Using Collaboration to Enhance Services for College Students with Learning Disabilities

Abstract

Collaboration is a frequent term in policy and practice in K-12 education and adult services for individuals with disabilities. Yet, its potential as a means of structuring services for college students with learning disabilities has been largely overlooked. To consider how collaborative structures may enhance services for college students with learning disabilities, definitions of collaboration and the context of federal law are examined, current practice is discussed, and a vision for implementing collaborative services is presented. Advantages and disadvantages of implementing collaborative services are reviewed and future directions proposed.

Using Collaboration to Enhance Services for College Students with Learning Disabilities

Collaboration is an appealing term that catches the public's imagination for quality services. It brings to mind images of professionals, students and parents getting along; sharing resources; and working together as a team. At first blush, it sounds like a friendly, innocuous approach to services. These pleasant surface connotations of the word, however, have perhaps lulled the field of college support services into passive acceptance of the idea of collaboration and kept the field from more actively considering this as a means of structuring services for college students with learning disabilities.

Would incorporating more collaborative structures enhance college services for students with learning disabilities? To consider this question, we must take a closer look at the term, consider its potential applications in the context of higher education, and weigh its advantages and disadvantages. Toward this end, definitions of collaboration and the context of federal law are examined, Next, current practice is discussed, and a vision for collaborative college support services is presented. Finally, the advantages and disadvantages of implementing collaborative services are reviewed and future directions proposed.

Defining Collaboration

Despite the currently widespread use of the term collaboration, there is little consensus on a single definition of the term. A range of descriptions of collaboration can be found in the literature on college support services including, for example, the cursory descriptors...
of "combined expertise" (Smithson & Ruddy, 1989) and "joint partnership" (Satcher & Dooley-Dickey, 1990). Ness (1994) described collaboration as occurring when "people with common concerns and needs put their heads together to arrive at a mutual solution" (p. 1). Pollack and McGuire's (1988) use of the term collaboration, however, hints at the potential of this approach to effect services for college students with learning disabilities. They describe collaborative services as entailing a "student-centered, interactive model" in which "...cooperation is the key to effective service delivery" (p. 82).

This focus on student- or person-centered services is at the heart of collaborative systems change initiatives occurring predominantly outside higher education. Hodgkinson's (1989) classic report called for a seamless web of services in which organizations such as education, health care and transportation cross traditional functional lines and structure services in new ways to address the needs of the individual. Ward and Halloran (1993) of the U.S. Department of Education Office of Special Education and Rehabilitative Services identified this move toward a collaborative "seamless service delivery system" (p. 5) as an emerging transition issue for youth and young adults with disabilities in the 1990s.

To promote implementation of these student centered, systems change activities, the U.S. Department of Education and the U.S. Department of Health and Human Services charged a study group to form recommendations and create a guide for practitioners in integrating collaborative education and human services. This study group defined collaboration as a process in which "partners share a vision, establish common goals, and agree to use their power to achieve them..." including "... a commitment of resources and a willingness to alter existing policies" (Melaville, Blank, & Asayesh, 1993, p. 15). This definition clarifies that beyond the surface features of cooperation and partnerships, collaborative structuring of services involves the commitment of power and resources to achieve student-centered services and support.

The Context of Federal Law

Why is collaborative structuring of services currently receiving so much attention? It is appearing in a wide range of programs for individuals with disabilities described in the literature including, for example, programs for infants (Wheeler, 1993), school children (McKenzie & Houk, 1993), and young adults (Getzel, 1990); programs facilitating the transition to work or vocational training (White & Bond, 1992), and vocational college (Seidenburg, 1986); and programs focusing on the needs of specific disability groups, including learning disabilities (Rojewski, 1992). A major source for growing professional discussion and collaborative structuring of services for individuals with disabilities is federal law.

The Individuals with Disabilities Education Act of 1990

One impetus for collaborative efforts in education has been the Individuals with Disabilities Education Act (IDEA) of 1990. Formerly known as the Education for All Handicapped Children Act or P.L. 94-142, this federal law was originally enacted in
1975, establishing such basic tenets in the education of children with disabilities as the right to a free appropriate public education, an individualized education plan, and education in the least restrictive environment. In 1990, this law was amended and renamed. An important change incorporated into the legislation at this time was the mandate to include transition planning for students with disabilities age 16 and older. As specified in the IDEA, the Individualized Education Program (IEP), or a separate Individualized Transition Plan (ITP) must include "a statement of transition services... including, if appropriate, a statement of each public agency's and each participating agency's responsibilities or linkages, or both [emphasis added] before the student leaves the school setting" (Section 300.346). Transition services are defined as "a coordinated set of activities for a student, designed with an outcome oriented process that promotes movement from school to postschool activities, including postsecondary education. The coordinated set of activities shall be based upon the individual student's needs, taking into account the student's preferences and interests" (Section 300.18). The IDEA, therefore, provides a federal mandate to special educators in the secondary education system to create student-centered services that extend beyond the traditional school limits of high school graduation and forge linkages with other services and professionals.

Amendments to the Rehabilitation Act of 1973

Another source for recent policy shifts toward collaborative structuring of services is the 1992 amendments to the Rehabilitation Act of 1973. The original Act is the source of Section 504, the basic legal foundation for disability support services in college. However, Section 504 is embedded in a much larger piece of legislation that serves as primary guidance to state vocational rehabilitation services. The Rehabilitation Act has been amended several times with the most recent reauthorization occurring in 1992. Silverstein, the Staff Director to the Senate Subcommittee on Disability Policy, described the basic themes of the 1992 amendments as emphasizing "interagency coordination and collaboration, the notion that no entity is going to be able to accomplish the ultimate goals... for people with disabilities if we operate as separate systems" (Johnson, 1993, p. 2). The Rehabilitation Act amendments specifically call for state rehabilitation services to increase collaboration with other agencies through such means as interagency workgroups, formal interagency cooperative agreements, and identifying resources and defining the financial responsibility of each agency in paying for necessary services (Section 101 [a][11]). Gloeckler (1993) noted that the Rehabilitation Act amendments bring "a rare alignment to national public policy in the area of disability..." and that "interagency efforts will become the standard way of doing things in the near future, not the unusual case" (p. 8).

Learning disability service providers in a college setting, therefore, are surrounded by education and adult services professionals who are under federal mandates to collaborate. The K-12 school system and vocational rehabilitation services are grappling with federal mandates to collaborate with other professionals and to make linkages with other support systems, including college support services.

Section 504 and the Americans with Disabilities Act
In contrast, the federal legislation governing college support services, Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA), are self-contained pieces of legislation. They are wide-reaching, very significant, and in keeping with much of the philosophy of the IDEA and the Rehabilitation Act Amendments (Gloeckler, 1993), but they focus on the immediate environment of the student. Individuals with disabilities may not be "...excluded from participation in, be denied the benefits of, or be subjected to discrimination..." (Section 504) solely on the basis of disability. To be in legal compliance college LD service providers must assure that their college campuses are accessible. They are not mandated by law to consider, for example, whether students with learning disabilities are making smooth transitions into college; whether college services are assuring the maximum use of all available resources; or whether college graduates with learning disabilities are becoming successful in the world of work.

In contrast to educators in the K-12 school system and professionals in vocational rehabilitation services then, college service providers are not required by law to reach out to other professionals, make linkages with other agencies, or collaborate on providing services for students with learning disabilities. But are these activities in keeping with the role of LD support services at the college level? Would a more collaborative support structure enhance services for college students with learning disabilities? To address these questions, it is important to consider the applications of collaborative principles in the context of higher education.

Applications in Higher Education

Descriptions of collaborative efforts to provide support services for college students with learning disabilities are emerging in the literature. Examples of current practice are examined to provide insight into collaborative structures utilized on some college campuses. Beyond current practice, a hypothetical example is proffered to illustrate the potential for applying more comprehensive collaborative structures within college LD support services.

Current Practice

Collaborative structuring of services has been identified as a key component in both generic and LD specific transition programs (National Joint Committee on Learning Disabilities, 1994; Rojewski, 1992). It is, therefore, not surprising that many collaborative college programs for students with learning disabilities focus on the transition periods of entrance to and exit from college (Aune, 1991; Dalke & Franzene, 1988; Gloeckler, 1988; Rosenthal, 1989; Serebrini, Rumrill, Mullins, & Gordon, 1993; Smithson & Ruddy, 1989). An example of collaborative efforts to address each of these transition periods is described.

Transition from high school to college. The LD Transition Project (Aune, 1991) was designed to address the needs of students with learning disabilities in making the transition from high school to college. High school students with learning disabilities
potentially interested in attending college were selected for the project. Each student completed a pre-intervention assessment and transition survey. Students then worked individually with a transition counselor to develop an individual transition plan. Students presented their transition plans to the transition team, typically during the high school IEP meeting. Team members consisted of a range of individuals such as parents, the special education teacher, guidance counselor, school social worker, private agency personnel, and in some cases, a mainstream teacher or coach. A plan for reaching the student's transition goal was developed by the team and served as the basis for subsequent transition activities. The transition counselor worked with students in bi-monthly one-to-one sessions and in optional summer group sessions to develop skills and address issues identified in the transition plan. Progress was reviewed each year by the team and objectives updated. In the student's senior year, a counselor from vocational rehabilitation often joined the transition team, as well as the college transition counselor, on the project staff who would be working with the student upon entrance to college.

Once in college, the student met regularly with the college transition counselor and other service providers to update and revise the transition plan. The college counselor typically provided support in becoming oriented to campus, gaining access to appropriate support programs, and developing self-advocacy skills. Some students also chose to participate in a peer support group facilitated by the college counselor.

Outcomes of the project indicated participants had higher first year college retention rates than the general student population in Minnesota colleges and had gained skills in self-advocacy, study strategies, interpersonal relations and accommodations. Among other key indicators, the project identified a "team approach" or collaboration as an essential element to transition planning for youth with learning disabilities.

Aune (1991) noted some barriers to full implementation of the project, however. Occasionally some students were not permitted to leave their high school classes to attend sessions with the transition counselor. There was also difficulty at times scheduling meetings with students due to other student priorities and commitments. And finally, on several occasions an immediate crisis of the student needed to be addressed in counseling sessions rather than exploring transition planning and options.

**Transition from college to employment.** Project TIPS (Transitional Instruction for Professional Success) was a collaborative project targeting the needs of college students with severe communication deficits (including some individuals with learning disabilities) exiting college and entering employment (Smithson & Ruddy, 1989). The project was a collaborative effort of the college Office of Disability Concerns, the Office of Professional Practice, the community Center for Independent Living, and the Department of Rehabilitation Services. In this program, students developed and self-monitored an Individual Plan for Goal Achievement and progressed at their own pace through a three phase program consisting of: (a) evaluation, instruction, and practice in accommodating individual disabilities and building job survival skills on the university campus; (b) transitional work experience in the local community; and (c) professional practice for college credit. A Job Developer served to identify internships and permanent
positions in the students' selected professional fields, coordinate activities with employers, and provide supervision or additional training for students as needed. A Task Force governed the project with membership from each of the previously mentioned agencies, as well as an individual from the college computer science department and representatives from community social service agencies and businesses. Members of the Task Force conducted career seminars for participating students focusing on such areas as resume building, interviewing skills, transportation and job seeking. No outcome data from the project were provided.

These program descriptions provide examples of how collaborative structuring of services, extending beyond traditional service boundaries can be used to better meet the needs of college students with learning disabilities. Though activities vary and the targeted student outcomes are different, both projects illustrate collaborative principles delineated by Melaville and Blank (1991). For example, both programs involved a diverse group of constituents, including the student, various professionals from the college and community, and, when appropriate, parents. As part of the collaborative process, the groups established common goals; jointly planned, implemented and evaluated new services and procedures; committed resources to achieve the agreed upon goal; and delegated individual responsibility to achieve the identified joint endeavors (Melaville & Blank, 1991). In these collaborative transition projects, deliberate efforts were made to bridge institutional cultures, build linkages across gaps in-services, and place student needs at the center of support activities.

**Transition during college.** In describing transition, Siperstein (1988) identified three transition periods in which individuals with learning disabilities need programmatic support: entering college; managing academic and social changes during college; and exiting college to enter employment. The examples of collaborative practices previously presented address the first and third of Siperstein's transition stages and focus on the student transition periods most clearly calling for communication with agencies and professionals outside campus walls. Yet Siperstein's second stage of managing student academic and social changes during college might typically be considered the core of college LD support activities. Examining model LD college program descriptions in the literature, it becomes apparent that exemplary service structures have traditionally placed heavy emphasis on communication with other campus departments and support services, such as writing labs, counseling services or admissions offices (Brinckerhoff, 1994; Gajar & Hameister, 1990; Pollack & McGuire, 1988; Vogel, 1982). Yet Melaville and Blank (1991) posit that though communication may result in enhanced cooperation between services or departments, these cooperative services do not necessarily constitute the student-centered, systems change entailed with collaborative services. Melaville and Blank (1991) draw significant distinctions between "cooperative" and "collaborative" structures of support. Cooperative services emphasize communication between various departments, agencies or support services to help each other meet their respective goals. Cooperative structures strive to foster better coordination of existing services, but of significance, "the quality of services is unlikely to change" (Melaville & Blank, 1991, p. 15). Certainly, this improved coordination of and access to existing services has been a major goal of college LD support programs.
In contrast, collaborative structures of support emphasize that diverse constituents including various departments, agencies or support services, as well as individuals with disabilities, establish common goals and agree to commit power and resources to achieve these mutually identified goals. Resulting services typically cross traditional service boundaries to better address student needs (Melaville & Blank, 1991). As a field currently examining what constitutes model LD support program components (Professional Standards, 1994), it may be beneficial to consider whether collaborative structuring of services will provide a mechanism for exceeding cooperative services and result in an enhanced system of integration and support.

**Vision of Collaborative Services**

Current practice described in the literature reveals pockets of collaborative activities occurring in some college LD support services. What might a comprehensive approach to collaborative services across the three stages of transition identified by Siperstein (1988) consist of? To address this question, consider the hypothetical example of Anita. Anita is a sophomore in high school who has a learning disability. Her special education teacher invites her to participate in her IEP meeting and tells her it is particularly important she come to the meeting because they will be discussing plans for Anita to prepare for life after high school. At the IEP meeting, Anita suggests she might like to go to college. Drawing from the advice of her special education teacher, guidance counselor, rehabilitation counselor, college service provider and parents, plans are made with Anita to do some career exploration and start building her academic and advocacy skills for college.

In her remaining years of high school, Anita continues to take college preparatory courses and systematically prepares for college study. She practices a range of study skills; and based upon the nature and severity of her learning disability, experiments with accommodations and auxiliary aids she will need in college. She attends the regional college fair that is jointly sponsored and planned by high school transition specialists, parent resource center representatives, vocational rehabilitation counselors, and college service providers. The event highlights college access and showcases campuses with various support services and programs for students with disabilities. Anita gathers information and follows up with visits to several college campuses. Anita narrows down her college options and selects the school that has the best match of academic offerings and support services for her needs. Anita is actively involved in identifying a future direction and is supported by her parents and a varied group of professionals in an ongoing exploration of her strengths and needs in achieving her goal.

The summer after high school graduation, Anita attends the college orientation session on campus for students with learning disabilities. During the orientation, she becomes more familiar with campus and experiences what actual college life will be like. In addition to learning how to access the LD support office, she learns about and makes contact with additional local resources, such as the rehabilitation counselor who will coordinate her services during college and the library staff familiar with the support and assistive technology available for students with learning disabilities.
During her first few difficult semesters of college, Anita maintains close contact with the LD support office but gradually builds the skills and confidence to manage her accommodation needs on her own. As she begins to think about job internships and employment in her major field of study, she finds the LD support office, vocational rehabilitation agency, academic departments and the career center work closely together. Using their services, Anita arranges for a summer internship working in her major field of study.

As Anita becomes more confident in her abilities as a college student, she begins to participate in more extracurricular activities. She joins the Student Speakers Bureau, a group of college students with learning disabilities who visit nearby middle and high schools, education groups and community colleges to talk about their experiences, provide advice, and candidly discuss the realities of college life for individuals with learning disabilities. Anita is also invited to participate on the college Disability Advisory Board made up of faculty, staff and students from a cross section of the campus, as well as some community agency representatives and local high school transition specialists. This group provides leadership and serves as a sounding board for campus disability issues. Collectively, they identify and enable solutions drawing on a range of expertise, authority and resources. During the course of their existence, the Advisory Board has identified barriers and generated solutions to such issues as attaining adequate documentation of students' learning disabilities, promoting smooth transitions into college, attaining assistive technology, and providing instructional resources for faculty.

As Anita's college career draws to a close, she works closely once again with the LD support office, the career center and her rehabilitation counselor to build her job searching skills and obtain that important first job in her chosen field. Anita graduates from college proud of her academic accomplishments, confident in her abilities, and aware of the accommodations she will need in employment and how to attain them.

This scenario provides a vision of what a collaborative structuring of services for students with learning disabilities might look like at the college level. It illustrates a seamless service delivery system that is based on a student-centered approach to services rather than focusing on the college's minimal legal requirements. To achieve collaborative services, must the college LD service provider follow this scenario and participate in every high school IEP meeting, create a student speakers bureau, join forces with vocational rehabilitation services, and implement a disability advisory board? As importantly, if all those steps are taken, will collaboration necessarily have been achieved?

Drawing from the relative expertise of K-12 education and adult service agencies in structuring collaborative services, it becomes apparent that the answer to both questions is no: there is no one right way to collaborate. Collaborative structuring of services is a creative and flexible process that must be tailored to individual campus needs and resources (Lindsey & Blalock, 1993; Melaville et al., 1993). Collaboration is not a specific activity. Rather it is an outlook: a way of mutually identifying priorities,
structuring services, and broadening expertise and resources that will take different forms on various college campuses.

**Will Collaboration Enhance Services?**

Given the examples of current practice and the vision for one possible comprehensive application of collaborative principles, will collaborative structuring of services enhance support for college students with learning disabilities? To consider this question, the advantages and disadvantages of collaborative services are examined in more depth.

**Advantages of Collaboration**

The five principles of collaboration delineated by Melaville and Blank (1991) provide a frame of reference as they reveal a number of advantages to collaborative structuring of services:

1. Collaborative services are based on establishing partnerships between diverse stakeholders. In a college setting, this would conceivably consist of various campus support services, administrators, key academic departments, community agencies, high school transition specialists, and individuals with disabilities. By design, these partnerships include a wide spectrum of viewpoints and expertise leading to a more comprehensive group identification of barriers, issues and solutions (Campbell, Whatley & Drakeford, 1994; Ness, 1994). Melaville and Blank (1991) pointed out that recruiting key partners into the collaborative may take time and that deliberate efforts should be made to include and make allies out of potential opponents to the process. A long-term outcome of collaborative services, then, is the potential for broad-based membership across campus focusing on the issues of individuals.

2. Collaborative groups establish common goals to guide their activities. The process of discussing a goal or vision for collaborative services helps diverse group members clarify and refine an understanding of LD issues. Reaching consensus on a goal entails understanding these issues from various constituents' perspectives and serves to build a mutual commitment to the specific issues at hand (Melaville & Blank, 1991).

3. Collaborative services are jointly planned, implemented and evaluated by the group. Establishing procedures that cross traditional service boundaries enables participants to increase their understanding of how various services and professional arenas operate. Group members then jointly seek means for overcoming barriers in traditional segmented approaches to services. Integral to this process is the direct feedback from individuals with learning disabilities on the effectiveness of services and strategies for improvement. The combined knowledge, talents and abilities of the group often produce superior results in thinking beyond traditional service boundaries and in generating solutions to issues (Campbell-Whatley & Drakeford, 1994; Ness, 1994).

4. Participants of collaborative groups commit resources to achieve the mutually identified vision for services. Resources may include a range of contributions such as
personnel time, office support or actual finances. Though collaborative services have the potential to tap resources from a broad range of departments, services or agencies supported by different funding sources; they typically do not result in additional funds. Rather, collaborative services emphasize a more efficient use of existing resources that can be achieved by reducing duplication of effort (Campbell-Whatley & Drakeford, 1994; Melaville et al., 1993).

5. Collaborative groups delegate individual responsibilities to group members to fulfill the endeavors of the group. This collaborative principle offers perhaps one of the most significant advantages of collaborative structuring of college LD support services. Issues identified and solutions generated by the collaborative group are not solely the responsibility of the LD support office. Rather, issues for individuals with learning disabilities become the domain of the collaborative effort and thus take on broad based campus and community ownership. Beyond the obvious benefits of expanding support, this broad-based ownership has also been observed to have a "ripple effect" in the community. That is, collaborative group members take an enhanced perspective and understanding of LD issues back to their respective professional and personal arenas providing additional education and outreach pertaining to learning disability issues around the community and campus in a number of formal and informal ways (Ness, 1994).

In addition to the advantages elucidated by Melaville and Blank's (1991) collaborative principles, collaborative structuring of support services offers some additional benefits. Collaborative structuring of services certainly ranks high in social validity: it is repeatedly identified as a key component in the transition literature (Rojewski, 1992); it is widely used by K-12 educators and adult service agencies; and it is a recommended "best practice" by professional organizations such as the Learning Disability Association (LDA) and the Council for Exceptional Children (CEC) (Ayers, 1994; National Joint Committee, 1994). Collaborative structuring of LD college support services may present an appropriate means of linking with current broad-based transition initiatives for students with learning disabilities. Participation in collaborative efforts of the K-12 school system and adult service agencies may provide access to these additional funding streams, as well as avoid fragmentation in the system of support for individuals with disabilities.

**Disadvantages/Barriers to Collaboration**

Interestingly, no references in the literature could be located that discussed the disadvantages of the principles of collaboration, certainly confirming that the face validity of collaboration is extremely high. Rather, criticisms of collaborative services focused on barriers to successful implementation of collaborative principles.

Most prevalent in the literature were the barriers of unfavorable attitudes and beliefs about collaborative services characterized by such issues as lack of ownership in the process, turfism, and perceived lack of power in decision making (Ascher, 1988; Campbell-Whatley & Drakeford, 1994; Melaville et al., 1993). Some of these barriers
were previously illustrated in Aune's (1991) discussion of difficulties in implementing the LD Transition Project. Crowson and Boyd (cited in Melaville et al., 1993) observed the "ubiquitous problems of ... professional training differences, and resource constraints" (p. 2).

In response to these barriers to collaboration, recommendations for building successful collaboratives are emerging in the literature. Ness (1994), for example, provided the following broad recommendations: get administrative support to assure attention and recognition of need; target initial efforts on those willing to change and use initial successful ventures to convince others; and provide intrinsic and extrinsic incentives whenever possible.

The literature from K-12 education and adult services collaborative efforts provide extensive recommendations for building successful collaborative groups and emphasize the importance of group communication and process. Campbell-Whatley and Drakeford (1994), for example, identified such successful group practices as using active listening techniques during meetings, spending time clarifying goals and building the commitment of the group, and utilizing an orderly problem solving process to focus and structure the team's efforts. Though beyond the scope of this article, a growing collection of recommendations and "best practices" provide strategies in such diverse areas as initiating a collaborative team, conducting the initial meeting, and building trust and ownership (see, for example, Gugerty, 1994; Melaville & Blank, 1991, Melaville et al., 1993; Steps in Organizing, 1991 ). Perhaps the greatest barrier to implementation of collaborative services is, again, not an issue of the merit of collaborative principles, but the fact that no empirical data could be located supporting the benefits of collaborative services. Kohler (1993 ) in a review of literature concerning best practices in transition programs identified collaboration as one of the top three most frequently cited recommended practices. All supporting evidence contained in the 49 articles reviewed, however, was categorized by Kohler as "implied." That is, collaborative practices were noted as desirable or effective by article authors but not substantiated by empirical data.

**Conclusion**

Collaborative structuring of services offers a number of advantages to college LD support services, including perhaps most importantly, the opportunity to broaden support and understanding for individuals with learning disabilities. Yet, implementing collaborative services is typically not a quick or easy process, and at present, there is no research data to support or decry the success of collaborative structures.

Dale Brown, a program manager for the President's Committee on Employment of People with Disabilities, and herself an individual who discovered she had a learning disability while in college, recently wrote, "Not a week goes by that I am not inspired by a person with a learning disability who has found a new way to overcome the odds or get around the bureaucracy. But it is still my dream to change the system so it supports people with disabilities rather than stand as a barrier to be overcome" (cited in Top Young American, 1994, p. 32 ). Changing the system is not a small nor easy task. As Ness (1994) noted in
her collaboration with faculty, "the fear of change is a very strong and motivating force for many people to remain as they are" (p. 1). In a commentary on systems change activities, Gloeckler (1993) cautioned that insistence on maintaining the status quo or "paradigm paralysis" sometimes results when individuals are faced with radically changing the system.

Using a collaborative approach to LD support services may indeed offer a mechanism for: "changing the system" and creating student-centered services on college campuses. Close examination of the word collaboration reveals structures that well exceed the friendly surface connotations of the term. The working principles of collaboration offer a powerful approach to garnering support, crossing traditional service boundaries, and structuring services for individuals with learning disabilities. If we are to heed Gloeckler's (1993) warning against paradigm paralysis, collaboration is certainly an approach that warrants further investigation in the context of college support for individuals with learning disabilities.

References


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