

**“So what have we got this semester?”
Dealing with diversity among enabling student cohorts.**

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Abstract

The Open Foundation program at the University of Newcastle has always embraced students from a wide variety of backgrounds and potentially with a wide variety of disabilities and other problems that are likely to inhibit their learning. This paper addresses some of the problems encountered during fourteen years of teaching in the program, and lessons learnt in attempting to deal with diverse cohorts of students. Our job to act as a sorting mechanism for undergraduate programs carries a great amount of responsibility, not only to uphold the integrity and standards of the program but also to the individual students who risk a lot, including lifestyle, career, and relationship changes. When students are additionally burdened in this quest for change by learning disabilities, mental illness, physical disabilities, lack of confidence or over confidence, lack of Information Technology skills, no prior adult learning experiences, ESL issues, coming to terms with Indigenous, transsexual or gay identities or alternatively with discrimination based on these identities, it makes for very interesting adjustments for students and requires that staff are sensitive to all these needs and deal with them in an appropriate manner. While we have Disability officers, Counsellors and Learning Support officers, in the first instance and primarily in relation to their learning, lecturers are the initial and most immediate source of advice and encouragement. It is often to them that referring, guiding and facilitating adjustment to students' new learning environment falls. How lecturers deal with it then becomes a matter of experience, insight and initiative. This paper unpacks some of the issues teaching to diverse student cohorts entails.

Introduction

In the day to day teaching experiences in enabling programs it is likely that lecturers will encounter vast diversity in both the student cohorts and the problems they are likely to present with. While this diversity and complexity makes teaching in these programs interesting, it also poses problems for how to deal with the issues that are presented to us. Unlike undergraduate programs where there is a reasonable expectation that students will have reached a certain academic standard that guarantees their entry to tertiary study, enabling students at the University of Newcastle (UoN) are only required to be turning twenty years of age in the year of their enrolment and an Australian citizen or permanent resident. This means that students are self selected. While many come to enabling programs with considerable skills and confidence, many do not. Each semester's intake is likely to include students from any of the following categories:

Types	Examples	Strategies for support
Learning Disabilities	ADD ADHD Dyslexia	Refer to Learning Support and Disability Support
Physical Disabilities	Blindness Hearing impairments Multiple Sclerosis Cystic Fibrosis Muscular Dystrophy RSI Anorexia Nervosa Broken bones Mini strokes Cancers Chronic back pain Migraine headaches	Refer to Disability Support and Counselling if necessary
Mental Disabilities	Bipolar disorder Depressive illnesses Anxiety disorders Brain injury Substance abuse Schizophrenia	Refer to both Learning and/or Disability Support as well as Counselling service
No prior adult learning	Year 9 drop out Resistance to academic approach Reliance on strongly held opinion or stereotypes	Refer to Learning Support

Confidence Problems	Lack of confidence & self doubt about ability Over confidence	Provide guided assistance and/or refer to Counselling Service
Lack of IT skills & resources	No computer skills Fear of technology Lack of access to IT	Provide guided assistance where possible Encourage peer support
Identity issues	Gay Transsexual Indigenous Other Ethnic Other	Refer to Counselling Service or Gibalee or Wollotuka Aboriginal enclaves
Other problems	Personal or relationship issues Financial problems Work related problems	Refer to Counselling Services and/or Student support

While the Department of Employment, Education, Training and Youth (DEETYA) proposes six categories of disability and further areas of disadvantage: Physical disfigurement; Intellectual; Psychiatric; Sensory; Neurological; Learning disabilities they also include Non English Speaking (NESB); Women; Low Socio-economic Status (SES); Rural & Isolated students; and Indigenous students, the criteria proposed in this paper for enabling programs is somewhat broader. It includes problematic prior learning experiences, confidence issues, lack of IT skills and identity issues as significant factors that may inhibit learning outcomes for our students. The above categories are not exclusive, some problems may cross over or exacerbate problems in other areas, so sifting through strategies to deal with them can be even more difficult.

Learning disabilities:

For example, one year a student presented with dyslexia. However, he had a hidden agenda. He wished to demonstrate, for political purposes, that universities set dyslexic students up to fail. The student was given a great amount of individualised attention from his lecturers, and extensive work was done with him through our Disability unit, including use of Kurzweil technology (which has programs including pattern recognition, signal processing and print to speech reading machines). The student was also assisted through our mentoring program (where his mentor verbalised and deconstructed course content from the perspective of a student peer). However, these strategies were never going to succeed because, in addition to his learning disability, the student had a resistance to learning anything that conflicted with his taken for granted view of the world or with his objective to 'prove' that tertiary institutions are inadequate in dealing with learning disabilities. In teaching him introductory sociology, for example, he was never going to accept critical thinking that

did not concur with his personal opinions. Even having a scribe to assist in examinations was unhelpful because his refusal to engage with the world sociologically negated any productive outcome. Yet a sociological imagination was the very thing that could have assisted his quest to provide more services for dyslexic students when one of the major themes that subject was endeavouring to teach was social inequality and the rights of people with disabilities to access educational facilities.

The Open Foundation Program (OFP) has, however, had success with other students struggling with dyslexia, one of whom graduated with a credit average and went on to join the police force. In some instances, provision of notes on blue paper was required for dyslexic students. One of the lessons to be learnt is that few students have perfect learning skills and that teaching students how to learn must remain the main priority. Where dyslexia is concerned, students may perform well orally, but their reading skills and written work suffers, masking their competence in other cognitive skills. Cogan & Flecker (2004) suggest it is important to keep these students at the centre, rather than the periphery of the classroom. In an inclusive learning environment, lecturers have a responsibility to teach students rather than subjects. So making suggestions for alternative learning strategies can make the difference between that student passing or failing. Cogan & Flecker 's (2004:xiv) research findings suggest that dyslexics will flourish if their "individual learning styles are understood and nurtured by appropriate teaching methods". Word processing is a huge advantage where spell checks and grammar checks may alert the student to errors, but providing lecture material that enables them to visualise lecture content and teaching mind mapping for essay construction and strategies for note-taking and exam preparation is also important. Interestingly, these strategies raise standards for other students as well, so reinforcing the things taught in regard to 'Learning readiness' at the outset of the program, could also involve instruction on stages and types of learning. Such initiatives are additionally useful for dyslexic students. Once students can identify their own learning style and needs, the more likely they are to find educational success.

OFP has also had students with ADHD (Attention Deficit Hyperactivity Disorder) which is considered a mild learning problem that may coexist with other problems such as dyslexia, depression, bipolar disorder or anxiety disorder (Gilbert 2000). The difference between many school students and those who present in our enabling programs is that the latter have a defined goal, they are prepared to work hard to achieve it. While assistance can be provided with planning their assessment tasks, as adults, they must resist emotional impulses and try to overcome short term memory gaps. Henley, Ramsey and Algozzine (2002:191) suggest self management strategies for ADHD are: direct instruction in time management; dividing tasks into subunits; monitoring due dates; avoiding procrastination; filing papers; scheduling;

keeping notes in binders; teaching study skills such as active reading; reviewing key topics and subtopics; developing test taking skills. All these strategies are taught to all enabling students as a matter of course as it can never be assumed any student will have organisational skills that allow them to sustain attention or complete assessment tasks.

Physical disabilities:

This year, for the first time, OFP has a blind student who requires a seeing-eye dog. She is a delightful young woman who is courageous enough to overcome the considerable obstacles that confront her, not all to do with her loss of sight. For instance, people insist on patting the dog. An email was circulated to advise all students and staff that patting was not appropriate for a working dog. A sign was provided and placed on the dog's handle to inform people of that fact. The dog needed space to perform his job. Protocols are necessary to protect the dog. Strategies for helping this student overcome some of the impediments to learning also had to be learnt by staff: extensions were required for her essays (increasing eye strain is affecting what little sight she has left and she requires text enhancement for readings, a service provided by our Adaptive Technologies unit. This takes additional time to organise); multiple choice tests the other students received in hard copy had to be copied onto a thumb drive so she could load it onto her laptop computer which contained a program for text enhancement. She just needed to bold her desired answers and save it back onto the thumb drive so it could be checked later. That was simple. Before we hit on that strategy she was coming to the lesson and taking the paper copy of the test to be enhanced in the laboratory at the library (an added inconvenience and very time consuming for her). The lesson learnt was that we really needed to liaise carefully with the Adaptive Technology officer and program coordinator so that everyone knows exactly what is required. With this knowledge, in second semester it could be ensured that the core text the student needed was ready for use in the form she needed prior to semester starting. She was also provided with an advance copy of the Course Outline so she would know in advance what assignments she would be facing and what we would do when films were to be shown. It was explained that since her lecturers were new to this situation, she would have to remind us what she needed. It is particularly hard for lecturers to adjust to new situations when there are so many other students to cater to, so in urging patience, staff needs to be mindful that Universities have an obligation to ensure compliance with Disability policy and anti-discrimination laws.

OFP has also had deaf students who required signers. While potentially distracting to the other students, as the signer had to position herself facing the class, the class soon got used to the situation. The signer was able to accommodate the deaf students' needs by interpreting lecture and film content as well as discussions that arose during the lectures,

although the use of film was minimised because the students could not attend to both their signer and the visual aspects of the film at the same time. While this seems common sense, it requires consideration of student needs and balancing this with the needs of the larger student cohort.

OFP has had a number of students over the years with other physical disabilities. Those with back problems, repetitive strain injury (RSI), broken bones, pain issues and other conditions that required extensions and assistance with examinations. Awareness of the provisions for 'Special Consideration' was particularly important for these students. More serious conditions such as muscular dystrophy, multiple sclerosis and cystic fibrosis sometimes required liaison with the student's family which is an added layer of responsibility. Sometimes these students would push themselves much harder than their families thought healthy for them and negotiation, as well as confidentiality regarding the student's progress, was required.

When lecturers are asked to intervene in medical situations they must seek clarification of their involvement. One year a student presented a letter from her doctor informing that in the event of that student having an anaphylactic reaction her lecturers were to inject her with adrenaline kept in a pouch in her handbag. In the days before epi-pens, the injection was not to be vertically inserted, but on an angle, to prevent severing an artery which, she told me, could kill her if done incorrectly. The letter also informed that the anaphylactic reaction itself may cause death within two minutes as her airways would close rapidly in the event of her coming into contact with materials such as petrochemicals. These instructions were rather alarming, particularly since the letter was signed by a medical authority. In situations such as this, immediate clarification of the lecturers' obligations was required. Interestingly, one of my colleagues who also taught this student did not think to do so and would simply have responded to the written instructions of the Doctor. This query was forwarded to the University's legal officer and a response provided that lecturers have no legal obligation to act. The wider dilemma was that there was a moral obligation to act. Fortunately the situation did not arise. However, it required careful thinking about the fine line between legal, moral and ethical issues, but also about practical matters such as where an ambulance would have to be directed in the case of mishap. Thorough knowledge of emergency procedures for both students' and lecturers' safety is a priority. Having the number of security in the contact list of lecturers' mobile phones, details of the numbers of Counselling services at hand, and the schedule for Learning Support and ESL readily available is encouraged.

Stigma and mental illness:

Over the years, an increasing number of students are presenting in OFP with mental illnesses. Given that 20% of the population are said to suffer from some form of mental illness at some time (National Survey of Health and Wellbeing of Adults (SMHWB) 1997), it is inevitable that an increasing number of enabling students will present with related problems. Likewise, in the 2004-5 National Health Survey 13% of all adults reported experiencing high or very high levels of psychological distress in the 4 weeks prior to the survey. 50% of people reporting mental and behavioural problems had mood or affective problems and 46% had anxiety related problems (ABS 2006). This presents particular challenges for lecturers. One example was a student who revealed to the class that she self mutilated. The dilemma of her enabling studies exacerbating her condition was of concern as was the reaction of her fellow students to this disclosure. However, it was her studies that were liberating her from the cause of her distress. Her peers were quite supportive. As she learnt to think sociologically she became clearer about what had happened in her past and more determined that her future would ameliorate that past. She has since embarked on a fundraising campaign to draw attention to people with similar problems and this has been quite therapeutic for her.

Another student presented with a brain injury, the result of an accident that occurred while he was enrolled in a nursing degree. He was sent back to OFP to relearn skills. However, due to privacy issues, this was not revealed to lecturers. The first we knew of it was when the student waited until the end of the lecture when all other students had left (at 9pm at night in a secluded lecture theatre) and burst into a rage at being asked to rewrite his essay. His explanation of what had happened to him made it clear that the undergraduate program could not cope with his situation. Leaving aside the issue of personal safety, lecturers may at times be confronted with the need to gently and carefully explain why essays are not written to an acceptable academic standard and reassurance given that students will be assisted to rewrite essays. Hallahan and Kauffman (2006 in Pierangelo and Giuliani 2007:194) state the possible effects of traumatic brain injury include a long list of learning and psychosocial problems: memory, assimilating new information, sequencing, processing information, inappropriate mannerisms, failure to understand humour or social situations, tiredness, anxiety, irritability, exaggerated mood swings, depression and aggression may be manifested. Being confronted with what the student regarded as a negative response had triggered this outburst. Maintaining respect for the student and trying to calm the situation was important in this instance.

Acts of aggression can be particularly problematic when other students are drawn into the mix. On one occasion a student regularly spoke to himself in class. While viewing a film,

other students asked him to be quiet so they could listen. The student then head butted the person who had made the request and a scuffle developed at the back of the lecture theatre. Unfortunately the two lecturers in the room at the time were unaware until a few weeks later that the incident had occurred. The students had decided not to speak of the incident because they realised things were not quite right with their peer. In fact, this constituted an assault, but it was quite likely that the student was suffering schizophrenia. Any recurrence would have resulted in the Counselling service being called in immediately.

Substance abuse and effects of medication have sometimes presented issues, particularly when other students complain that someone is shooting up in the toilets or has become manic in their behaviour. The latter can be a result of failure to medicate properly and effects moods and emotions to an exaggerated extent. Bi-polar disorder may affect up to 3% of the population and can be mild to severe (National Health Survey 2006). Once the lecturer can recognise that cycles of health and illness are characteristic of bipolar disorder, allowing flexibility with due dates for assessment tasks is imperative. These students are often a delight to work with as they show great courage in managing their condition.

No prior adult learning:

Occasionally it is the case that OFP get students who have left school in Year 8 or 9 or who have had negative experiences as young people at school. In such cases, they also lack confidence and need to be carefully monitored to ensure their negative experiences are not repeated. Referral to texts that are less complicated and more clearly written can be useful, as is reassurance that difficult concepts and ideas can be broken down into simpler forms. Some of these students are reluctant to access learning support and fall by the wayside, but those who embrace all the free services the University has to offer often find their lives transformed from unskilled workers to teachers, nurses and other professional occupations. Perseverance by the lecturer and constant encouragement are key components when dealing with these students.

English as Second Language (ESL):

Reasonable tolerance is necessary for some aspects of the written work of students for whom English is their second language, as poor language skills is no indication of their capacity to think critically or research well. The nuances of English language as well as writing in an academic style provide particular challenges. The University now has an ESL support worker who runs professional programs for the students and can cater to their specialised needs. In addition to the language difficulties some of these students have to overcome is the fact that some are also refugees. These students have often had horrific experiences in their home country and are attempting to rebuild their lives. One such female

student had 5 children to support, her husband was presumed murdered in the political upheaval in her homeland. Her desire to become a nurse in consequence of the events she had experienced, and also in order to be the sole provider for her family, meant that she was desperately committed to doing well in the program and overcoming any obstacles. She was assigned a student mentor, and this worked well as the mentor program, in conjunction with counselling and ESL support, accommodated many of her needs.

Confidence problems:

There is a danger of assuming that students who lack confidence do not have competence in academic learning. These students are likely to have other problems which may overlap with relationship problems (students may, for instance, confide to lecturers about domestic violence or relationship breakdowns – particularly where they feel the need to explain reasons for granting of extensions) or they may have had negative educational experiences previously that need to be undone; or they may suffer from some kind of depression or mental illness. Interestingly, students can also be overly confident about their progress and their expectations may not match the extent of work they are putting into their courses. On occasion, lecturers in OFP have felt threatened by students who demand a certain mark because they wish to enter a particular undergraduate program. This is problematic when their expectations do not correlate with their results. Gentle encouragement and offers of assistance in the planning stages of their essays is vital to their progress.

Information Technology:

While an increasing number of students are well skilled in word processing and IT, a significant number are still burdened by lack of knowledge of and access to word processors. This is a huge impediment and an additional cause of stress for new students. Some have never touched a keyboard, let alone negotiated Word or Excel programs. On top of everything else they have to learn, including how to access the Blackboard site (an online interactive site that allows students to access lecture notes, course outlines, grades, and have online discussions with other students); how to communicate effectively in oral and written forms; how to negotiate academic expectations, these students are doubly disadvantaged. Often their fear of technology is acute, and compounds their problems. Providing on-line IT tutorials for people who are insecure or who cannot access anything on-line is not a suitable strategy. Due to a lack of resourcing the only solution to this problem is to encourage peer support. At UoN this remains a vexing issue. IT should be a core part of any enabling course.

Identity:

Over the years lecturers have been confronted with issues relating to students searching for new identities. In the case of transsexual students additional problems have been experienced in their personal relationships where they worry about how partners and families struggle to adjust to the new situation. In these instances a duty of care is required and students should be referred to the counselling service, but they should also be made aware that they are valued and respected members of the class. Student peers have been exceptional in including these students in their study groups, so their contribution to this transition should never be underestimated. Lectures that incorporate inclusive strategies such as workshopping are useful.

In OFP we also have many female students who have undergone relationship breakups and struggled to create new identities as single mothers and independent people. Referrals to the Counselling service are vital, particularly where physical and emotional violence is present.

OFP has also formed a pathway for Indigenous students to transform their lives. Some have only recently discovered their Aboriginal heritage and are trying to relate some of the historical and sociological knowledge they acquire in the course to their current identification. This journey is characterised by apprehension as they seek to ascertain whether they would be accepted or rejected by both their past and present friendship groups and networks. Indigenous enclaves play an important role on campuses and have an excellent reputation for supporting students.

Managing Disability and Disadvantage:

Enabling educators must be mindful, as Hattie (2003:1) suggests, that “It is what students bring to the table that predicts achievement more than any other variable”. His study is aimed at identifying what matters in teaching and indicates that what teachers “know, do, and care about ... is very powerful in the learning equation” (Hattie 2003:2). According to Hattie, together, student achievement and teacher input constitutes 80% of educational outcome, a statistic over and above any other variable (including peers, home, and institutional input). For students, prior cognitive ability and disposition to learn feature highly in influence; while for lecturers: feedback, instructional quality, class environment, goals, mastery learning and teaching style and questioning techniques figure highly (Hattie 2003:4). Maintaining respect for students and encouraging them to value their learning will generally have productive results, even in the face of the problems outlined in this paper.

Recently a Disability Awareness Manual was compiled by staff of the Disability unit at UoN entitled *Working Together* (2009). Although a lengthy document, it encourages increased

staff awareness of issues relating to students with disability; it provides staff with a clear understanding of their responsibilities; and also provides some practical strategies to ensure students' needs are met. Staff is advised they have a legal responsibility to work according to The Disability Discrimination Act (1992) and Disability Standards for Education (2005). The issue of 'reasonable adjustments' is discussed, whereby staff is informed they must make every reasonable attempt to accommodate the needs of students with disabilities. The dilemma of exactly what constitutes 'inherent' requirements, however, is not defined by either of the pieces of legislation that covers this area. Lecturers are advised that they must consider what will be defensible in court as the basis of their accommodations, a factor that makes the responsibility of adhering to guidelines even more imperative. Discussion and negotiation with the student involved is considered essential. However, sometimes students choose not to disclose their disability, nor to register it with the Disability unit, nor to discuss it with lecturers. Privacy provisions then make it difficult to assist. These students are often normalising their condition by denying it or, alternatively, they might not want to draw attention to themselves because their condition affects their self concept and they do not wish to be seen as a burden. Students with legitimate disabilities should be urged to register with the Disability unit and lecturers should insist they have a right to the services provided.

In their research on how chronic illness impacts peoples' lives generally, Millen and Walker (2000) provide some parallels that can be drawn when examining the situation of enabling students with some kind of disability. In their quest to resist stigma, Millen and Walker suggest people will reframe their condition by optimising it, they may redefine their current condition as normal, or they may reorder their priorities or tasks in order to appear as if everything is running smoothly. These responses can be observed among enabling students and lecturers should take note that any kind of disability or disadvantage can be part of a delegitimising social process. In their attempts to recreate themselves, students look to academic success as a possible source of re-empowerment. Conversely, lack of academic success may contribute to loss of self esteem. Lecturers must be constantly on guard for signals that all is not going well for some students.

Conclusion:

Evidence from previous enabling conferences supports the view that the work of enabling educators is crucial to undergraduate intakes as well as the empowerment and self esteem of their students. At UoN, for example, greater than 15% of first year undergraduate students come out of our enabling programs. Yet across Australia, enabling programs are not valued for the difficult, complex and beneficial work they do. While there is a move through award systems such as Carrick to value the work of teaching and to highlight the expertise that comes with experience of teaching in these programs, greater attention needs to be paid by

university administrations to staffing and funding enabling programs. This problem is particularly exacerbated by the use of casual staff that is expected to carry heavy student loads, extensive coordinating responsibilities and burdens, such as those examined in this paper, that are not as prevalent in undergraduate programs. Every new semester brings new (and old) problems, dilemmas and challenges, you just never know what will walk through the door.

REFERENCES

- Australian Bureau of Statistics (2006b) *National Health Survey: Summary of Results Australia, 2004-5*, cat no 4364.0, ABS, Canberra
- Australian Bureau of Statistics (1997) *Mental Health and Wellbeing: Profile of Adults, Australia 1997*, cat no 4326.0, ABS, Canberra.
- Cogan, Jenny & Flecker, Mary (2004) *Dyslexia in Secondary School. A practical handbook for teachers, parents and students*, Whurr Publishers: London & Philadelphia.
- Gilbert, S (2000) "Gains in diagnosing hyperactivity", *New York Times*, June 28, D8.
- Hattie, John (2003) "Teachers Make a Difference. What is the research evidence?", *Distinguishing Expert Teachers from Novice and Experienced Teachers*, Australian Council for Educational Research, October.
- Henley, Martin., Ramsey, Roberta. S and Algozzine, Robert. F (2002) *Characteristics and Strategies for Teaching Students with Mild Disabilities*, 4th ed. Allyn & Bacon: Boston.
- Millen, Neville and Walker, Christine (2000) "Overcoming the stigma of chronic illness: Strategies for 'straightening out' a spoiled identity", Paper presented at conference of The Australian Sociological Association, Hobart.
- Pierangelo, Roger and Giuliani, George (2007) *The Educator's Diagnostic Manual of Disabilities and Disorders*, John Wiley and Sons: San Francisco.
- <http://www.newcastle.edu.au/service/ndco/resources/UoNWorkingTogetherDisabilityManual.pdf>