

Supporting Students with ASD on Campus: What Students May Need to be Successful (Practice Brief)

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Abstract

The growing number of students with Autism Spectrum Disorder (ASD) in postsecondary education requires accommodations beyond typically provided supports in order to ensure success. However, most campuses lack support services provided in addition to general accommodations. A supplemental support program within a public university was developed to provide social skills, career development skills, and independent living skills to matriculating students with ASD. Program participants are provided with a mentor to work towards self-identified goals throughout the semester. In order to gain better understanding of individual student needs, a baseline survey was developed to assess strengths and needs of incoming students from the individual student perspective. The baseline was completed by 20 students in 2017-2018, providing program staff assistance, guidance, and support based on feedback from individual students. Increased GPAs as well as First Time In College (FTIC) retention rates were observed after one year. Observed outcomes included increased student participation and campus engagement for participants. Implications and recommendations for future use are discussed.

Keywords: autism spectrum disorder, retention, first time in college, student perspectives

Autism spectrum disorder (ASD) is one of the fastest growing disability categories in the world. Factors contributing to this rapid growth include the number of children diagnosed with ASD, which has increased from 1 in 88 in 2008 to 1 in 59 in 2018 (Center for Disease and Control, 2018), heightened awareness, changes in the diagnostic criteria, and improved ability to recognize and diagnose higher-functioning individuals with ASD (Pinder-Amaker, 2014). The number of students with ASD enrolling in postsecondary education continues to increase, accounting for almost 1% of the total population of universities (Anderson, Carter, & Stephenson, 2018). Despite this increase, a lower percentage of students with ASD graduate college compared to neurotypical peers (Elias & White, 2018).

Common accommodations utilized by students with ASD include testing in a separate environment from the classroom, requesting additional time on exams, recording lectures in class, reduced course

loads, and meeting with disability support coordinators (Anderson et al., 2018). Other accommodations that are preferred include housing (such as living in residence halls and roommate selection), academic coaching, priority registration, and tutoring (Van Hees, Moyson, & Roeyers, 2015). Accommodations provided in higher education do not follow the same legal stipulations as the Individuals with Disabilities Education Act (IDEA), instead, rely on the scopes of services described by the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act (with provisions post-high school) (Chan, 2016). However, despite having access to accommodations, students with ASD may experience difficulties and challenges that go beyond the services provided by the office of accessibility on campus. Recent years have shown an increase in supplemental support programs offered across the nation for students with ASD, however, most programs require a fee for participation (collegeautismspectrum.com/collegeprograms/).

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A comprehensive and flexible approach that is individualized and based on the student's needs is integral to providing a successful program for students with ASD (Elias & White, 2018). Van Hees and colleagues (2015) recommended using a personalized approach, having a safe and transparent environment with sufficient planning and clear communication, providing academic accommodations, coaching students in education, student life, and daily living skills, and providing psychosocial support. However, in order to provide additional supports beyond accommodations included with DSO services, additional or supplemental supports may be required. Even supplemental programs specific to ASD have limitations such as limited program capacity, lack of funding, and lack of professionals trained in providing services to students with ASD (Barnhill, 2016).

Depiction of the Problem

Limitations associated with ASD include difficulties in reciprocal social interactions and relationship development, challenges maintaining conversation in social settings, perseverative or obsessive thought patterns, restricted behaviors and interests, and difficulty interpreting nonverbal cues or the perspective of others (Van Hees et al., 2015). There exists little research outside of adolescence and childhood for support services available to individuals with ASD, with even less on support services for students in post-secondary education (Anderson et al., 2018). These support systems may be more difficult to access or may not focus on the individual perspectives of student needs. Further, many studies focus on caregiver and professional supports, neglecting the direct input from the individuals (Turcotte, Mathew, Shea, Brusilovskiy, & Nonnemacher, 2016). In college, students with ASD may face difficulties with sensory overload, lack of support systems, and have challenges with time management and a lack of routine, which often leads to students feeling overwhelmed and burnt out (Anderson et al., 2018). Additionally, administrators on campus may face challenges supporting students with ASD as this may require additional resources, including funding and training (Cai & Richdale, 2016; Zeedyk, Tipton, & Blacher, 2016).

The transition from high school to college is difficult for students with ASD, with many feeling that they are unprepared for the transition. Individuals with ASD report higher levels of loneliness, anxiety, and depression compared to neurotypical students (Pinder-Amaker, 2014). Because of difficulties with social communication, it can be difficult for students with ASD to form necessary support systems in college (Pinder-Amaker, 2014).

Many students diagnosed with ASD choose not to disclose their disability status due to a fear of stigma or feeling that they do not need accommodations (Van Hees et al., 2015). As a result, students may choose to not take advantage of support services that are available to them including tutoring, mentors, exam accommodations, and assistance with daily living (Anderson et al., 2018). Some students with ASD have difficulty advocating for themselves and do not seek support services until it is too late (Elias & White, 2018).

It is clear that providing support to students with ASD is important in order to succeed in college and in the workplace. By supplementing services provided by campus DSO offices, students with ASD can practice developing social skills, independent living skills, and career development skills. However, in order to provide effective services to degree-seeking students with ASD, students must first identify and communicate areas they may require assistance in. Furthermore, before supports and resources can be identified for students, DSO staff need to have intake or initial evidence of where student strengths and areas of need may be evident. Below is a description of a diagnostic tool used to assess and identify problem areas for students with ASD participating in the Transition to Healthiness, Resourcefulness, Independence, Vocation, and Education (THRIVE) program, which is then used to help THRIVE staff create individualized goals (with the student) to improve their areas of need.

Participant Demographics and Institutional Partners/Resources

Along with national trends reflecting larger numbers of students with ASD entering four-year institutions, the campus recognized an increased number of students with ASD registering with the Disability Services Office (DSO). The DSO provided significant guidance on an individual student basis; however, a more proactive, overarching training appeared necessary for students with ASD. In the summer 2012 semester the DSO implemented a pilot supplemental support peer-mentoring program for students with ASD. After several years of continued program success, three areas of need emerged: social skills, independent living skills, and career development skills.

For the 2017-2018 academic year, seven mentors were assigned to 20 students with ASD. Mentors were made up of undergraduate and graduate students in various programs of study including: psychology, exercise science, sociology, business, and applied behavioral analysis. Mentors met with individually assigned students up to three hours per week. Three

mentors were senior level program participants (students who received mentoring in previous semesters and applied to become mentors for fellow students with ASD). Mentors were required to complete anecdotal notes following each individual session with mentees and were also required to participate in social focus groups and social skills training activities. Each mentor committed to roughly 10-15 hours per week working with students, completing session notes, and participating in group activities. The small sample size of both the students and mentors reflects the exploratory nature of this practice brief and the need to carefully explore the results. Of the 20 students, 12 were First Time In College (FTIC) students and the majority of students and mentors were Caucasian. The sample of students was comprised of 70% males and among the mentors, 57% were female. The mean age for the students was 21.

Description of Practice

With the three identified areas of focus, THRIVE students have the opportunity to develop social skills, independent living skills, and career skills while gaining valuable experience in a higher education setting with the support of a peer mentor (<https://www.unf.edu/drc/thrive>). One of the overall strategies used to promote student-led learning and experiences is through the use of goal-setting. By identifying a personal goal, students are empowered to take action on changes they want to make or experiences they want to gain; held accountable by their peer mentor and other participating students. Goals range from obtaining a driver's license to getting a job to getting accepted in a graduate program. Specific areas of weaknesses and strengths are explored in weekly group meetings as well as during one-on-one meetings with mentors.

Mentors are provided by program staff and are assigned prior to the start of the semester. Mentors are made up of volunteers, federal work study, internship, and practicum students currently enrolled in classes. Each mentor is required to complete a mentor application, interview with program director and staff, and one-day training prior to the start of the first semester as mentor. While there is no formal partnership between campus departments and mentors, opportunities for students to earn extra credit, practicum and internship hours, and research opportunities are made available.

In the fall of 2016 a baseline survey was developed by the director and a student assistant as a way to measure incoming students' knowledge and awareness from the perspectives of the student. As a result,

the baseline survey served as a guide for the director and staff to identify areas of strengths as well as areas of need. In the fall of 2017, 20 students completed the baseline survey prior to the start of their first semester and results were used to determine student goals. New students were required to complete the baseline survey that evaluated student knowledge of the three program areas of focuses (social, independence, career). The program director then analyzed each survey to establish goals and strategies to begin implementing with each student's peer mentor. Survey results were also used to determine mentor assignments as the director paired mentors with similar interests with students that reported needing help or guidance in specific areas.

The baseline survey was created to identify the strengths and weaknesses of each student and included areas in which they may need assistance, and how familiar they were with their diagnosis, skills, and resources. The baseline is comprised of the following sections: Disability Awareness, Campus Resources, Self-Advocacy, Major and Career, Time Management, Study Strategies, Goals, Stress Management, and Living in the Dorms. Each section asks the student to fill out a Likert-type scale ranging from "Not Confident" to "Completely Confident" regarding a statement pertaining to the section. For example, in the Disability Awareness section, students are asked to state their confidence by answering, "I know what my disability is and how it affects me." The student is then asked to provide evidence that supports the claim on the Likert-type scale by asking the student to answer statements in their own words. Using the same example, the student is asked what their diagnosis is and how it affects them as two separate follow-up questions to the Likert-type scale. Based on the answers the student provides to the open-ended questions, it is possible to see if their actual responses are representative of the confidence levels they chose for the Likert-type questions at the beginning of each section.

Responses to the baseline assessment help to provide understanding of an incoming student and what possible supports may be needed. A student may not realize they need assistance in a given area, especially if they are confident in their perceived mastery of skills. The baseline allows mentors to match open-ended responses to the Likert-type scale responses and identify areas of weakness that the student may perceive as strengths. Each section within the baseline was selected based on their importance for developing successful strategies for completing college and independent living skills. If the student claimed to have a study strategy that worked and was

able to describe the strategy and how it works for them, the student may have some level of proficiency or knowledge with study habits and may not be something they need to work on. Instead, the student may not be confident in their ability to take care of themselves independently, which could be something to focus on when meeting with their mentor. The baseline serves as a tool to aid in tailoring the mentoring experience for each individual student and what they may need additional support developing, which may or may not be perceived as areas of support initially by the student.

Evaluation of Observed Outcomes

Students participating in the program enter at different levels, meaning not every student has an established GPA prior to enrollment in the program. However, average GPA's of students following the fall 2017 semester was 3.00, which improved to 3.34 by the end of the spring 2018 semester. The retention rate for FTIC students was 100%, or twelve out of twelve, higher than the overall university's first year retention rate of 79.1% for the same period (UNF *Florida Equity Report*, 2017). While the baseline survey is meant to provide a starting point for mentors and students to identify and target areas to focus on, the results of the survey can also provide long-term direction for students who may be unsure of what types of careers can be associated with specific majors and programs of study. For example, students select their confidence levels in the major or potential major preparing them for a career. Following this, students are asked to list a specific career that requires their degree or major as well as what career evidence the student has that confirms their choice in major. The results of the survey indicated areas of need for students unsure of career choices or what majors could be required for specific employment fields. Students participating in the 2017-2018 year were able to explore majors and careers with the support of their mentors by attending career fairs, information sessions on different majors, and meeting with career advisors as a result of completing the baseline survey.

The results of the baseline survey have provided program staff with much-needed student perspective in terms of evaluating student functioning levels. Unlike previous research by Turcotte and colleagues (2016) that intentionally omitted survey responses of individuals with ASD, this survey allows the individual to tell staff what their personal wants and needs for supports may be, directly from them. This allows for the opportunity for the individual to advocate for their

own needs and give them an opportunity to speak for themselves. One of the downsides to including only individual perspectives is the increased likelihood of miscues and incorrect information provided. However, using the baseline survey is an opportunity for students to learn where their strengths and weaknesses may be and what potential resources might be necessary to ensure success. Overall, staff reported seeing an increase in confidence and self-advocacy when meeting with students using the results of the baseline to provide a foundation or starting point in developing goals and skills. One measure used to evaluate increased confidence and self-advocacy with students was through attendance and participation in campus events. At the end of the semester, students were able to compare their baseline results to end of term progress and reflect on the strategies utilized throughout the semester with the mentor that led to the positive outcomes, and how they can be implemented across times and settings. Weekly mentor notes described examples of students engaging in self-advocacy (seeking help when needed, problem-solving issues with roommates, initiating participation, and attending campus events) and overall confidence levels increased when mentors asked students what they liked doing over the course of the semester and why these activities were helpful.

Implications and Portability

The use of the baseline has been valuable for providing insight into the current thoughts and feelings of the individual, making it easier to determine what supports the individual may need. The baseline is simply a tool, however, to be used alongside information given from the student. There is very little research that has been done from the student's perspective, such as asking them directly what supports they feel they need, identifying their own goals, or what skills they would like to learn or improve upon. This baseline is unique because it helps to establish how the student feels about their knowledge or skills by asking them directly, as opposed to asking parents, doctors, or other professionals. The baseline was created after the program had already been created and was not present from the beginning, so not every student in the program has taken the baseline. In the future, making the baseline a requirement for all students seeking to enter the program would aid in the process of beginning to ask the student what supports they are interested in before fully engaging within the program. Having the students complete the baseline before leaving the program may also allow staff to compare the student's initial knowledge to their cur-

rent knowledge, which can aid in improving how the program functions.

While the baseline was created for the program, the ideology of asking students with disabilities directly what supports they would need or be interested in to be successful is something that can be generalized across all settings and institutions. Allowing the student to express their own wants and needs is an expression of self-advocacy, which is a skill most individuals, whether they have a disability or not, is important to learn. The baseline is composed of questions that are not specific to the program or to an ASD diagnosis, so the same baseline can be used or slightly modified and can be generalized across populations. It would be possible to use the baseline for students with disabilities in other institutions and programs, and could assist individuals working with the students in connecting them with resources and supports that would benefit their interests, wants, and needs, leading to an overall more useful experience for the student.

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