RUTGERS HEALTH

Office of Disability Services

Fall 2024 Newsletter

Hello from the Rutgers Health Office of Disability Services!

Would you like additional information or a presentation in your course? Let us know: odsrbhs@rbhs.rutgers.edu

We invite your feedback https://rutgers.ca1.qualtrics.com/jfe/form/SV_5tcPBj4uh1vpwqi

The RH (formerly RBHS) Office of Disability Services (RHODS) provides the necessary tools, resources and support for disabled students to become responsible decision-makers and self-advocates in charge of their own future.

From: GlobalMindED is an Inclusive Success NetworkTM dedicated to creating a capable diverse talent pipeline, and connecting students to role models, mentors, internships, and jobs.

Celebrating Disability Pride and Achievement

October is National Disability Employment Awareness Month, a time to celebrate the contributions of individuals with disabilities to the workforce. **This annual observance highlights the importance of creating inclusive workplaces where everyone has equal opportunities to succeed.**

The Americans with Disabilities Act (ADA) is a landmark civil rights law that has played a crucial role in supporting individuals with disabilities. Enacted in 1990 [and updated in 2008 with the ADA Amendment Acts] the ADA prohibits discrimination against individuals with disabilities in all areas of public life, including employment, education, and transportation. By ensuring equal opportunity and access to essential services, the ADA has significantly improved the lives of millions of Americans with disabilities.

The ADA defines a disability as a physical or mental impairment that substantially limits one or more major life activities. This broad definition encompasses a wide range of conditions, including:

Physical disabilities: These include impairments such as blindness, deafness, mobility limitations, and chronic illnesses like arthritis or diabetes.

Mental health disabilities: These include conditions such as depression, anxiety, bipolar disorder, and schizophrenia.

Cognitive disabilities: These include impairments that affect learning, memory, or communication, such as intellectual disabilities, autism spectrum disorders, and attention deficit hyperactivity disorder (ADHD).

Despite the progress made since the passage of the ADA, individuals with disabilities continue to face significant challenges. These include:

Accessibility barriers: Many public spaces, including businesses, schools, and government buildings, are not accessible to people with disabilities. This can make it difficult for them to participate fully in society.

Discrimination: People with disabilities may experience discrimination in employment, education, and other areas of life. This can lead to financial hardship, social isolation, and limited opportunities.

Stigma and prejudice: Negative attitudes and stereotypes about people with disabilities can contribute to discrimination and exclusion.

Lack of support services: Many individuals with disabilities need specialized support services to help them live independently and participate fully in society. However, these services may not be available or affordable.

The ADA plays a crucial role in addressing these challenges by providing legal protections for individuals with disabilities and requiring businesses and other entities to make reasonable accommodations to ensure equal access. By raising awareness of disability rights and promoting inclusion, we can create a more just and equitable society for everyone.

Rutgers Health
Office of Disability Services

Providing Equal Access

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From Inside Higher Ed, Johanna Alonso

PTSD Diagnoses More Than Double Among College Students

Rates of post-traumatic stress disorder among college students more than doubled from 2017 to 2022, jumping from 3.4 percent to 7.5 percent, according to new research encompassing five years of data from the Healthy Minds Study. The increase was sharpest during COVID-19 lockdowns in 2020.

In a *New York Times* report about the finding, Shannon E. Cusack, a psychologist who has studied PTSD in college students, said that researchers in her field had disagreed on whether disruptions young adults experienced during the pandemic constituted traumatic events—which, according to diagnostic criteria, include "death, threatened death, actual or threatened serious injury, or actual or threatened sexual violence." "They're causing symptoms that are consistent with the PTSD diagnosis," Cusack said. "Am I not going to treat them because their stressor doesn't count as a trauma?"

The Center for Collegiate Mental Health at Pennsylvania State University previously found that almost 50 percent of students who attend on-campus counseling reported experiencing a traumatic event. According to the National Center for PTSD, most people experience at least one traumatic event in their lives, but the majority of traumatic events do not lead to developing PTSD.

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From NH and NPR

Disability rights groups in **New Hampshire are pushing to end use of the word "special" when talking about people with disabilities.**

They say the term is demeaning, casts people with disabilities as "others" and suggests they don't belong in the same spaces as everyone else.

"When we say that people with disabilities are 'special,' we're trying to dress up our tendency to think of people with disabilities as not being normal, not being part of our community," said Patricia Vincent-Piet, a disability advocate and member of the New Hampshire Council on Developmental Disabilities.

She said **people often use that euphemism because they're uncomfortable with people with disabilities.**

"They're thinking that this person can't do that," she said. "This person can't live in the community with them. They can't be your neighbor. They can't live in their own home. They can't work alongside you."

The council is one of the groups behind the "**Stop Special**" campaign, along with the University of New Hampshire's Institute on Disability and the Disability Rights Center of New Hampshire.

The campaign – its slogan is "Let's get the word out!" – encourages individuals and organizations to take a pledge to stop using the word. That pledge is on the campaign's website, along with a language guide and videos of people with disabilities talking about why the word is harmful.

In the long term, she said, she hopes to see the word dropped from disability-related laws and policies.Vincent-Piet said calling supportive services and accommodations "special" can suggest they're somehow an unnecessary expense – rather than things that allow people to live full lives. In education, sports and other contexts, the term can also suggest people with disabilities should be separated from other members of the community.

The goal is to "elevate the voice of people with disabilities who are saying, inclusion doesn't mean we should have something segregated or 'special' or different," said Isadora Rodriguez Legendre, the council's executive director. "We're just asking for supports and services that are equitable, that allow us to access things like education and employment and community spaces equitably."

What we should be doing instead, Vincent-Piet said, is creating a community that everyone can access. She said terms like "accessible" or "inclusive" do a better job conveying that.

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From Better Allies, a weekly newsletter from Karen Catlin

Avoid benevolent ableism

Benevolent ableism is a form of prejudice that's rooted in supposedly doing good things for disabled people, but often has the opposite effect.

It shows up in empathetic comments that suggest someone needs to be protected. For example, "I'll give the presentation at the conference, so you don't have to worry about the airline damaging your wheelchair." Or, "You should consider working part-time so that you can get more rest."

It can happen because of assumptions a disabled person needs assistance.

Haley Moss, an autistic attorney, author, and neurodiversity advocate, wrote an article for Fast Company titled, How to react when an employee discloses a disability. She shared this simple but essential piece of advice:

"When offering support, try not to fall into the well-intentioned trap of benevolent ableism, where you offer help when it is neither wanted nor needed."

Instead, Moss recommends asking how you can be supportive. As she wrote, "The answer might surprise you."

Don't "try out" a disability

Here's one more action in honor of Disability Pride Month: Don't "try out" a disability.

Karen Catlin (author of "Better Allies) learned from Demystifying Disability: What to Know, What to Say, and How to Be an Ally by Emily Ladau **that pretending to have a condition is not the way to learn about someone else's experience.**

When describing disability awareness events that offer simulations for participants, Ladau wrote,

"They might be asked to wear earplugs as a way to understand hearing loss, or a blindfold to understand vision loss. They might be asked to try pushing themselves around in a wheelchair or walk using crutches. Conventional wisdom may say that people learn by doing, but let me tell you,

> **when it comes to trying to understand the experiences of people with disabilities, this is absolutely not the way to do it. A game of pretend won't help you understand a person's entire life experience and identity. In fact, simulations often have the totally opposite effect on participants, evoking feelings of pity and fear around disability."**

She also shared, "I'll never forget the time when a resident assistant (RA) in my college dorm asked if she could borrow my wheelchair for her disability awareness event—an obstacle course she'd set up in the lounge. What was I supposed to do while she was using it? Sit stranded in my room while the other people who lived in my residence hall treated my expensive mobility equipment like a toy? I mean, don't get me wrong, life on wheels can be fun. But it's not a game. I remember feeling like less of a person in that moment. The RA didn't care about giving me a chance to educate people about my experiences or giving nondisabled people a genuine opportunity to learn about disability. It was really all about letting people get a kick out of pretending to be me for a few minutes. Needless to say, I declined her request."

Ladau's recommendation? Instead of trying out a disability, seek information from disabled people. Read books, listen to podcasts, watch documentaries, and engage in conversations.

All are great activities for better allies.

Limited Funds Available for Disability Related Needs

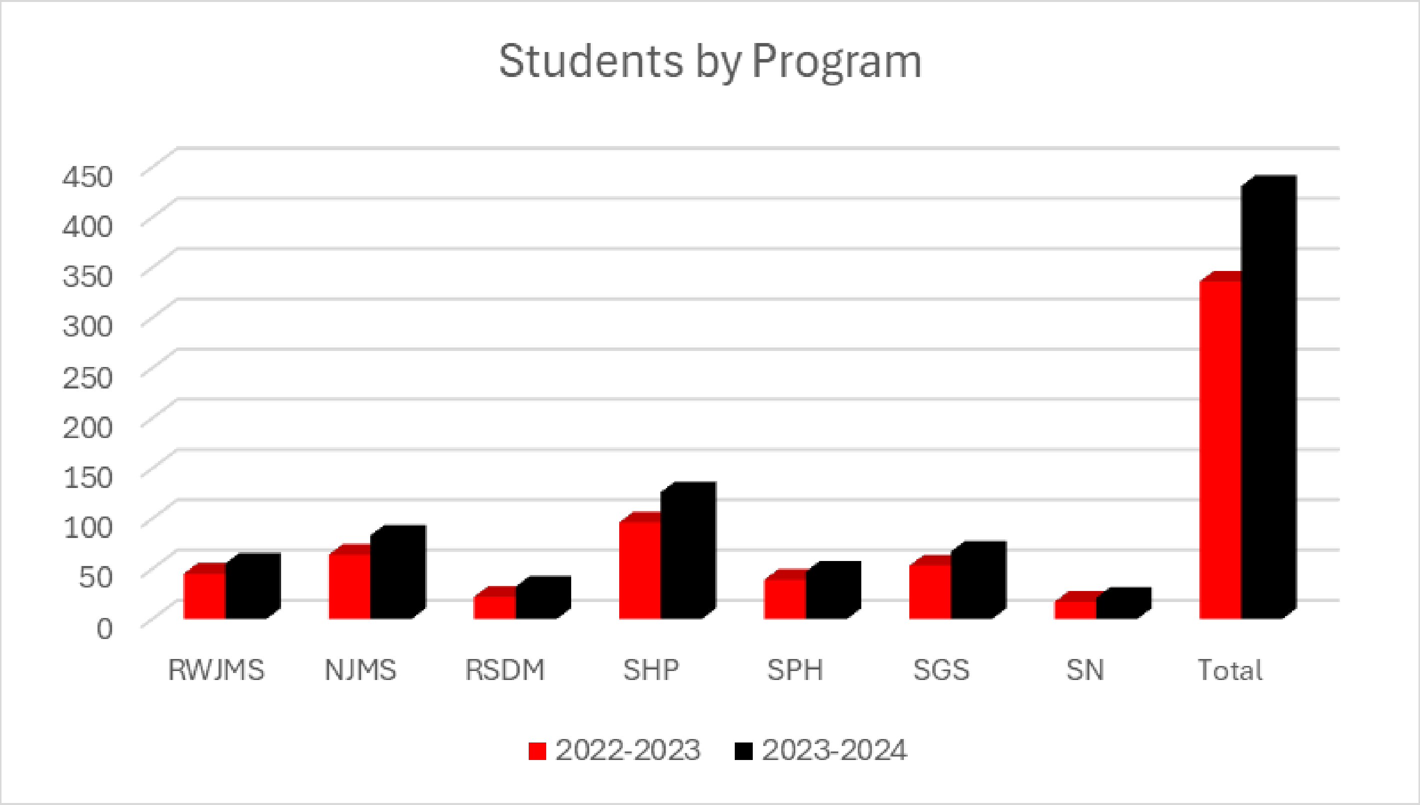
Rutgers Health, with support from the Rutgers Board of Trustees and individual donors, has established a Student Emergency Fund to assist students with urgent financial need pending receipt of other financial aid or available resources. These funds are modest awards that are intended to cover short term housing emergencies, health needs, **psychoeducational testing** or other academic needs, food insecurity or similar unexpected expenses. **Students are required to complete the online request form, linked below, and provide supporting information when/where possible.** Awards are made as funds are available:

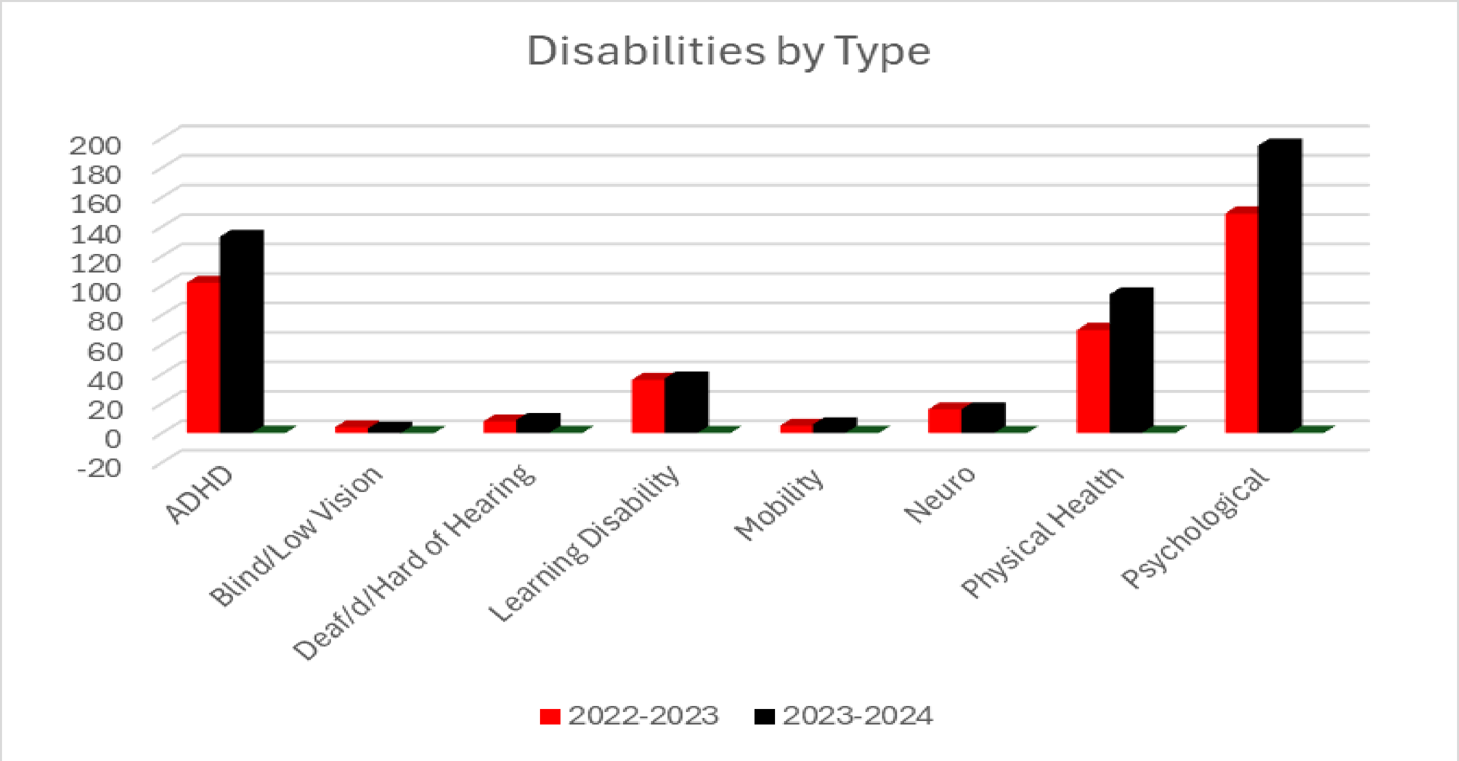
https://oasa.rbhs.rutgers.edu/EmergencyFund

By the Numbers

Rutgers Health Office of Disability Services continues to see significant growth, with a **28.27% increase** (Fall 2023 to Fall 2024) in students who disclosed one or more disabilities

Students By School Totals	2022-2023	2023-2024	Percentage	% change
RWJMS	45	55	12.76%	22.22%
NJMS	64	83	19.26%	29.69%
RSDM	22	32	7.42%	45.45%
SHP	96	126	29.23%	31.25%
SPH	39	47	10.90%	20.51%
SGS	53	67	15.55%	26.42%
SN	17	21	4.87%	23.53%
Total	**336**	**431**	**100.00%**	**28.27%**





Content sponsored and provided by University of Arkansas

The Power of Touch: Delivering Feeling from Artificial Limbs

University of Arkansas researchers are restoring a sense of touch…and hope.

More than 60 years after Dewey Hickey lost his arm, a new neural-enabled prosthetic hand system is restoring his sense of touch and is giving him a renewed sense of hope.

BREAKTHROUGH ADVANCEMENT

Hickey was in the fourth grade when he broke his arm in a bicycle accident. What doctors didn't realize was that a piece of bone fragment also cut a nerve.

"My left arm deteriorated while it was in the cast to the point that there was nothing left," Hickey explains. "The tendons, the blood supply, the muscle, everything in the front of my arm was gone. And so, I wound up with a crippled hand at 10 years of age."

Fourteen years after his accident, Hickey had his hand amputated and has used a series of prosthetics since then.

The one he utilizes now is not comparable to any of the prosthetics he's used in the past. The neural-enabled prosthetic hand system has the potential to restore a meaningful sense of touch and grip force to individuals with an upper limb amputation.

This innovative investigational device was pioneered by researchers at the University of Arkansas' Institute for Integrative and Innovative Research (I^3R) and approved by the Food and Drug Administration for investigation.

FEELING IS BELIEVING

"The hand is gone, but the nerves are still there," explains James Abbas, professor of biomedical engineering with I^3R and principal investigator. "And if we stimulate those nerves, that information goes up to the brain the same way it used to, and the person feels it as if it's coming from their fingertips."

To prepare Hickey for his new neuroprosthetic system, a team of surgeons from the University of Arkansas for Medical Sciences (UAMS), trained by the I^3R team on the specific surgical technique, implanted 15 microelectrodes into the nerves of his arm to help facilitate communication with the prosthesis.

Through the ongoing clinical trial, the prosthesis project aims to impact not only the person's physical capabilities but also their emotional and mental well-being. "When you lose an upper limb, you might get a prosthesis that allows you to hold and move things, but you don't feel anything," says Ranu Jung, U of A associate vice chancellor, founding executive director of I^3R, and distinguished professor of biomedical engineering.

"Imagine being able to touch and feel something—the emotion you get from holding a loved one's hand, touching a child's face or sensing the texture of an object. Touch and feeling are how we connect to and engage with our environment. It gives us emotional satisfaction and also impacts our mental health," Jung adds.

Since trying his prosthetic at home, Hickey has been able to use it for household tasks like cooking, professional interactions as a pastor at his church and – his favorite pastime – fishing. Perhaps most importantly, he can also now feel his wife's hand.

"I'm extremely grateful," Hickey says of his opportunity to participate in the study. "There's no way to describe what it's like to feel something when you haven't felt it for more than 60 years."

Hickey is the first Arkansan and only the second person in the world to receive the novel prosthetic device.

Learn more about how the University of Arkansas is determined to find ways to improve lives, build stronger communities and build a better world through Research and Economic Development: Discover RED.

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RH Office of Disability Services

Mission

The Office of Disability Services is dedicated to the philosophy that all Rutgers University students are assured equal opportunity, access and participation in the University's courses, programs, activities, services and facilities. We recognize that diverse abilities are a source of strength, empowerment, and enrichment for the entire university community and we are committed to the elimination of physical, instructional, and attitudinal barriers by promoting awareness and understanding throughout the university community.

Our Vision

The Office of Disability Services at Rutgers Health strives to become a model program for students with disabilities in higher education. We are committed to developing a comprehensively accessible and universally designed University that nurtures the full participation and contribution of every individual. Our team strives to provide the necessary tools, resources and supports for individuals with disabilities to become responsible decision-makers and self-advocates in charge of their own future. We envision a campus community where all individuals are welcomed, valued, and encouraged to be contributing members.

Steps to Request Accommodations:

1. Complete and submit the Registration Form:

Upon completion of this form, you will receive a confirmation email of your submission

2. Schedule an initial meeting:

Upon receipt of the registration form, a representative from ODS will contact you to schedule an intake meeting. This meeting can be conducted in person, by video call, or by phone.

3. Submit appropriate documentation:

On or before your intake meeting, please submit the appropriate documentation that meets ODS guidelines for your disability

4. **Upon completion of your intake, ODS will review your documentation**.

Students will receive a response in a timely manner with one of the following application statuses:

A. Reasonable accommodation request approved
B. More information needed
C. Accommodation not approved and why

5. Once approved, you must request your Letters of Accommodations to alert your faculty or program of your accommodations.

Complete the Letter of Accommodation Request Form

Cindy Poore-Pariseau,

ODS Director

Jenna Rose,

ODS Assistant Director

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