Hellmich: DISABILITY CASE STUDY - PSYCHOLOGICAL CONCERNS

CASE ONE:

"Jeff" has a history of significant chemical use pre-dating his tenure at Carleton. He did quite poorly academically his freshman year because of his excessive use and was mandated for a psychological evaluation. As is common with individuals who develop chemical dependency, Jeff was given a dual diagnosis: he has both Polysubstance Dependence Disorder (PDD) and an Anxiety Disorder (AD). Both these conditions interfere with his academic and social functioning.

Jeff was 'excused' from the College to complete an in-patient treatment program; it is now Fall Term of a new academic year. Jeff is continuing with his 12-Step program, regularly meets with a psychologist, and is on medication to treat his anxiety. Jeff's anxiety still interferes with his academic functioning, and his track record for substance use isn't perfect, though he is mostly successful in "staying clean."

Knowing you might have a student in your class like Jeff, how could you help him be successful?

What accommodations are "required" and/or "reasonable" to offer Jeff for the PDD? For the AD?

How do the College's obligations change if he ceases his recovery efforts?

CASE TWO:

"Susie" is an engaging, energetic, academically successful student during much of the academic year. However, she has severe Seasonal Affective Disorder (SAD) with onset mid-October, which begins to remit by late January. Despite prophylactic treatment for the SAD (initiating anti-depressant medication by early October, use of Light Box therapy, exercise, diet, and other wellness efforts), she begins to experience significant, debilitating symptoms of depression by midterms. One of her cardinal symptoms is a notable diminishment of mental clarity, ability to concentrate, and an accompanying lack of confidence in her academic skills. It takes her twice as long to read texts or write papers, and her in-class verbal participation plummets. She experiences an accompanying onset of sadness, generalized fatigue, hypersomnia, and is more vulnerable to viral illness which further impedes her academic work. Susie has disclosed this diagnosis to her academic advisor as well as to the Disabilities Office.

How might a faculty member help Susie with her academics? Susie's symptoms are variable. What accommodations should the College make, and when do "we" know when these accommodations are no longer necessary? How does Susie present a convincing case for her depression when she has an entirely different presentation in March or April?

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