

I *In parallel with educational, social, technological, and legal changes in higher education, disability services has evolved rapidly, with professionals addressing increasingly complex issues on their campuses.*

The History of Disability Services in Higher Education

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In 2002, Brinckerhoff, McGuire, and Shaw observed that the field of postsecondary education and disability services had “moved through its adolescence and was embarking on adulthood” (xiii). Indeed, the field had undergone rapid expansion nationwide in the prior thirty years and grew into a full-fledged profession within higher education (Jarrow 1997). Now nearly a decade later, the field serves an estimated 11 percent of all students in higher education (National Center for Education Statistics 2009). However, the development of this sector of higher education is largely unrecognized in books covering both the history of higher education, and disability rights and history. This article will provide an overview of some of the seminal events in the development of postsecondary disability services, and will highlight some emerging trends that may influence services in the coming years.

Early Efforts

In 1864, with congressional approval, President Lincoln signed into law a bill authorizing the establishment of a college division at the Columbia Institution for the Deaf and Dumb. Under the directorship of Edward Miner Gallaudet, the National Deaf-Mute College enrolled its first student in the fall of 1864, and by 1866, had twenty-five students (including two women) from thirteen states and the District of Columbia (Gallaudet 1983). The first class graduated in 1869, and according to Gallaudet’s personal account, “the graduation of the first bachelors of arts in a college for the deaf-mutes, from what could be justly claimed to be a regular collegiate course of study, excited unusual interest in the educational world” (100).

In 1894, in response to “dislike of the presence of the words deaf-mute in the name of the college” (Gallaudet 1983, 188), the college division was renamed Gallaudet College, in honor of E. M. Gallaudet’s father, Thomas Hopkins Gallaudet. Authorized by Congress as a university in 1986, Gallaudet University now offers undergraduate degrees in 40 majors, as well as graduate degrees (History of Gallaudet University 2010) and remains the only liberal arts university in the world for the deaf (Burch 2001).

Beyond Gallaudet, examples of individuals with disabilities in higher education existed, such as Helen Keller’s attendance at Radcliffe College from 1900 to 1905 (Nielsen 2001) but were largely isolated. Changes began to occur at the end of World War I and, more significantly, at the end of World War II.

Early to Mid-Twentieth Century

After World War I, the federal government passed the Vocational Rehabilitation Act of 1918, which led to educational assistance for some veterans with disabilities (Chatterjee and Mitra 1998). College study occurred in such areas as industry, trade, and agriculture. Professional training was also provided for some veterans with prior college experience (Gelber 2005). Another notable program was established at the Ohio Mechanics Institute (OMI) in Cincinnati, which provided services to over 400 veterans with disabilities. In conjunction with a veterans group at the University of Cincinnati, the OMI students formed the Disabled American Veterans, which continues to be active today (Disabled American Veterans 1995).

In 1944, Congress passed the Serviceman’s Readjustment Act of 1944, more commonly known as the GI Bill of Rights. This legislation provided \$500 per year of educational expenses to qualified veterans depending on length of service at approved institutions (Strom 1950). This legislation resulted in an immediate impact on college campuses. Strom (1950) noted that “after the formal signing of the surrender papers, the hue and cry began all over the world to get the men home . . . this accelerated demobilization program necessarily resulted in an unexpected upsurge in applications for college training” (24). By 1946, veterans constituted 52 percent of the total college population in the United States, with over \$2 billion in federal funds being expended annually (Strom 1950).

This influx of veterans resulted in a corresponding increase in students with disabilities enrolling in college. A study of veterans with disabilities in higher education commissioned by the American Council on Education (ACE), noted:

For the first time in the history of American higher education, student bodies are composed of a sizable number of disabled veterans, ranging in types of disability from minor ailments to almost total physical disability. These disabled veterans, as well as other handicapped students, required, in many

instances, particular services to enable them to achieve maximum progress in academic work. (Strom 1950, 38)

Results of the ACE study (with 453 responses from 595 member institutions) described the presenting disabilities, such as those students who were “leg and arm amputees, those with spinal and back injuries, those with diseases such as malaria and tuberculosis, the deafened and the blinded, and those with psychoneurotic disabilities” (Strom 1950, 39). The report also provided examples of services provided to veterans with disabilities, many of which are common today. These were broken into three broad areas: transportation facilities (e.g., special elevator privileges, parking privileges, guides to take the blind to classes, extra stair railings, ramps into buildings); housing facilities (e.g., first-floor rooms, homes close to campus, permission to live in dorms throughout college plan of study); and classroom facilities (e.g., scheduling classes in locations that minimize distance to travel, provision of readers and notetakers, priority seating and course registration) (Strom, 1950).

These programs emerged throughout the country, but were most often near veteran’s hospitals. A story in a 1947 edition of *Phi Delta Kappan* (Atkinson 1947) explained that “an interesting and unusual educational program for handicapped students in the United States is currently being carried out at the University of California, Los Angeles. Here, eighteen veteran students in wheelchairs live, study, go to classes, and otherwise maintain a normal student existence” (295). This program was initially conducted with the Birmingham Veterans Hospital in Van Nuys. Likewise, a program was initiated at the University of Illinois in 1947 when a VA Hospital in Galesburg became a satellite campus and students with disabilities were among those enrolled. When the campus closed, a group of students with disabilities self-advocated to gain “experimental” enrollment states at the main campus in Urbana-Champaign. Through active advocacy, this group became firmly established on the campus (History of Disability Services at the University of Illinois 2008; Nugent 1978). Other examples cited in the literature included the City College of the City University of New York (Condon 1951, 1962) and the University of Minnesota (Berdie 1955).

However, discrimination on the basis of disability still existed, such as the case of a student who attempted to return to his studies after war service. However, the administration of his university was “convinced that a paraplegic simply couldn’t do the work.” With the advocacy of faculty, the student was admitted and eventually earned a PhD (Rusk 1977, as cited in Fleischer and James 2001). Nugent (1978) summarized the perception of many faculty and administrators in colleges across the nation in 1948, stating that many felt “to include severely handicapped students in regular college programs would be a waste of time and effort” and “most felt there was little reason to believe that seriously disabled people would be able to succeed in college or be able to use their schooling after graduation” (12). Likewise, a study of two-year colleges by Brooks and Brooks (1962) indicated that

schools near Veterans' Hospitals were providing services to students with physical disabilities, but other institutions reported not accepting students because the campus was not accessible.

Although such discrimination existed, the ACE report made a clear statement to higher education, noting that "physical disability is not, and should not be an insurmountable handicap to the successful achievement of the benefits of a college career" (Strom 1950, 47). It further discussed the economic importance of such programs, clearly stating, "if the country is to capitalize on the total talent reserve in its young people, then the resources of this group must not be overlooked" (46).

Programs continued to develop in the aftermath of World War II and the Korean War. Condon (1957) conducted a "national canvas of special facilities for the physically handicapped in colleges and universities" (579) and, in a summary paper published in 1962, described a range of services being offered nationwide. These included notification and training for instructors related to student needs, priority seating, texts on tape, the recording of lectures, and examinations administered in a separate location. Condon also described what could be considered a forerunner of today's trends in distance education, a program at Boston University for "homebound" students who are taught by tutors, by telephone, and by tape recorders.

Another early pioneer in the area of services for students with disabilities was Herbert Rusalem. In 1962, Rusalem wrote:

Physically handicapped college students requiring one or more special educational services are no longer a rarity on the American campus. Having the same goals as other students, they are enrolling in increasing numbers, encouraged by better public and private school preparation, improved rehabilitation services, the availability of scholarship funds, and a changing attitude toward disabled persons in our society. Since these sources of encouragement will probably become more influential in the future, it seems likely that the problems of educating the physically handicapped student will be receiving increasing attention. (161)

While advocating for increased and improved services, Rusalem also clearly noted that the "basic assumption in accepting the disabled student into a college is that, with certain possible modifications in procedure, he can attain stated levels of performance" (162–163) and thus "college-wide standards should be maintained" (162). These two statements remain key tenants in today's disability services.

The 1970s to 2000

Rusalem's prediction in 1962 of increasing numbers of students with disabilities accessing higher education proved to be prescient. While veterans

with disabilities had a profound impact on the development of early disability services (Madaus et al. 2009), the civil rights movement and legislation, as well as education legislation at the K–12 level, served as a catalyst for an era of greatly expanded services. Until the 1960s, the majority of discussion in the professional disability literature related to physical disabilities. However, in 1963, the term *learning disability* (LD) was used by Dr. Samuel Kirk (Hallahan and Mercer 2001), and by 1968, this term was designated by the federal government as a category of disability in the K–12 system (Kavale 2001). Shortly thereafter, services specific for students with hidden disabilities such as LD were developed in public schools, and the number of students identified with such disabilities dramatically increased, rising to constitute more than half of all students with disabilities in just over 20 years (Hallahan and Mercer 2001).

In 1975, Congress passed the Education of All Handicapped Children Act (P.L. 94–142). This legislation required that special education services be provided to students with disabilities. Also required were individualized education programs based on periodic assessments, and the development of individualized goals. Subsequent amendments to the act included a specific focus on planning for the transition to adult life, including postsecondary education. Now more than thirty-five years old, the legislation serves more than six million students aged six to twenty-one annually (U.S. Department of Education 2006), and has consequently resulted in more students with disabilities becoming qualified to pursue higher education.

However, it was another piece of federal legislation that was essential in increasing access to postsecondary education for students with disabilities. Within the wording of the Vocational Rehabilitation Act of 1973 was the following language:

No otherwise qualified handicapped individual in the United States shall, solely by reason of his handicap, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.

Moreover, Section E of Section 504 specifically related to postsecondary education, and required institutions, both public and private, to consider the applications of qualified students with disabilities and to implement necessary accommodations and auxiliary aids for students with disabilities. Based on the language of other civil rights laws (Feldblum 1996), the regulations for Section 504 were signed into law in 1977. Fears about the costs of implementing the regulations were reflected in a 1977 article in the *Chronicle of Higher Education* entitled “Providing Access for the Disabled: It Won’t Be Cheap or Easy” (Fields 1977, 4). Bailey (1979) described the ensuing reaction as the “panic period” (88) and noted that some colleges feared closure because of costs related to compliance.

While these predictions did not hold true, Section 504 had a significant impact on access to postsecondary education for students with disabilities. It required private institutions to consider the applications of these students, improved access to campus programs and facilities, addressed discrimination on the basis of a disability, and ended the practice of counseling students with disabilities into more restrictive majors and careers (Bailey 1979; Scales 1986). The subsequent passage of the Americans with Disabilities Act (ADA) in 1990 led to additional program development and student access to higher education, and heightened public awareness of disability rights. Now twenty years old, the ADA was recently reauthorized with new language that contains some significant implications for postsecondary institutions to carefully consider (see Heyward, this volume).

The 1990s also saw the advancement of self-determination theory in higher education disability services. Based on the idea of helping an individual with a disability to engage in “goal directed, self-regulated, autonomous behavior” with an understanding of one’s strengths and limitations (Field et al. 1998, 115), self-determination has been proven to be an essential component of successful transition to higher education and student success once enrolled. The concept of universal design (UD), originally rooted in architecture, began to emerge in college instruction at the turn of the century as a means to reach the needs of a broad range of learners, including those with disabilities. Edyburn (this volume) describes UD in more detail, as well as its use in higher education instruction.

The rapid growth in student access and consequent program development can be measured in a variety of ways. Since 1966, the Cooperative Institutional Research Program (CIRP) Freshman Survey has been administered to incoming first-year students at over 1,200 American colleges and universities, collecting data on student characteristics, values, and attitudes (Wyer 2007). In 1978, a question was added to the survey related to the existence of a handicapping condition, and less than 3 percent of the respondents reported having a disability (Henderson 1999). By the 2007–2008 academic year, students with disabilities represented 11 percent of all undergraduate students (National Center for Education Statistics 2009). The types of disabilities reported also changed significantly. In the 1988 CIRP Freshman Survey, the largest category of student disabilities was students with blindness or a visual impairment (Henderson 1999). In the 2008 academic year, students with learning disabilities made up 3.3 percent of all college freshmen (Pryor et al. 2008).

The growth and firm establishment of disability services as a profession in higher education also became evident in this time period. In 1977, the “Disabled Students on American Campuses: Services and State of the Art” conference, funded by the Federal Bureau of Education for the Handicapped, was held at Wright State University (Marx and Hall 1977, 1978). From this conference, a group of 32 attendees formed the Association on Handicapped Student Service Programs in Postsecondary Education (Scales

1986). The organization was renamed the Association on Higher Education And Disability (AHEAD) in 1992 and by 2010 had over 2,500 members from eleven countries (Association on Higher Education And Disability 2010). A study of national disability service programs in 1996 indicated that 11 percent were in existence prior to the passage of Section 504, while 89 percent were developed after the regulations were passed (Madaus 1996). By the end of the 1990s, AHEAD had established Program Standards as well as Professional Standards and a Code of Ethics for practitioners (see <http://www.ahead.org/resources>).

Backlash

As this progress was occurring, a backlash against services for students with disabilities emerged (Gephart 1997; Jarrow 1997; Madaus 2000). As Gephart described, this was particularly true in the area of learning disabilities, where issues that had “simmered below the surface for years” finally “boiled over” (I-1). Significant court cases emerged in both the higher education and testing agency arena (see, e.g., *Guckenberger v. Boston University*, *Bartlett v. New York State Board of Law Examiners*, and *Price v. National Board of Medical Examiners*) and in the employment arena (see, e.g., *Toyota Motor Manufacturing, Kentucky, Inc. v. Williams*, *Sutton v. United Airlines*, *Murphy v. United States Parcel Service*), bringing attention to a range of issues related to documentation of disabilities, reasonable accommodations, definitions of “major life activities,” and the impact of mitigating measures on the impact of a disability (Gephart 1998; Madaus 2000). In general, these court rulings led to more restrictive interpretation of the ADA regulations, a point that was specifically addressed by Congress in 2008 by the Americans with Disabilities Act Amendments Act (ADAAA) (Shaw et al. 2010).

The Current Landscape and Emerging Issues

Legislation. In 2009, Congress passed the ADAAA specifically to address some of the limitations imposed by the courts on the ADA. Included was clear language related to the definition of *disability*, expanded examples of what constitutes a disabling condition, and the clarification of impact of mitigating measures in making eligibility determinations. In this volume, Heyward describes many of the key issues facing colleges and universities in relation to the enactment of this legislation. Clearly, how the courts and the Office for Civil Rights interpret these regulations will need to be played out over the next decade.

New Populations. While the number of students with LD has grown dramatically over the past twenty-five years, students with different disability types are now increasing exponentially. These conditions will place new demands on institutions and, consequently, require new considerations related to service delivery and policy (U.S. Government Accountability

Office 2009). For example, the number of students with psychological/psychiatric disabilities has increased significantly over the past decade. According to some data sets, these students are now the largest group of students with disabilities on campus (U.S. Government Accountability Office 2009). Although many of these cases are mild and require only minimal support, others are more significant and may require services that exceed what existing campus counseling centers can provide (U.S. Government Accountability Office 2009). Although smaller, the number of students on college campuses with autism spectrum disorders (including those with Asperger's syndrome) is increasing and requires consideration (U.S. Government Accountability Office 2009). The most recent amendments to the Higher Education Opportunity Act provide funding for the development and enhancement of programs for students with intellectual disabilities (formerly labeled as having "mental retardation"), and therefore new challenges for institutions to consider (U.S. Government Accountability Office 2009).

Another emerging population requiring campuswide coordination is veterans with disabilities returning to college after service in Operation Iraqi Freedom and Operation Enduring Freedom (U.S. Government Accountability Office 2009). As a result of the Post-9/11 Veterans Educational Assistance Act of 2008 (also known as the New GI Bill), it is estimated that over two million veterans will enroll in higher education (ACE 2008) and that as many as 25 percent of these students will have hidden disabilities, such as traumatic brain injury, posttraumatic stress disorder, and other emotional disabilities (Rand Center for Military Health Policy Research 2008). These veterans may have different perspectives on disability than traditional students, may be less willing to self-disclose, and, if they so choose, may present documentation that does not meet traditional institutional requirements. The definition of *disability* used by the military may also not match that used by postsecondary institutions. As a result, this segment of students with disabilities may not receive the services needed to fully access their education (Madaus, Miller, and Vance 2009). Additionally, postsecondary institutions should be aware that the Office of Civil Rights launched a "Wounded Warriors Initiative" that is designed to not only support veterans with disabilities in higher education, but also to "encourage institutions to adopt innovative approaches to serve this important population" (Monroe 2008, 3). Interested readers are referred to a special issue of the *Journal of Postsecondary Education and Disability* (2009, Volume 22, Number 1) that outlines many of the specific issues facing colleges in this regard, and highlights several innovative programs related to serving these students.

Technology. The impact of technology continues to be an enigma for colleges in relation to students with disabilities. While assistive technology continues to develop to provide new access to students (e.g., digital textbooks, smartpens, smartphones), other advances in technology can create different access issues for students with disabilities. For example, although enrollment in online classes has grown exponentially over the past five years

(Allen and Seaman 2010), the access needs of students with learning disabilities have been virtually ignored in the development and implementation of these courses (Madaus, Banerjee, and McKeown in press). Ironically, it is thought that advances in assistive technology (AT) may be the cause of this, as web and course designers believe that AT can take care of most access needs (Keeler and Horney 2007). Furthermore, although Section 508 of the Rehabilitation Act mandates that institutional websites be accessible, research indicates that many are not (Erickson et al. 2009).

Summary

Over the past twenty-five years, the field of postsecondary disability services has moved from a fledgling aspect of the higher education enterprise to an established profession. Simultaneously, college campuses are faced with new issues related to providing services for an increasingly diverse student body, including ensuring access to evolving technologies, to quality instruction, and to appropriate support services. Disability service professionals can provide a valuable resource to campus administrations in the development and evolution of such services, but moreover, stand poised to increasingly serve in a campus leadership role in such endeavors.

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