

Psychological Disabilities

Includes but is not limited to Depressive Disorders, Post-Traumatic Stress Disorder, Bipolar Disorders and Dissociative Disorders.

It is required that a diagnosis by a licensed mental health professional, including psychologists, psychiatrists, neurologists be provided and must include the license number of the professional. The diagnostician must be an impartial individual who is not a family member of the student.

The following guidelines are provided to assist us in collaborating with each student to determine appropriate accommodations:

A. Documentation for eligibility should be current, preferably within the last (3) years; (the age of acceptable documentation is dependent upon the disabling condition, the current status of the student and the student's request for accommodations).

B. The presence of a full-fledged Diagnostic and Statistical Manual of Mental Disorders-V (DSM, 5th edition) diagnosis mood or anxiety disorder must be documented.

- Adjustment reactions, stress reactions, anxiety or depression limited to, or a reaction to, the test-taking situation itself are rarely, if ever, a sufficient justification for an accommodation.
- A structured psychiatric interview is preferred. In the absence of such a structured interview, an itemized review of DSM-IV diagnostic criteria must be present.
- Supportive documentation of the mood or anxiety disorder should include review of family history, age of onset and course of illness, psychological tests (especially illness-specific assessments), and the history of treatment for the disorder. This supportive documentation is essential to provide external validation of the presence of the disorder. It is unacceptable for the documentation of the mood or anxiety diagnosis to be limited to a description of current symptoms.

C. The functional impairment caused by the disorder must be documented.

- Diagnosis-specific rating scales should be provided whenever possible, although global clinical assessments of severity may be acceptable.
- Detailed documentation should be provided of precisely how the mood or anxiety diagnosis causes impairment in functioning.

- Detailed documentation should be provided about the extent to which the diagnosis of a mood or anxiety disorder is linked to pervasive and disabling impairment. Note that it is rarely if ever acceptable for documentation of a disability to be limited to the test-taking situation or to have arisen (essentially de novo) around the time of the test-taking situation. Documentation should be provided concerning what accommodation is being requested, and how this accommodation will specifically remedy the illness-caused disability.

D. Documentation should be provided concerning what accommodation is being requested, and how this accommodation will specifically remedy the illness-caused disability.

- Accommodations are not generally acceptable unless they are targeted toward remedying the illness-caused functional impairment.
- Individuals may have well-documented disabilities for which no targeted accommodation is available.

E. Medical information relating to the student's needs which should include the impact of medication on the student's ability to meet the demands of the post secondary environment.

Further assessment by an appropriate professional may be required if coexisting learning disabilities or other disabling conditions are indicated.

All documentation is confidential and should be emailed to: Office of Disability Services