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Although about 53 percent of public higher education students are enrolled in

community colleges, the proportion of students with disabilities served by community colleges is much greater: 71 percent (Barnett & Li, 1997). According to Flick-Hruska and Blythe (1992), over the coming years the number of students with disabilities entering colleges will continue to increase due to mainstreaming in secondary schools, efforts by postsecondary schools to make facilities and programs accessible to people with disabilities, and students' perceptions that higher education widens their opportunities for employment and independence.

Three important pieces of legislation have helped to provide these educational opportunities for students with disabilities: the Rehabilitation Act of 1973, the Individuals with Disabilities Education Act-IDEA of 1975, and the Americans with Disabilities Act of 1990 (ERIC Clearinghouse on Handicapped and Gifted Children, 1992). This legislation has led many educational institutions including community colleges to evaluate the types of services (if any) they provide to students and ensure that they develop programs that meet the federal guidelines.

This Digest will provide a profile of the magnitude of the demand for disability support services in community colleges, identify the types of programs that currently exist, and discuss some of the barriers to successful implementation of these programs. Finally, it will provide suggestions for future research and practice.

DEMAND FOR DISABILITY SUPPORT SERVICES (DSS)

According to a recent survey conducted by the American Association for Community Colleges (AACC) of 672 community colleges across the United States, approximately 8 percent of students report a disability and about half of those request services (Barnett & Li, 1997). Among students who registered for disability support services, 37 percent had learning disabilities; 18 percent had orthopedic or mobility disabilities; 15 percent had chronic illnesses and other; 8 percent had emotional/behavioral disorders; 6 percent had hearing disorders; 5 percent had visual impairments or blindness; 4 percent had head injuries; 4 percent had mental retardation; and 2 percent had speech and language disorders.

Barnett and Li found that nearly 80 percent of all colleges responding to the 1995 survey had a formal Disability Support Service Office, up from 70 percent in 1992. Comparing the figures collected in 1995 to those from an earlier survey conducted in 1992, Barnett and Li found that the types of services provided by community colleges had not changed substantially. The services most frequently provided by community colleges are registration assistance, counseling, alternative exam formats or times, and note takers or readers. The only service that increased dramatically over the four-year time span was the provision of adaptive equipment and technology, which increased more than 30 percent.

SPECIFIC DSS PROGRAMS

The AACC's "Disability Support Practices in Community Colleges: Selected Examples" (Barnett, 1993b) provides an overview of the types of programs available at community colleges. Support services often include disability assessment, orientation, academic advising, career exploration, transfer advising, tutoring, adjustment counseling, and adaptive equipment. One program that provides a range of services is the Community College of Rhode Island's, Access to Opportunity program. The major goals of this program are to retain students with disabilities, and ensure that they receive adequate placement after graduation--either through transfer to a four-year institution, or placement in the job market. In addition to the traditional support services, this program sponsors a transfer fair hosted by past students, and maintains a network with local businesses to aid in job placement. Since the program began in 1980 it has fostered an 89 percent retention rate. Other programs provide services for a specific disability, such as deafness or visual impairment. A program at Santa Barbara City College in California provides assistance to individuals with psychological disabilities through such services as peer support groups, a day treatment center, and courses on college survival skills and personal health issues.
Many disability support offices have developed partnerships with community organizations or other campus departments to aid in the provision of services. For example, the Special Needs program at Asheville-Buncombe Technical Community College in North Carolina collaborates with the Guided Studies Department to offer an Adaptive Technology course. Students learn to use adaptive hardware and software to develop reading, writing, and study skills.

According to the 1992 AACC study (Barnett, 1993a), four prevalent factors have contributed to the success of DSS services: administrative commitment, community linkages, staff expertise, and faculty support. A student-oriented approach, stable funding, and a flexible and creative approach to service delivery have been important, too.

BARRIERS TO SUCCESS

The many success stories of disability support programs in community colleges may obscure the fact that there are often obstacles to providing effective service. Barriers include difficulty in obtaining adequate funding, lack of training about and limited understanding of disabilities among faculty and staff, and inadequate referral services. Although state governments provide funding for disability support services, in a time of limited resources at all levels, it may become increasingly difficult for community colleges to obtain enough money to support their services. In 1992, the California Community Colleges estimated that it cost $557 per student to provide disability support services for a year and noted that insufficient funding would threaten the ability of the colleges to provide adequate services (California Community Colleges, 1992). The

introduction of computer technology to many campuses may require that additional services be instituted to ensure that students with disabilities are able to utilize them effectively. It may also increase the demand for more technologically advanced and expensive support equipment such as speech synthesizers and word predictor software.

Faculty and staff perceptions and training are an important part of the provision of support services. Flick-Hruska and Blythe (1992) suggest that the elimination of attitudinal barriers is critically linked to the knowledge and support of faculty and staff who implement DSS. Flick-Hruska and Blythe point out that there is enormous variability just within one disability category, and make it clear that students with disabilities are the "experts" regarding their needs and can usually make suggestions for providing an effective learning environment. In general, they suggest that support staff and faculty must view students with disabilities as individuals instead of labeling them by their disability, expect students with disabilities to meet the same standards as their peers after the necessary accommodations have been made, and finally, view the situation as a learning experience rather than a problem.

Mellard and Byrne (1993) note that in contrast to the K-12 sector, students in higher education must initiate a referral for DSS themselves. In this situation, awareness of the availability of the services is critical to referral. In addition to knowing that services are available, other factors may influence a student to seek services such as individual motivation, perception of ability and need for services, and willingness to accept the assistance (Mellard & Byrne, 1993). Any one of these factors could be a substantial barrier to obtaining service. Furthermore, once students have contacted the disability support office, they must then take an eligibility test to qualify for further services.

Often learning disabilities are the only disability category for which colleges complete the assessment, and students with other types of disabilities must be assessed through an outside agency such as a hospital or rehabilitation department, or a private consultant (Mellard & Byrne, 1993). Although the college will generally direct students to these outside agencies, transportation, time, and financial constraints may make it difficult for students to obtain the assessments on which their services depend.

FUTURE RESEARCH AND PRACTICE

Although many recent publications, especially those produced by AACC, have illustrated the range of services available to students with disabilities in community colleges, many areas deserve attention in the future. Future research should look at the effectiveness of different support services and programs to help guide the allocation of scarce financial resources into areas that are most beneficial to students. Tracking students after they leave the college would also help to determine program effectiveness and inform resource allocation. In addition to the partnerships formed with businesses and community organizations to help facilitate job placement, community

colleges might also consider facilitating partnerships to attract additional resources such as money and equipment. Colleges should ensure that both the DSS staff and other faculty, staff, and administrators have had appropriate professional development opportunities so that they are equipped to deal with the special needs of students with disabilities. Finally, perhaps the most critical implementation for the future is to publicize disability support services adequately to a wide audience including high school teachers and counselors, parents, and students.

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