

- **Anxiety disorders**: Symptoms include overwhelming feelings of panic and fear, uncontrollable obsessive thoughts, painful, intrusive memories; recurring nightmares, nausea, sweating, muscle tension, and other uncomfortable physical reactions. These feelings differ from normal feelings of nervousness in that they often occur for no apparent reason and do not go away, many times leaving the patient debilitated with fear (Retrieved from American Psychiatric Association Website on December 11, 2003).

- **Schizophrenia**: Some positive symptoms include delusions; hallucinations; and disordered thinking (apparent from a person's fragmented, disconnected and sometimes nonsensical speech). What are referred to as “negative” symptoms include social withdrawal, extreme apathy, diminished motivation, and blunted emotional expression (Retrieved from U.S. Dept. of Health and Human Services: Substance Abuse and Mental Health Services Administration Website on December 11, 2003).

- **Bipolar disorder**: Bipolar disorder, also known as manic-depression, is characterized by alternating periods of extreme moods. A person with Bipolar disorder experiences cycling of moods that usually swing from being overly elated or irritable (mania) to sad and hopeless (depression) and then back again, with periods of normal mood in between. The frequency of the swings between these two states, and the duration of the mood, varies from person to person (Retrieved from Mental Help Net Website on January 9, 2004).

- **Personality Disorders**: Several distinct psychological features are apparent in personality disorders including disturbances in self-image; inability to have successful interpersonal relationships; inappropriate range of emotion, ways of perceiving themselves, others, and the world; and difficulty possessing proper impulse control. There are ten different types of personality disorders that exist, all of which have various emphases (Retrieved from Mental Help Net Website on January 9, 2004).

Many of these illnesses are difficult to deal with in any setting, but certainly pose even greater difficulties when trying to reach educational goals and learn effectively in a classroom. There are various obstacles, in the classroom and beyond, for those with psychological disabilities in educational settings and some of these are outlined below.

**Educational Barriers**

Oftentimes, academic problems are not necessarily the main obstacle in postsecondary education for those with psychiatric disabilities. In fact, students with psychiatric disabilities
“...did not regard their academic problems as the major reason for their failure to achieve post-secondary educational goals. Indeed, what stood out in their memories were financial problems, their own psychological problems, and barriers due to external circumstances in their personal lives” (Mowbray & Megivern, 1999).

**Stigma and Stereotypes**

While those with other types of disabilities certainly experience discrimination, there is a different type of social stigma that goes along with mental illness and psychiatric disabilities. One website outlined that, “The media is responsible for many of the misconceptions which persist about people with mental illnesses. Newspapers, in particular, often stress a history of mental illness in the backgrounds of people who commit crimes of violence, television news programs frequently sensationalize crimes where persons with mental illnesses are involved, (and) comedians make fun of people with mental illnesses, using their disabilities as a source of humor” (Retrieved from National Mental Health Association website on February 10, 2004).

♦ **Societal Myths**--the idea that those with psychiatric disabilities or mental illness are “crazy” or uncontrollable. Often perpetuated by the media, the fear of mental illness is widespread and many times discussed in everyday situations without regard for those who may suffer from a disorder.

♦ **Classroom Expectations and Accommodations**--students experience a reduction in expectations by their peers and sometimes their teachers when they reveal that they have a psychiatric disability. The idea that they “do not belong” in an average classroom is often assumed with no regard to their mental capabilities. Furthermore, it is difficult for teachers to justify specially accommodating an individual who, unlike those with physical disabilities, appears not to require special services.

♦ **Reluctance to Discuss Disability**-- Due to the pervasive stigmas regarding psychological illness, many students are hesitant to initiate discussion with their supervisors and teachers and therefore, sometimes go without proper accommodations.

**Functional Limitations in the Classroom**

Those with psychiatric disabilities are at certain unique disadvantages in the classroom when compared to their non-disabled peers. Some of these disadvantages are:

- **Difficulty with medication side effects**- drowsiness, dry mouth, slow response time, etc.
- **Screening out environmental stimuli**- difficulty concentrating
- **Handling time pressures and multiple tasks**
- **Interacting with others**- difficulty reading, getting along and working in groups.
Fear of authority figures-
do not want to ask instructors for help.

Responding to negative feedback-
difficult for some to interpret criticisms and separate themselves from the tasks that are being critiqued.

Responding to change-
unexpected changes can overwhelm people with certain psychiatric disabilities and occasionally, it is hard for some to tolerate interruption.

Severe test anxiety-
certain mental illnesses make it emotionally and physically impossible to take an exam.

Classroom Accommodations

Many with psychiatric disabilities need certain accommodations in terms of classroom, exam and assignment augmentations. Some examples of these accommodations are:

- **Preferential seating**- some students need to take frequent breaks in order to maintain concentration through a lecture and a seat near the door would be preferred.
- **Note takers**
- **Private Feedback**- this may decrease the fear of authority and allow some to learn better from constructive criticism
- **Exams in an alternate format**
- **Advance notice of assignments**
- **Assignment/Exam assistance outside of class** (even while in the hospital)

Accommodations should also include education of faculty and other students about mental illness and how it should be dealt with in the classroom. As far as awareness goes, those with psychiatric disabilities are hidden in a lot of respects and, because of this, are not properly accommodated or understood.

Financial Problems

◊ Due to added medical-related expenses, those with psychiatric disabilities often have to get a job and work around their school schedule in order to make ends meet. In a focus group regarding barriers to those with psychiatric disabilities “Students…spoke about the stress of maintaining their financial aid and needing to make difficult choices between paying bills, eating properly, or paying for medications” (Blacklock et.al., 2003).

◊ Many times the University does not provide the student with proper health insurance benefits. Thus, the expenses that incur as a result of their mental illness (hospital stays, rehabilitation services, medication, etc.) become yet another financial burden.
While Universities must legally accommodate students with psychiatric disabilities, it is commonly emphasized that financial support is not easy to obtain and if it is provided, it will be at a minimum. One University’s webpage noted, “In determining what kinds of accommodations should be provided, the institution will review the student's documentation, including previous accommodations the students received in other settings. An institution must provide requested accommodations that are reasonable in nature, do not give the student an unfair advantage, do not fundamentally alter the nature of the course, and do not place an undue financial or administrative burden upon the institution (Boston University website, 1997).

Future Goals

- Increased education and instructional classes for both the psychiatrically disabled regarding their rights and accommodations as well as instructors and the non-disabled regarding the real components of mental illness and psychiatric disabilities.

- Insurance coverage needs to be readily available not only for students with physical disabilities but psychiatric disabilities as well. While it is sometimes possible for those with psychiatric disabilities to work in jobs where those with physical disabilities could not, that does not by any means negate the necessity of insurance for the psychiatrically disabled who have significant medical expenses as well.

- Those with psychiatric disabilities suffer not only from specific classroom disadvantages, but institutional disadvantages as well. Institutionally, postsecondary schools need to address issues on a wider scale. Instead of thinking from a stakeholder-to-stakeholder perspective, guidelines should be in place at the institutional level and the accommodations and services should be more comprehensive rather than dispersed to various agencies. These kinds of regulations, if enabled, would alleviate much stress from the disabled individual.
References


