



Disability Support Services Quarterly Newsletter

Please visit our website: www.ctcd.edu/disability-support

Volume 4, Issue 1 (February 2022)

Contact Information

DSS Office Location, Phone &

Fax Numbers:

Building 215, Room 111

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Toll free: 1-800-792-3348

Extension 1195

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DSS Office Hours:

Mon.-Thurs. 7:30 a.m.- 5:30 p.m.

Friday 7:30 a.m.- 11:30 a.m.

DSS Team:

Dr. Christy Shank
DSS Director

Wilma Brown-Smith
DSS Coordinator

Ron Porter
DSS Coordinator

Campus Holidays:

Presidents' Day: February 21

Spring Break: March 14-18

Good Friday: April 15

For this edition of the DSS Quarterly Newsletter, DSS shares information about Autism Spectrum Disorder, with the goal of helping to educate others about this topic.

Our DSS staff is available to service our students, faculty, and staff during business hours.

To schedule a virtual or in person appointment or for assistance with accommodations, please contact one of the following DSS Coordinators:

*Wilma Brown Smith: wbrown@ctcd.edu or 254-526-1863

*Ron Porter: ron.porter@ctcd.edu or 254-526-1822

Any questions, comments, and suggestions can be sent to:

DSS@ctcd.edu

DSS Mission Statement

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Quote of the Quarter

*"The only person who is educated is
the one who has learned how to learn
and change."*

~Carl Rogers ~

What is a Autism Spectrum Disorder?

Autism spectrum disorder (ASD) is a developmental disorder that affects communication and behavior. Although autism can be diagnosed at any age, it is said to be a “developmental disorder” because symptoms generally appear in the first two years of life. Autism is known as a “spectrum” disorder because there is wide variation in the type and severity of symptoms people experience. ASD occurs in all ethnic, racial, and economic groups. Although ASD can be a lifelong disorder, treatments and services can improve a person’s symptoms and ability to function.

*According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), a guide created by the American Psychiatric Association used to diagnose mental disorders, people with ASD have: Difficulty with communication and interaction with other people; Restricted interests and repetitive behaviors; Symptoms that hurt the person’s ability to function properly in school, work, and other areas of life

Social communication / interaction behaviors may include:

- *Making little or inconsistent eye contact
- *Tending not to look at or listen to people
- *Failing to, or being slow to, respond to verbal attempts to gain attention
- *Having difficulties with the back and forth of conversation
- *Having facial expressions, movements, and gestures that do not match what is being said
- *Having trouble understanding another person’s point of view or being unable to predict or understand other people’s actions

Restrictive / repetitive behaviors may include:

- *Repeating certain behaviors or having unusual behaviors. For example, repeating words or phrases, a behavior called echolalia
- *Having a lasting intense interest in certain topics, such as numbers, details, or facts
- *Having overly focused interests, such as with moving objects or parts of objects
- *Getting upset by slight changes in a routine
- *Being more or less sensitive than other people to sensory input, such as light, noise, clothing, or temperature
- *People with ASD may also experience sleep problems and irritability.

Although people with ASD experience many challenges, they may also have many strengths, including the following:

- *Being able to learn things in detail and remember information for long periods of time
- *Being strong visual and auditory learners
- *Excelling in math, science, music, or art

Source: <https://www.nimh.nih.gov/health/topics/autism-spectrum-disorders-asd#:~:text=Autism%20is%20known%20as%20a,symptoms%20and%20ability%20to%20function.>

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Volume 4, Issue 2 (May 2022)

Contact Information

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DSS Summer Office Hours:

Mon.-Thurs. 7:30 a.m.- 5:30 p.m.

Closed on Friday

DSS Team:

Dr. Christy Shank
DSS Director

Wilma Brown-Smith
DSS Coordinator

Ron Porter
DSS Coordinator

Important Dates:

Memorial Day Holiday: May 30

Summer 2022 Semester: May 31

Juneteenth Holiday: June 20

Independence Day Holiday: July 4

For this edition of the DSS Quarterly Newsletter, DSS would like to share information about potential issues with depression and anxiety among college students to help educate others about this topic.

Our DSS staff is available to service our students, faculty, and staff during business hours.

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Quote of the Quarter

*"One small crack does not mean that
you are broken, it means that you
were put to the test and you didn't
fall apart."*

~ Linda Poindexter ~

Depression & Anxiety Among College Students

According to the Mayo Clinic Health System, a study revealed approximately 44% of college students reported having symptoms of depression and/or anxiety. Increased societal pressure to achieve success and students not being equipped with necessary life skills may be contributing factors of depression and anxiety among the college population. Unfortunately, up to 75% of struggling college students are reluctant to seek help, which may lead to dropping out of college and poor academic performance.

Symptoms of depression and anxiety can include:

- * Difficulty handling schoolwork
- * Loss of interest in activities, such as clubs, sports or other social commitments
- * Changes in eating or sleeping patterns
- * Emotional outbursts, such as tearfulness or anger
- * Sense of being overwhelmed or feeling panic
- * Faulty self-assessments
- * Lack of energy

This topic is of importance as suicide is the third leading cause of death for college students. Four out of five college students who consider or attempt suicide have shown clear warning signs prior to the attempt. Such warning signs may include any of the following: Ignoring class work or skipping classes; Withdrawal from friends and wanting to be left alone; Giving away possessions; Talking about suicide; Increasing use of alcohol or drugs; Saying goodbye to people as if they won't be seeing them again.

Being alert to these warning signs may help save a life. Students who are experiencing issues with depression and anxiety should seek help from a qualified doctor, psychologist, or licensed professional counselor.

CTC students needing assistance with depression and/or anxiety can contact The Student and Employee Assistance Program/Substance Abuse Resource Center (SEAP/SARC) on our central campus. For information about this service, visit <https://www.ctcd.edu/locations/central-campus/campus-safety-wellness/student-employee-assistance-program/student-and-employee-assistance-program-seap/>

Source: <https://www.mayoclinichealthsystem.org/hometown-health/speaking-of-health/college-students-and-depression>

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Disability Support Services Quarterly Newsletter

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Volume 4, Issue 3 (August 2022)

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DSS Team:

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DSS Director

Wilma Brown-Smith
DSS Coordinator

Ron Porter
DSS Coordinator

Important Dates:

Welcome Back Bash: Sept. 1

Labor Day Holiday: Sept. 5

Columbus Day Holiday: Oct. 10

Veterans Day Holiday: Nov. 11

For this edition of the DSS Quarterly Newsletter, DSS would like to share information about etiquette when interacting with people with disabilities to help educate others about this topic.

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Quote of the Quarter

*"It does not matter how slowly you go
as long as you do not stop."*

~ Confucius ~

Etiquette: Interacting with People with Disabilities

- *People with disabilities are human - Acknowledge their differences as you would acknowledge anyone else's uniqueness and treat them "as normal." Do not talk down to them literally or figuratively.
- *Person-First vs. Identity First: Ask The Person - Person-first language puts the person before the disability (i.e. person who has cerebral palsy). Identity-first language puts the disability before the person (i.e. autistic woman). People with disabilities have different preferences on which language they use. Ask the person how they would like to be referred to. Additionally, avoid outdated terms like "handicapped" or "crippled".
- *Speak directly to a person with a disability, not to their companion or sign language interpreter - A lack of immediate response does not indicate that the person can't or won't respond.
- *Adults with disabilities are adults and deserve to be treated and spoken to as adults - Do not make decisions for them. Provide them with every option you provide those without disabilities (if the option they choose presents a difficulty concerning their disability, discuss ways you could modify the choice.)
- *If you are unsure of how you should interact with a person with a disability, just ask them - Just because someone has a disability, do not assume they need help. Do not give assistance without asking first if they want it. You can ask if the person would like help, but don't ask repeatedly or qualify their response with "are you sure?" Respect someone's choice even if it looks like they're struggling. If there is a dangerous situation, help just as you would help someone without a disability.
- *A person's mobility equipment, such as a wheelchair, scooter or cane, is part of their personal space - Do not touch or move it without permission.
- *Listen attentively when you are talking with a person who has difficulty speaking - Be patient and wait for the person to finish, rather than correcting or speaking for the person. If necessary, ask short or close-ended questions that require short answers, a nod or shake of the head. Never pretend to understand if you are having difficulty doing so. Instead, repeat what you have understood and allow the person to respond. The response will clue you in and guide your understanding.
- *People who have psychiatric disabilities may have varying personalities and different ways of coping with their disability - Some may have trouble picking up on social cues; others may be supersensitive. Ask what will make them most comfortable and respect their needs to the maximum extent possible.
- *There are visible disabilities as well as non-visible disabilities, meaning not all disabilities are apparent - A person may make a request or act in a way that seems strange to you. That request or behavior may be disability-related. For example, you may give seemingly simple verbal directions to someone, but the person asks you to write the information down. He or she may have a learning disability that makes written communication easier. Even though these disabilities are hidden, they are real.

Source: <https://www.respectability.org/inclusion-toolkits/etiquette-interacting-with-people-with-disabilities/>

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