An Academic Consultation Model for College Students with Disabilities (Practice Brief)

Amy Lynn Button[1]
Jessica Iwachiw[1]
Jana G. Atlas[1]

Abstract

This paper describes the academic consultation services offered to students with disabilities (SWD) at a small university. Each SWD is entitled to meet regularly with an academic consultant. The consultants are trained in offering a variety of services, including organization/time management, note-taking/reading comprehension strategies, goal setting, self-advocacy, stress management, school work, and social skills. They receive weekly supervision, but are given much freedom to determine the content of sessions. This paper examines the specific activities addressed within sessions of six academic consultants who met with a total of 33 SWD. Four patterns of consultation were observed. With some students, consultants focused primarily on one activity (i.e., either schoolwork or organization/time management). With others, multiple areas were addressed regularly (i.e., shifting between schoolwork and interfering needs or shifting among several areas). Patterns were not consistent for students with similar disabilities. Similarly, consultants addressed different activities with different students. Thus, the consultants appeared to focus on students' specific needs, which is a key feature of this model. It is suggested that academic consultants can be important resources for students, especially when support is provided at the individual level.

Keywords: academic consultation; students with disabilities, higher education

The passing of the Americans with Disabilities Act (ADA) in 1990 mandated delivery of services to accommodate the needs of individuals with disabilities in a range of settings, including higher education. While the provisions of ADA have brought considerations of accessibility and accommodation to the forefront for colleges, there appears to be a lack of consensus on what constitutes effective practice in this domain (Mull, Sitlington, & Alper, 2001; Rath & Royer, 2002), though various models have been described recently (e.g., Brand, Valent, & Danielson, 2013; O'Connell, Burch, & Shea, 2017). With the exception of these theoretical models, much of the limited research available is dated, suggesting that while colleges provide services, there is not a large empirical base to determine what specific services could be helpful to students with disabilities (SWD).

Currently, assistance for postsecondary SWD is typically offered within a comprehensive model that may include accommodations and services that are provided through multiple offices. For example, SWD may receive exam accommodations arranged through a disability services office, while obtaining writing support from an academic support center that serves the entire student population. When these divisions are made, the disabilities services office may include just a few personnel who coordinate accommodations that are required by ADA and provide referrals to outside offices, as needed. In fact, in-person direct service provision is often not possible given limited personnel within these offices, as was cited as a barrier for collaboration between offices for disability services and teaching/learning services offices (Behling & Linder, 2017). While it is important for SWD to have the opportunity to receive a variety of services, regardless of where the services are housed, there can be a disconnect between offices. For example, in a small sample study, researchers noted that several students with hidden disabilities (e.g., LD) reported that they were unlikely to use the office for disability services because they did not believe they had severe enough symptoms for utilization of such a service. Additionally, they reported that the campus learning center was not beneficial to them because

[1] *Alfred University*

the personnel working there did not fully understand the areas in which the student had difficulty. Instead, the focus was described as being standardized for all students (Couzens et al., 2015). Lack of coordination between these offices can result in SWD, particularly those who need improvement in their self-advocacy skills, to miss out on supports they need to succeed academically.

In determining what services *should* be provided to SWD, one literature review found that 65% of research articles regarding services for college students with disabilities discussed the need to provide *instructional strategies* (Mull et al., 2001). According to Rath and Royer's (2002) domains, instructional strategies can be considered *environment-changing* or *student changing*. Environment-changing approaches alter the academic environment to create equal access for SWD. Meanwhile, student-changing approaches attempt to provide learners with the skills needed to be more successful. Services falling into the latter category consist of psychotherapy, academic counseling, and strategy training, such as study skills training.

Research regarding student-changing approaches suggests that services are beneficial. For example, one university determined the level of services they believed was needed for each SWD (e.g., amount of time per week to be spent gaining instruction). Students who adhered to the suggested number of hours were more likely to graduate (Troiano, Liefield, & Trachtenberg, 2010). In another study, the use of academic guidance resulted in an academic increase that generalized to different contexts (Butler, 1995). At a different institution, SWD who utilized a program where they were provided with tutoring, note-taking, recorded textbooks, counseling, and remedial services were more likely to graduate in four years than those who did not use the program each year (Cowles & Keim, 1995). Consequently, it appears that programs that provide a variety of accommodations, including academic advising, counseling, or consulting services for SWD are effective in helping students graduate. However, the above studies did not assess the effects of each individual service. Thus, it is unknown whether particular services contribute more than others to student outcomes. Additionally, despite these findings, it appears that many colleges provide required accommodations, but do not go beyond to offer regular support for SWD (Janiga, & Costenbader, 2002).

Depiction of the Problem

Recent literature regarding student-changing services, such as academic consultation, is limited. In the extant literature, academic consultation has also been referred to as academic coaching, which is defined as the provision of consistent support for students in identification of personal strengths, goals, study skills, engagement, academic planning and performance (Robinson & Gahagan, 2010). To further explore academic consultation, this paper includes a description of the academic consultation services offered to SWD at one university. Previous research at this university found that SWD who met with a consultant at least four times had significantly higher GPAs in the fall semester than those who met with a consultant less often. In addition, every meeting with a consultant after the fourth meeting resulted in a 0.13 average grade point increase (Lighthouse, 2005). These findings were consistent with the few studies available regarding academic consultation or coaching at other institutions; in each instance SWD who received this type of support demonstrated improved GPAs (Parker, Hoffman, Sawilowsky, & Rolands, 2011; Robinson & Gahagan, 2010). Improved executive functioning skills and stress management (Bellman, Burgstahler, & Hinke, 2015; Field, Parker, Sawilosky, & Rolands, 2013) are also related to this individualized support for SWD.

The above studies suggest that consultation sessions are beneficial; however, they do not indicate what about the sessions may have assisted the SWD. The current study attempted to begin determining which consulting activities may be beneficial by examining the activities in which academic consultants at our university engage with SWD. At this university, consultants are all provided the same training regarding disabilities and services, but they are given freedom in structuring their sessions. Therefore, individual consultation sessions vary based on consultant and the students' needs. We were attempting to determine if consultants tended to have a particular style, or if services related to the students' specific disabilities. Clarifying the impact of these factors could help institutions of higher learning select student-changing services that have maximum benefit for SWD, and may encourage institutions that are not providing such services to do so. In turn, this could translate into greater academic success and increased college graduation rates for SWD.

Participant Demographics

Academic Consultants

Six trained academic consultants, who were school psychology graduate students at a university in New York State, participated as service providers. Five of the consultants were second-year students and one was a third-year student. All six were female.

The academic consultants had completed at least one year of graduate study and had a strong knowledge base in disabilities, assessment, counseling, and consultation. They also received explicit training regarding the consultant role prior to each semester of employment. Training included several days of workshops regarding types of disabilities and services. Consultants were instructed on evidence-based practices regarding organization, time management, note-taking, and study skills that they could then teach to SWD. They were also taught about legal requirements, as well as agency and university policies regarding SWD on campus.

With regard to their role, consultants contacted SWD regularly to organize and encourage receipt of accommodations. Consultants also facilitated and coordinated meetings with students to address skill deficits. They collaborated with faculty and parents on an as-needed basis, as well.

Student Participants

Of the 69 undergraduate SWD signed up for consultation at the university, 33 participated (14 females, 19 males). The majority of participants were Caucasian (84.8%), with 9.1% of the sample identifying as Black/African-American, and 6.1% identifying as Hispanic/ Latino. Their mean age was 20.68 years (SD = 2.9; Range = 18-31). They had attended an average of 2.24 years of college, with 33.3% in their first year, 30.3% in their second year, 15.2% in their third year, and 21.2% in their fourth year or beyond. A variety of academic majors were represented. Specifically, 27.3% of participants majored in Art and Design, 21.2% in Engineering, 15.2% in Psychology, 9.1% in Environmental Studies/Geology, 6.1% in Criminal Justice, 18% in other areas, and 3% were undecided. With regard to disability, 36.4% of the sample self-identified as having Attention Deficit Hyperactivity Disorder (ADHD), 30.4% as Learning Disability (LD), and 6.1% as both ADHD and LD. Autism Spectrum Disorder (ASD) was reported as the primary disability for 12.1% of the sample, medical disabilities by 9.1%, anxiety disorders by 3%, and auditory processing by 3%. The mean GPA of the sample was 2.63 (SD = .62; Range = 1.02-3.73), lower than the mean GPA (3.01) of all students at the university in the same semester (L. Casey, personal communication, July 31, 2017).

The Present Model of Academic Consultation

The office that serves SWD at the authors' university uses a model that was developed over fifteen years ago. As described by O'Connell et al. (2017),

the office utilizes a multi-tiered system of support (MTSS) with three levels in order to support all students on campus, including providing academic consultation to SWD within the third tier. The office employs a full-time director and assistant director, as well as six academic consultants who work in the office for 15 hours per week; see Figure 1 for hierarchy of personnel and their responsibilities.

Within the office, all university students are provided the opportunity to receive academic support, similar to what is provided by learning centers on other campuses. For example, group and individual tutoring, supplemental instruction, and writing center services are coordinated within the office. Academic consultants work with students without disabilities (SWOD) when recommendations are made by faculty or staff, as well. Having such a model where services are provided to SWD and SWOD in the same office allows for consistency in the provision of services and accommodations. It also reduces the resources utilized, as duplicate services are not provided in separate settings for SWD and SWOD. At institutions where learning centers already exist, academic consultation could be incorporated to focus primarily on particular populations of students (e.g., SWD) or specific skills (e.g., social skills or time management/ organization) that may not be addressed within current models. Strategically implementing consultation in these ways would expand support for students and prevent duplication of services.

All SWD at the present university are assigned an academic consultant, with whom they can meet regularly. Consultation is the service most commonly used by SWD and consists of individual meetings to address environment-changing and student-changing strategies. The frequency of meetings is determined by students' needs and willingness to participate. In general, SWD are encouraged to meet with their consultant at least monthly. Weekly or biweekly meetings are suggested to first year students due to transition concerns.

The consultants may offer a variety of services. These services include organization/time management, note-taking/reading comprehension strategies, goal setting, self-advocacy, stress management, school work, and social skills. Additionally, rapport building is an important activity that is used in consultation sessions to foster a relationship that encourages use of services. See Figure 2 for a description of the specific activities within each service. During the study, consultants conducted sessions as they typically would with students, but after each session, consultants recorded the percentage of time devoted to each consultation service. To ensure that consultants cat-

egorized in-session activities similarly, training was provided the week prior to the start of the semester. During training, consultants received a list of consultation services (Figure 2) that attempted to capture all of the activities typically completed in consultation sessions. After reviewing the list, the consultants watched three training videos and then estimated the percentage of time they witnessed each of the activities. Results were discussed after viewing each video and indicated strong consistency among consultants.

Evaluation of Observed Outcomes

Although there was a large range (1 – 20), SWD attended a mean of 7.6 sessions ($SD = 4.74$) with their academic consultants within one semester. Of more importance, however, were the activities that occurred within sessions. Analysis of the time spent in sessions indicated that the majority was focused on school work ($M=32\%$) and organization/time management ($M=20.8\%$). Self-advocacy ($M=11.52\%$) and goal-setting ($M=10.01\%$) seemed to be used strategically in response to specific student concerns. Rapport building, note-taking/reading comprehension strategies, stress management, and social skills were used infrequently.

To analyze the activities completed during academic consultation sessions, data for each session were plotted graphically for all participants by percentage of time spent in each of the nine categories listed above. A separate graph was created for each participant. Data points for each activity were connected across sessions to create one line for each activity. In order to identify patterns across and within sessions, the graphs were visually inspected by placing each graph side by side based upon possible categories of influence, including disability type and academic consultant. It seemed possible that students with the same type of disability may show similar patterns of focus in their sessions. Additionally, it could have been the case that consultant strengths or areas of interest could result in the use of specific services with all of the students on their caseload.

No patterns emerged when the graphs were organized by disability or by academic consultant. Students did not necessarily focus on tasks that appeared related to their disability. For example, students with ASD did not tend to work on social skills. Further, each consultant utilized a variety of activities; nearly 70% of the SWD worked on at least six skills across their sessions. This suggests that the consultants responded to individual student needs.

Upon visual inspection of all 33 graphs simultaneously, four patterns of consultation became apparent. These patterns are included in Figures 3 through 6. The most frequently occurring pattern was a focus primarily on schoolwork; 39.4% of the SWD spent the majority of their sessions managing school-related activities. Several SWD (24.2%) shifted focus frequently throughout sessions. Visual inspection of these graphs showed variation in the amount of time spent on specific skills from session to session or several skills addressed within each session. Organization and time management was the main focus for 15.2% of students. The final pattern depicted in the graphs (9.1% of SWD) was shifting between schoolwork and interfering needs. For these students, the focus of most consultation sessions was schoolwork, but in other sessions, the focus shifted to requisite skills (e.g., stress management, goal setting, or organization) needed to complete schoolwork. Approximately 12% of participants attended too few sessions to determine a pattern of consultation. In these cases, the SWD had attended no more than two sessions and the percentage of time spent within each category varied from session to session. Because there were so few data points, clear patterns could not be determined.

Implications

There were several findings about the session content that appear to be relevant in planning services for SWD. First, it was evident that academic consultants were student-centered in meeting diverse needs across sessions. This was observed in both the range of activities implemented and the apparent changes to services provided when interfering issues arose. Most of the consultants provided support in all of the categories at least once with each student. Additionally, even when a consultant spent most of their time assisting a student with one particular skill, such as academics, they changed the focus of sessions when other difficulties were shared by the SWD. We cautiously view this finding as positive, as it appears to meet the students' needs which may lead to greater meeting attendance. However, it may be the case that what SWD *want* to address in sessions is not what they *need* to do to improve academically.

Second, the results indicate that the majority of time spent in consultation sessions focused on school work and organization/time management. This is not surprising given that the largest concern for students is likely to be completion of their schoolwork. It should be noted that this finding occurred even though the university offers tutoring services. Perhaps this is due to the strong relationships established between consultants and students or the higher level of academic needs among SWD. Further, over one third of the

participants in this sample were diagnosed with LD, suggesting that academic difficulties in a particular area would be the prominent goal for seeking consultation support.

A third finding indicated that although the consultants tended to focus largely on a small number of services (i.e., school work and organization/time management), they did use other services on occasion. This suggests that providing training in all of these areas is warranted.

Moreover, we did not identify a link between disability type and student needs, as measured by activities completed within consultation sessions. Thus, although logic would suggest that SWD may benefit from learning skills that may eradicate their symptoms, it seems that matching students to specific activities based on disability alone may not best meet their needs. Instead, each SWD's individual needs could be determined, as was done by the consultants in this study, and reevaluated in each meeting. Again, further assessment of consulting sessions in relation to college success would be needed to determine if this is the case.

One important feature of this consultation model is that participation is voluntary. Given that SWD in all academic years *chose* to use consultation services, and most often, attended multiple sessions, it appears that they valued the services. Thus, offering a range of services beyond those that are legally required appears warranted. For example, though SWD are provided with exam accommodations, it does not mean they know how to study or take the exam; consultants can play an important role in enhancing these skills.

Although this model holds important practical implications about academic consultation, there are some limitations to both the study and the model. Due to the small number of participants that were tracked, it was not possible to conduct any inferential statistical analyses regarding the activities conducted in consultation sessions. Additionally, consultants were only asked to track services for one academic semester and SWD could choose not to participate. Tracking in-session activities as a regular part of consultation may be considered and would allow for a longitudinal review of services, as well as determination of whether specific services predict academic success.

Although further research is needed to fully evaluate the impact of each aspect of this model of academic consultation, the analyses that exist suggest that it is beneficial overall (e.g., Lighthouse, 2005). It has been assumed that part of the program's success is the nature of the *relationship* between consultants and SWD, rather than the activities that occur. Further research could evaluate this assumption, as

well as whether consultation in small groups might be similarly beneficial. Regardless, adding in a regular, personal context may be beneficial for SWD. In this instance, it was decided to use school psychology graduate students as the consultants, as they are already trained in completing most of the required tasks. There are benefits to this approach, both in terms of cost to the university and because of the experience gained by the graduate students. However, the pitfall to using graduate students is they generally remain on campus for only two or three years, and as a result, most often SWD have at least two consultants while attending the university. It is unknown whether the transition from one consultant to another impacts either the focus of activities within sessions or student outcomes. To address this, larger numbers of students should be followed for longer periods of time in order to discern the efficacy of consultation across consultants.

Further, the use of graduate students in education, special education, counseling, or psychology, as well as traditional employees with degrees in these fields could also be trained to serve as consultants. If an institution were to follow this model, consultants would likely benefit from explicit training and preparation on how to conduct a wide array of activities with SWD, and from continued supervision in implementing these services.

References

Behling, K., & Linder, K. (2017). Collaborations between centers for teaching and learning and offices of disability services: Current partnerships and perceived challenges. *Journal of Postsecondary Education and Disability, 30*, 5-15.

Bellman, S., Burgstahler, S., & Hinke, P. (2015). Academic coaching: Outcomes from a pilot group of postsecondary STEM students with disabilities. *Journal of Postsecondary Education and Disability, 28,* 103-108.

Brand, B., Valent, A., & Danielson, L. (2013). *Improving college and career readiness for students with disabilities.* College & Career Readiness & Success Center, American Institutes for Research. Retrieved from https://ccrscenter.org/products-resources/improving-college-and-career-readiness-students-disabilities

Butler, D. (1995). Promoting strategic learning by postsecondary students with learning disabilities. *Journal of Learning Disabilities, 28*, 170-190.

Couzens, D., Poed, S., Kataoka, M., Brandon, A., Hartley, J., Keen, D. (2015). Support for students with hidden disabilities: A case study. International *Journal of Disability, Development, and Education, 62*, 24-41.

Cowles, J. R., & Keim, M. C. (1995). The graduation rate, intellectual functioning level, and matriculation time of university students with learning disabilities. *College Student Journal, 29*, 145-149.

Field, S., Parker, D., Sawilowsky, S., Rolands, L. (2013). Assessing the impact of ADHD coaching services on university students' learning skills, self-regulation, and well-being. *Journal of Postsecondary Education and Disability, 26*, 67-81.

Janiga, S. J., & Costenbader, V. (2002). The transition from high school to postsecondary education for students with learning disabilities, A survey of college service coordinators. *Journal of Learning Disabilities, 35*, 463-470.

Lighthouse, A. G. (2005). The relationship between SAT scores and grade point averages among post-secondary students with disabilities. *Dissertation Abstracts International Section A, 66*, 2492.

Mull, C., Sitlington, P. L., & Alper, S. (2001). Postsecondary education for students with learning disabilities: A synthesis of the literature. *Exceptional Children, 68*, 97-118.

O'Connell, L., Burch, A., & Shea, E. (2017). School psychologists as facilitators of multi-tiered systems of support in postsecondary education. *The School Psychologist, 71*(3), 15-26.

Parker, D. R., Hoffman, S.F., Sawilowsky, S., & Rolands, L. (2011). Self-control in postsecondary settings: Students' perceptions of ADHD college coaching. *Journal of Attention Disorders, 17*(3), 215-232.

Rath, K. A., & Royer, J. M. (2002). The nature and effectiveness of learning disability services for college students. *Educational Psychology Review, 14*, 353-381.

Robinson, C., & Gahagan, J. (2010). Coaching students to academic success and engagement on campus. *About Campus*, 26-29.

Troiano, P. F., Liefield, J. A., & Trachtenberg, J. V. (2010). Academic support and college success for postsecondary students with learning disabilities. *Journal of College Reading and Learning, 40*(2), 35-44.

About the Authors

Amy Lynn Button received her B.A. degree in psychology from St. Bonaventure University and her M.A., CAS, and Psy.D. from Alfred University. She served as a school psychologist for the Dansville Central School District and has done preschool-level psychoeducational assessments for area school districts. She is currently a professor in the Department of Psychology at Alfred University. Her primary research interests include services and outcomes for students with disabilities. She can be reached by email at: button@alfred.edu.

Jessica S. Iwachiw received her B.A. degree in psychology from State University of New York at Geneseo, as well as her M.A., CAS, and Psy.D. in school psychology from Alfred University. She has worked as a school psychologist in the Douglas County School District in Colorado since 2014. Her research interests include equine-assisted psychotherapy and the human-animal bond. She can be reached by email at: jiwachiw@gmail.com.

Jana G. Atlas received her B.A. degree from SUNY Binghamton, MSW from SUNY Albany, and Ph.D. from Wayne State University. Her experience includes working as a psychologist for Tioga County Mental Health Clinic, Owego, NY and maintaining a private counseling practice. She is currently a professor in the Division of Counseling and School Psychology at Alfred University. Her research interests include eating disorders, animal-assisted therapy, and students with disabilities in higher education. She can be reached by email at: atlasj@alfred.edu.
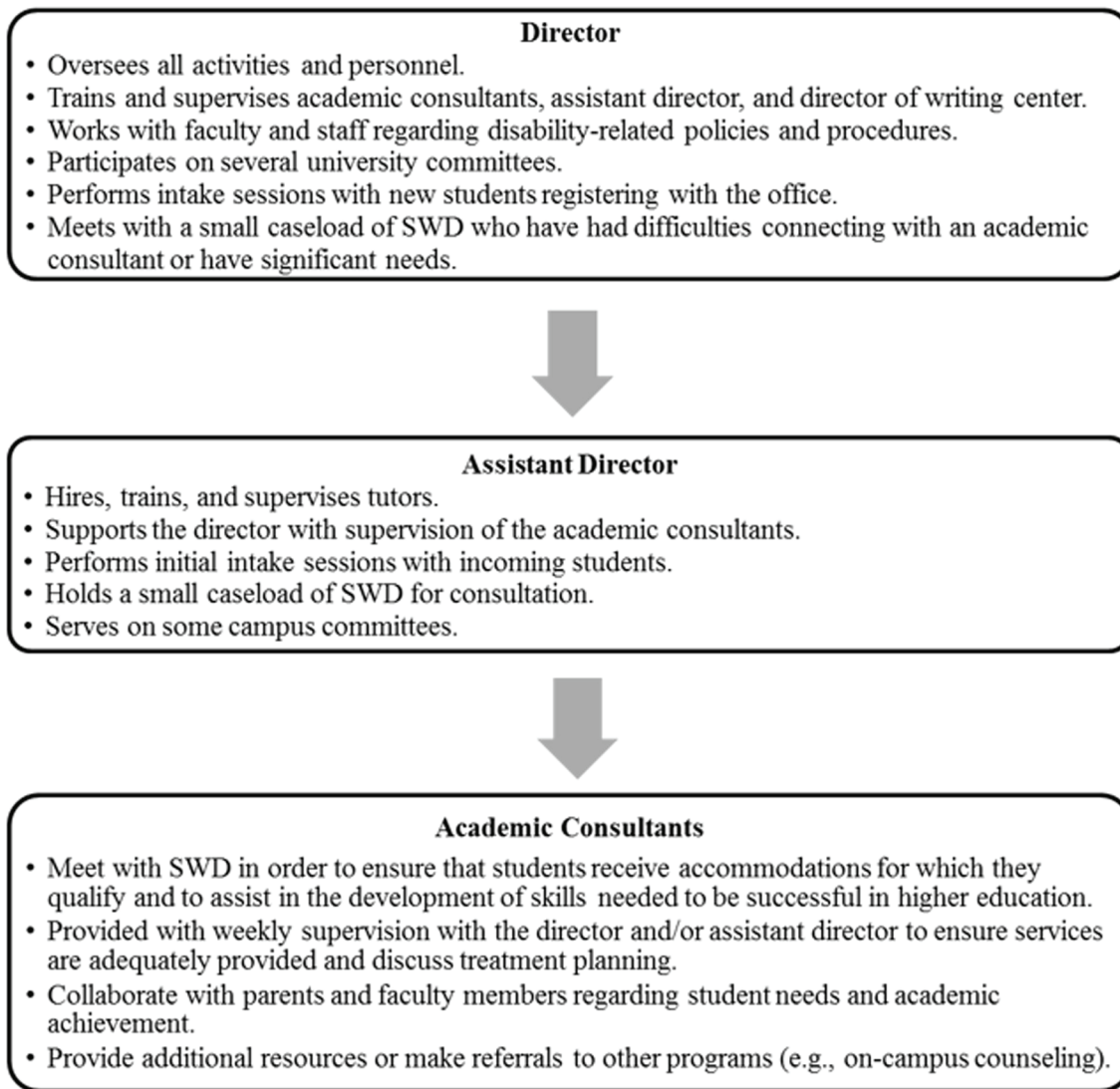
Director
- Oversees all activities and personnel.
- Trains and supervises academic consultants, assistant director, and director of writing center.
- Works with faculty and staff regarding disability-related policies and procedures.
- Participates on several university committees.
- Performs intake sessions with new students registering with the office.
- Meets with a small caseload of SWD who have had difficulties connecting with an academic consultant or have significant needs.

Assistant Director
- Hires, trains, and supervises tutors.
- Supports the director with supervision of the academic consultants.
- Performs initial intake sessions with incoming students.
- Holds a small caseload of SWD for consultation.
- Serves on some campus committees.

Academic Consultants
- Meet with SWD in order to ensure that students receive accommodations for which they qualify and to assist in the development of skills needed to be successful in higher education.
- Provided with weekly supervision with the director and/or assistant director to ensure services are adequately provided and discuss treatment planning.
- Collaborate with parents and faculty members regarding student needs and academic achievement.
- Provide additional resources or make referrals to other programs (e.g., on-campus counseling).

Figure 1. Hierarchy of roles and responsibilities of personnel at office for SWD.

Rapport Building

- Engaging student in conversation intended to build or maintain the relationship

Organization/Time Management

- Advising, consulting about, directly instructing, or listening to the student describe organization and time management activities such as: noting important dates in syllabi; making daily, weekly, monthly, semester calendars; making to-do lists; organizing a planner; putting work into appropriate folders/binders/etc.; or labeling folders, binders, class materials

Note-Taking/Reading Comprehension Strategies

- Advising, consulting about, directly instructing, or listening to the student describe appropriate note-taking strategies and reading comp strategies such as: going over notes and pulling out important information; teaching students how to take notes; training students in active reading; checking for comprehension; or summarizing reading

Goal Setting

- Advising, consulting about, directly instructing, or listening to the student describe activities such as: determining what should be done (academically, socially, athletically, etc.) for the day, week, semester, year; in session, in particular classes, in college overall or reviewing progress toward goals

Self-Advocacy

- Advising, consulting about, directly instructing, or listening to the student describe self-advocacy skills, such as: communicating with professors (role plays, suggestions about working when speaking to professors); planning for students to reach out to others on their own (signing up for notes, tutors, exam accommodations, etc.); or discussing progress toward self-advocacy

Stress Management

- Advising, consulting about, directly instructing, or listening to the student describe stress management skills, such as: talking about how to reduce stress (e.g., avoiding stressors, expressing feelings/counseling, focusing on the positive, arranging time for fun/relaxation, breathing exercises/relaxation videos) or discussing strategies student already has

School Work

- Advising, consulting about, directly instructing, or listening to the student describe anything related to completing actual course work and/or focusing on specific assignments such as: study strategies (e.g., reviewing notes, making flashcards/study guides); editing papers; brainstorming ideas for papers, projects, etc.; or reviewing exams

Social Skills

- Advising, consulting about, directly instructing, or listening to the student describe social skills, such as: planning events in which students can attend in order to socialize; practicing socialization in session (e.g., role plays); pointing out socially inappropriate behaviors; or discussing social norms (e.g., eye contact)

Off-Task

- Discussion about irrelevant issues

Other

- Anything that does not fall into one of the above categories

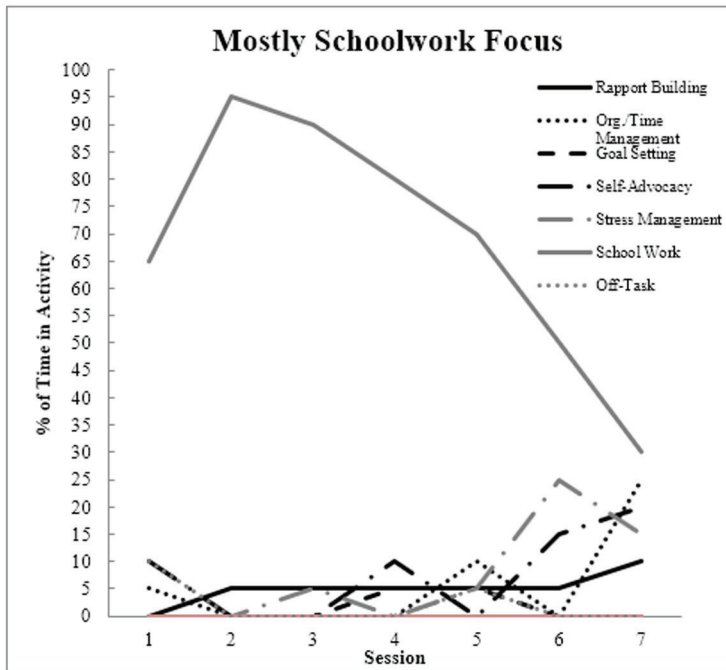*Figure 2.* Operational definitions for activities tracked in consultation sessions.

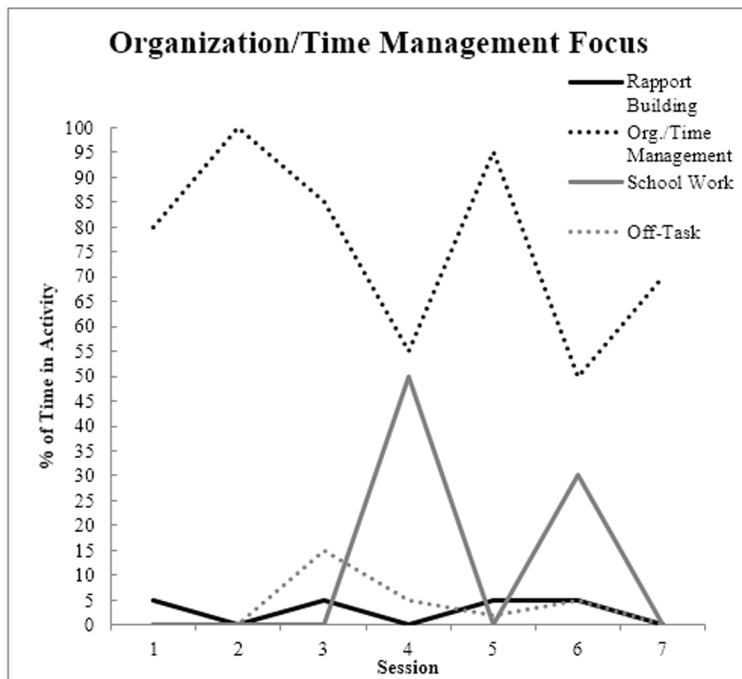*Figure 3.* Focus of sessions primarily on school work.

Figure 4. Focus of sessions primarily on organization and time management.
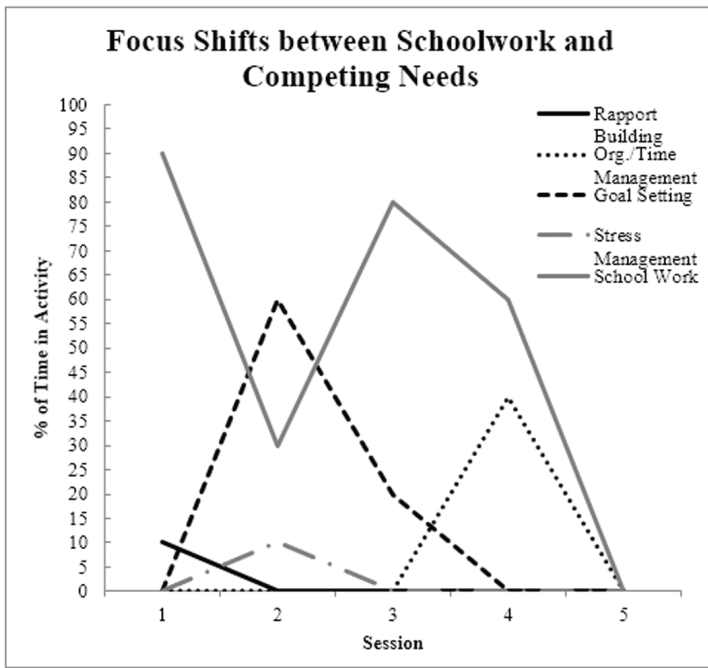
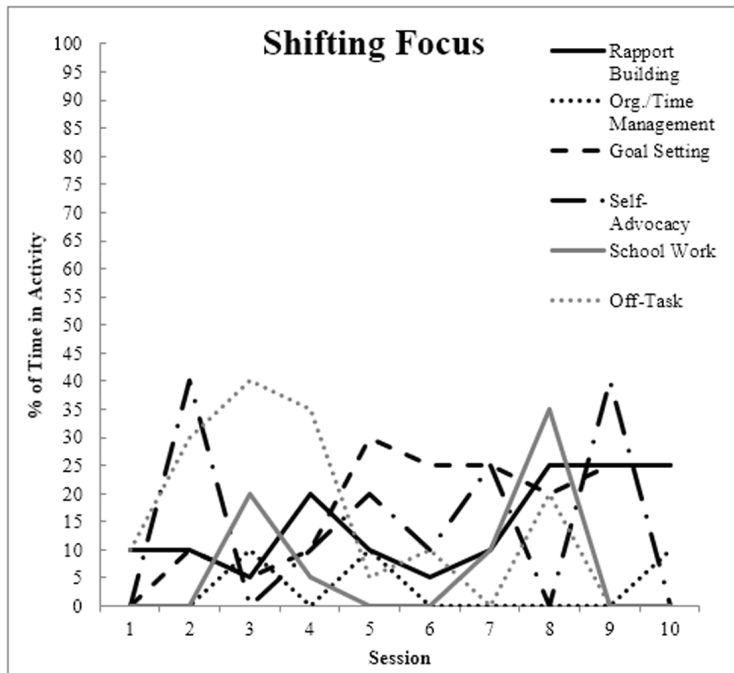*Figure 5.* Focus of sessions shifted between school work and competing needs.

Figure 6. Focus of sessions shifted among several different activities.