Attitudes of College Students Toward Study Abroad: Implications for Disability Service Providers

Peter R. Matthews
Lock Haven University

Brenda G. Hameister
The Pennsylvania State University

Nathaniel S. Hosley
Lock Haven University

Abstract

This study investigates the perceptions of college students with disabilities toward study abroad by using personal interviews to rank perceived barriers to participation and necessary accommodations. Subjects are college students with disabilities who would qualify, academically for study abroad. Subjects cited the barriers of lack of knowledge about available study abroad programs, lack of assistive devices and services, and financial barriers. Students favored inclusionary study abroad programs as opposed to programs just for students with disabilities. Most subjects preferred six months advance notice and study abroad in their junior year of college. Disability services staff need to collaborate with international education staff and academic advisers to present timely and accurate information about study abroad options to students with disabilities.

Since 1985, the number of American students studying abroad has increased steadily (Burn, Cerych, & Smith, 1990; National University Continuing Education Association, 1994). Statistics are available on such variables as host country, field of study, academic level, gender, and duration of study abroad (Steen, 1994/95; Zikopoulous, 1993). However, students with disabilities have traditionally been underrepresented in study abroad programs, and statistics about their rates of participation are lacking (Hameister, Matthews & Skolnick, 1991; Sygall, 1994a).

In its 1990 report A National Mandate for Education Abroad: Getting on with the Task, the NAFSA/CIEE/IIE National Task Force on Undergraduate Education Abroad recommended that 10 % of all U.S. undergraduates should study abroad, and that there should be greater diversity in the students who participate, in the foreign locations, and in
the types of programs (Hoffa, 1995). Students with disabilities are one group that will increase the diversity of American students studying abroad.

The number of college and university students reporting disabilities in the United States has been steadily increasing. According to a 1994 study published by the HEATH Resource Center, 9.2% of all college freshmen (over 140,000 students) report having a disability. The comparable figure for full-time, first-time freshmen in 1978 was only 2.6% (Rumpel, 1996). Degree aspirations of students with disabilities are similar to those who do not report disabilities (American Council on Education, 1995). The Americans with Disabilities Act (ADA) has focused attention on legal rights to equal access, and students with disabilities are starting to request accommodations for study abroad experiences (Sygall, 1994a; 1994b). Study abroad programs need to be prepared to include and accommodate qualified students with disabilities in their exchange programs. It is important to involve potential participants who have disabilities in all the decision making, problem solving, and planning that goes into international programs (Lewis & Sygall, 1993; Sygall, 1995).

Mobility International USA, NAFSA (Association of International Educators), and other national and international organizations have taken the lead in encouraging international exchange programs for persons with disabilities by sponsoring workshops and publishing on this topic. There have also been regional and state-level initiatives on this topic, for example, "No Barriers to Study" primarily at Bucknell, Lock Haven, and Penn State universities, and the "Task Force on Disability Issues in International Exchange" at the University of Minnesota (Aune & Soneson, 1995). Resources like these are included in two new guides published by the University of New Orleans and Catholic University of Leuven, Belgium (Gagliano & Moore, 1996; VanAcker, 1996). The guides identify the types of accommodations, programs, and services available at individual campuses in the U.S., Canada, and Europe for students with disabilities who are interested in international exchange opportunities.

In a major national study, the reasons that students have for choosing to study abroad were a desire to experience new cultures and to learn the language of the host country. Academic reasons were of secondary importance, unless the study abroad program was integrated into the academic curriculum of the home college. Students not choosing to study abroad cited a lack of curricular relevance and the fear that study abroad would delay their college graduation (Carlson, Burn, Useem, & Yachimowicz, 1990).

Students whose parents have completed a higher education degree or who are in more highly qualified occupation appear to constitute a greater percentage of participants in study abroad. Study abroad programs have a strong attraction for students who already have some international experience, for example, students who themselves or whose parents or brothers and sisters had previously spent some time abroad (Opper, Teichler, & Carlson, 1990).
Method

Development of Instrumentation

Beginning in 1989, a literature review and input from experts in disability services were used to create a survey of student perceptions regarding study abroad. The survey was piloted with 9 students with disabilities and then revised for clarity. In the spring semesters of 1990 and 1991, 42 additional students with disabilities completed the survey, and the instrument was revised again to its current form (Hameister, Matthews, & Skolnick, 1991). The specific components of the survey form included (a) informed consent, (b) collection of demographic and student information, (c) questions about the students' interest in studying abroad and previous travel experience, (d) questions about perceived barriers to study abroad, and (e) questions about the perceived importance of various accommodations.

In developing questions about perceived barriers to study abroad, a 5-point scale was used. One (1) indicated no effect, two (2) mild effect, three (3) moderate effect, four (4) severe effect, and five (5) profound effect. Questions regarding the importance of various accommodations were also developed around a 5-point scale. Students could indicate that the accommodation was not important (1), of little importance (2), of some importance (3), had a lot of importance (4), or was of utmost importance (5).

Procedure

During the fall of 1992 and the spring of 1995 semesters, university students with disabilities were individually asked about their attitudes toward study abroad using "No Barriers to Study: A Study Abroad Interview Questionnaire" (Matthews, Hameister, & Skolnick, 1992). Interviews took about 15 minutes each, and all but five were done face to face by a disability service provider. The five exceptions were done by telephone.

Five universities participated in the study. Four of the institutions of higher education were located in Pennsylvania and one was in Michigan. Four were large public supported universities and one was a smaller state school.

Participants

Participants were selected from those students on their campus currently receiving disability services with a grade point average of at least 2.5 on a 4.0 scale. Interest in study abroad was not a criteria for selection, but the intent of our process was to interview students who would be eligible for study abroad.

Sixty-four undergraduate students participated in the study. There were an equal number of males and females, with an average chronological age of 23.0 years. The range of ages was broad, from 18 years 5 months to 51 years nine months. Subjects had completed an average of 64 credits with a grade point average of 2.9. In terms of disability, 24 were learning disabled, 12 visually impaired, 11 health impaired, 10 physically disabled, and
seven hearing impaired. The severity of disability was described as moderate for 25 students, mild for 23 students, and severe for 16 students. Severity of disability was usually determined from disability service records. When record information was unclear, the student was asked to identify their disability as being mild, moderate, or severe. About half of the subjects (29) used assistive devices. Although more than 30 devices or personal types of help were noted, devices that were most common were hearing aids, a cane, tape recorders, and readers. A variety of disability services were being rendered over an average period of three semesters. Services most commonly reported were testing accommodations, priority registration, academic advisement and counseling, and transportation.

Forty-seven of our 64 subjects, or 73%, had previously traveled outside of the United States. Canada, the Caribbean, Mexico, the United Kingdom, and France were the most frequented. The majority traveled with their family. Twelve students went with friends and 10 with high school groups.

Results

Barriers

Our sample was asked to what extent each of 12 barriers related to disabilities might affect them during study abroad. Overall, a mild (1.96) effect was indicated when all 12 items from the questionnaire were combined. A summary of our findings appears in Table 1. Those barriers having the most effect were "Lack of knowledge about available study abroad programs" (X = 2.39) and "Lack of available assistive devices and services such as interpreters or readers" (X = 2.39). Those were followed by "Financial barriers" (X = 2.34). Those of least concern were "Communication barriers caused by inability to be understood by others (disability-related communication barriers, not . . . foreign language competency)" (X = 1.56), "Architectural and manmade barriers" (X = 1.64), and "Ecological or natural barriers such as hill or snow" (X = 1.64). The remaining six barriers tended to be viewed in the middle of these two extremes and were perceived as having a mild effect. Fifty percent of the total responses indicated that the listed barriers would have no effect. Only 13% of all responses ranked the barriers as having severe or profound importance.

Accommodations

Subjects were then asked how important 16 accommodations were to them. Again a 5-point scale was used. Overall, our subjects felt that accommodations were "of some importance" (X = 2.93). A summary of our findings appears in Table 2. The most important one was "Being part of a program for nondisabled and disabled students as opposed to one for students with disabilities" (X = 3.80). The second most significant one was "advanced notice" (X = 175). A little more than half our subjects wanted six months notice. Approximately a quarter said they only needed three months. Eleven students requested one year's notice. Third in importance was "Support from (their)... academic advisor(s) and counselor(s)" (X = 3.52). Tied for fourth was "Support and encouragement
from family and friends" and "the length of the program" (X = 3.45). To the latter end, 45 of the 64 subjects, or 70 %, preferred a semester of study abroad. Ten indicated an academic year as the preferred length of time. The fifth accommodation was "Academic assistance such as note taking, readers, modified testing and/or interpreters." Tied for sixth was "Financial assistance beyond what (they) ... already (had)..." and a "Designated office or person to assist (while) ... abroad on disability-related needs." The remaining accommodations, although viewed as important by some, all received less than a 3.0 mean value.

Our subjects were then asked, "Following our discussion today, permit me to again ask you which of the following best describes your personal interest in study abroad." Eighty-four percent of our students did not change their minds about study abroad as a result of the interview. Sixteen percent, however, did. Of the 10 subjects who changed their minds, 3 were less interested, while 7 were more interested.

Eighty-three percent of the subjects said that they had considered and were interested in studying abroad, primarily because of the cultural experiences. Most students interviewed wanted to learn more about study abroad. They were specifically interested in available services, finances, and countries that they could visit. There was a wide range of interest in countries to study abroad. Thirty-two different countries and five regions were mentioned in the top three choices of our students. England was the first choice, followed by Australia. Germany and Spain tied for third, with Italy close behind. England was in the first three choices of 60 % of our poll as was Australia for 36 %.

The junior year was by far the preferred time to study abroad. This accounted for 27 (42 %) of our subjects. Fourteen students (22 %) had no preference. Nine students (14 %) were interested in study abroad during their senior year, 5 (8 %) liked the sophomore year, and 4 (6 %) wanted to study abroad as graduate students. No one indicated their freshman year, and 5 students (8 %) did not respond.

**Discussion and Implications**

**Barriers**

What are the attitudes of postsecondary students with disabilities toward barriers and accommodations when pursuing foreign study? Our findings suggest practical strategies for facilitating study abroad by students with disabilities.

In general, responses indicated little concern among participants regarding barriers related to disability. The three highest areas of concern were "lack of knowledge" "lack of available assistive devices and services," and "financial barriers."

Lack of knowledge in any sphere of activity will impact understanding, perception, and overall relationship to that activity. The data supports the idea that lack of knowledge can be a barrier in our understanding of study abroad. This may also influence willingness to pursue a study abroad opportunity. Three strategies that may reduce the impact of this
barrier will be advanced. First, develop a positive collaborative relationship between personnel in international education and those in disability service programs on your own campus and beyond. Second, utilize direct communication linkage with personnel serving students with disabilities abroad. One way to facilitate this strategy is through e-mail. Answers to a basic question, such as are textbooks available on audio tape, can be answered directly, quickly, and efficiently. Third, obtain disability service information for those study abroad or exchange programs that are the most utilized by students from your university. This helps to increase the knowledge base of disability services staff, thereby enhancing staff effectiveness in working with students.

Consider the availability of assistive devices and services. Initially, as part of the collaborative process, assist students in identifying their objectives for a successful study abroad experience. For example, students might seek a study abroad experience where they can be immersed in the Spanish language, or a program in which to develop an appreciation of architecture. Seek a good match between the individual student's objective and the attributes of study abroad programs that your institution offers. After several possible programs are identified, students may then need to discuss very specific individual needs, such as the availability of specific assistive devices and services. As they are available, continue to use devices and services that have contributed to success at the home institution, such as test accommodations or a personal computer, or locate other suitable alternatives.

Among the responsibilities to be assigned in the collaborative process is the identification of adequate financial resources. Costs for personal assistance, transporting of equipment, high medical costs, and adapted transportation may increase financial need. Good planning is the key to lessening the impact of financial concerns. Although students can typically use their existing financial aid packages when studying abroad, supplemental funding may also be available from a variety of sources. Some likely sources include vocational rehabilitation agencies, disability scholarships from the home institution, and grants from local disability agencies or private foundations. Additional partners in this process are the financial aid offices in the United States and abroad. Providing "program access" to study abroad, as required by Section 504 and the ADA, is the responsibility of the U.S. institution sponsoring the exchange. Many international universities are improving physical access and providing disability support staff and adaptive equipment. It is wise to establish exchange programs with such universities. While it may not be possible to accommodate every student with a disability in every overseas site, it should be possible to offer each student with a disability an accessible study abroad experience.

**Accommodations**

It is interesting to note that accommodation items evoked a stronger response than questions relating to barriers. This may suggest that students with disabilities are reaching a point where barriers are much less important than finding ways to work around barriers and advocate for disability-related accommodations. The fact that accommodations were of some importance to students is supported by the data which shows that eight items
related to accommodation had a mean of 3.0 or higher. The composite weighted mean for accommodations was 2.93.

One striking result of the interviews was that the highest weighted mean score was for the item "Being part of a program for nondisabled and disabled students as opposed to one for students with disabilities" (X=3.80). Conversely, among the lowest means was "Contacts with students who have disabilities similar to yours" (X = 2.17). The importance of a mainstreamed, included, undifferentiated academic environment to students with disabilities is supported by this study.

Program design considerations that were of particular importance to participants included advance notice (X = 3.75) and program length (X = 3.45). Thirty-four of 64 students (53%) noted that they would require six months advance notice to prepare for a study abroad experience. This data may allay concerns that inordinate amounts of planning time might be required to facilitate a study abroad experience for students with disabilities. Forty-five of 64 students (70%) of respondents noted that they would prefer to study abroad for one semester.

"Support and encouragement from family and friends" (X = 3.45) and "Support from your academic advisor(s) and counselor(s)" (X = 3.52) signify the importance of support from significant others in decision making regarding study abroad programming. Disability service providers can ensure that academic advisors are informed about the increasing opportunities for study abroad by students with disabilities. Students with disabilities, returning from successful study abroad experiences, can inspire and reduce concerns in prospective student travelers as well as their family/friends and academic advisors.

"Financial assistance beyond what you already have" (X = 3.30) is of some importance to students interviewed. Although students noted that financial considerations were of little concern as a barrier (X = 2.34), the accommodation of additional financial assistance was recognized as somewhat more important. Institutional scholarship funds for study abroad programs can provide the boost that enables students with disabilities to commit to study abroad.

Academic assistance such as note takers, readers, modified testing and/or interpreters" (X = 3.39) and a "Designated office or person to assist you abroad on disability related needs" (X = 3.30) were also of some importance as an accommodation to study participants. Assurances that a comparable level of service and someone to contact with disability related needs was of some or greater importance to three quarters of participants interviewed.

Additionally, the "No Barriers to Study: A Study Abroad Interview Questionnaire" responses indicate the individuality of needs relating to accommodation. On only one item was there a large majority of respondents who agreed that the accommodation was "not" or "of little" importance. Eighty-eight percent of respondents replied in this manner to the item "Personal care attendants, animal assistants (e.g., dog guides) and/or other
nonacademic help." In spite of this highly skewed response, it is clear that there are individuals who require such accommodation. This high percentage reflects a small number of students with disabilities requiring this type of assistance.

In spite of some individual differences in response to accommodation items, it is apparent from our discussion in this section that patterns do exist among our 64 respondents. For example, students overwhelmingly expressed a desire to participate in inclusionary programs. These patterns and others may be used as indicators of the types of considerations that should guide service providers when working with students in preparation for the study abroad experience.

**Tips for Disability Service Providers**

As a result of our investigation, a number of tips or ideas for disability service providers have surfaced. We conclude our discussion with the following summary:

1. Develop a positive collaborative relationship between personnel in international education and the those in disability service programs on your campus and beyond.

2. Utilize direct communication with personnel serving students with disabilities abroad.

3. Obtain disability service information for those study or exchange programs that are the most utilized by students from your university.

4. Seek a good match between the individual student's objective and the attributes of study abroad programs that your institution offers.

5. Match and translate devices, services, and other accommodations that have contributed to success at home to the receiving setting abroad. Identify a person or persons to be accountable for their delivery.

6. Identify adequate financial resources. Students with disabilities may require additional monetary support.

7. Students with disabilities want to be included in the same programs as students without disabilities. They do not want to be segregated.

8. For the most part, students with disabilities do not require lengthy planning time to study abroad. Furthermore, most want to go abroad for a semester.

9. Going abroad requires the support of family, academic advisors, and other students with disabilities who have studied abroad.

10. Although students studying abroad may have similar needs, each one is unique. Their individual needs, including those that may be disability specific, must be acknowledged in overcoming barriers and providing accommodations.
Limitations

Results of this study must be viewed with caution. The research spanned a 3-year period and two states with wide geographical representation. State and state-related universities of different sizes were represented. In replication efforts, it is recommended that a shorter time span be used.

Most students, who were contacted by the person responsible for disability services at their respective campuses, agreed to participate in this study. We did not, however, keep a record of those few students who refused to participate or why they did not want to participate.

Greater consistency in reporting the severity of disability of our subjects could have been realized in this study. For example, in some cases written records were used and at other times we clarified severity through self report.

There are advantages and disadvantages to different interview techniques. In this research, face-to-face and telephone interviews ensured that students with disabilities clearly understood the questions, and had the opportunity to request clarification. However, students may have been reluctant to admit to the importance of barriers while responding in a personal interview. Perhaps, ratings for the impact of barriers and the need for accommodations would be higher if anonymous surveys or group interviews were used to collect data.

A comparison with nondisabled students should be included in future research. For example, do nondisabled students perceive similar barriers to study abroad as students with disabilities? Do nondisabled students want students with disabilities accommodated in their study abroad programs?

Finally, future research should certainly investigate the patterns of responses from students with different types of disabilities. Our data for the importance of certain barriers and accommodations (e.g., architectural or transportation barriers; use of assistive devices) is related strongly to the type of disabilities represented in our sample population.

Table 1 Barriers to Participation in Study Abroad

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<th>1</th>
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<th>4</th>
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<th>Weighted Mean (X)</th>
<th>Rank</th>
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<td>1. The attitude and behavior of others toward you</td>
<td>20</td>
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<td>16</td>
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<td>0</td>
<td>1.94</td>
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<td>2. Architectural and man-made barriers</td>
<td>41</td>
<td>12</td>
<td>5</td>
<td>5</td>
<td>1</td>
<td>1.64</td>
<td>9</td>
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<td>3. Ecological or natural barriers such as hills or snow</td>
<td>43</td>
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<td>7</td>
<td>2</td>
<td>3</td>
<td>1.64</td>
<td>9</td>
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<td></td>
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<td>4. Transportation barriers</td>
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<td>10</td>
<td>8</td>
<td>3</td>
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<td>3</td>
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<td>5. Financial barriers</td>
<td>28</td>
<td>9</td>
<td>12</td>
<td>7</td>
<td>8</td>
<td>2.34</td>
<td>2</td>
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<td>6. Barriers created by rules that may be discriminatory and limit your participation</td>
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<td>13</td>
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<td>1.84</td>
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<td>7. Lack of available assistive devices and services such as interpreters or readers</td>
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<td>13</td>
<td>11</td>
<td>10</td>
<td>6</td>
<td>2.39</td>
<td>1</td>
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<td>8. Lack of Knowledge about available study abroad programs</td>
<td>21</td>
<td>12</td>
<td>19</td>
<td>9</td>
<td>3</td>
<td>2.39</td>
<td>1</td>
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<td>9. Your inability to interact confidently in social situations</td>
<td>34</td>
<td>15</td>
<td>7</td>
<td>6</td>
<td>2</td>
<td>1.86</td>
<td>7</td>
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<tr>
<td>10. Your health problems (disability related health problems only)</td>
<td>34</td>
<td>10</td>
<td>10</td>
<td>7</td>
<td>3</td>
<td>1.98</td>
<td>4</td>
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<tr>
<td>11. Your dependence on family, friends for independent living</td>
<td>30</td>
<td>18</td>
<td>11</td>
<td>4</td>
<td>1</td>
<td>1.88</td>
<td>6</td>
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<tr>
<td>12. Communication barriers caused by your inability to be understood by others (disability related)</td>
<td>44</td>
<td>8</td>
<td>9</td>
<td>2</td>
<td>1</td>
<td>1.56</td>
<td>10</td>
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</table>

Composite Weighted Mean (X) 1.96

Total Responses 385 160 122 69 32
Percent of Total Responses 50% 21% 16% 9% 4%

Key - 1 = nonexistent or none 2 = mild 3 = moderate 4 severe 5 = profound

### Table 2 Accommodations for Study Abroad

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<thead>
<tr>
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<th>1</th>
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<th>Weighted Mean (X)</th>
<th>Rank</th>
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<td>1. Traveling with friends</td>
<td>11</td>
<td>14</td>
<td>23</td>
<td>11</td>
<td>5</td>
<td>2.77</td>
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<td>2. Living in the same building with other students from your university</td>
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<td>19</td>
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<td>13</td>
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<td>2.47</td>
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<td>3. Contact with students who have disabilities similar to yours</td>
<td>21</td>
<td>21</td>
<td>13</td>
<td>8</td>
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<td>4. Being in program for nondisabled and disabled students as opposed to one for students with disabilities</td>
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<td>8</td>
<td>10</td>
<td>20</td>
<td>23</td>
<td>3.80</td>
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<td>5. Financial assistance beyond what you already receive</td>
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<td>17</td>
<td>18</td>
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<td>3.30</td>
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<td>6. Support and encouragement from family &amp; friends</td>
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<td>11</td>
<td>12</td>
<td>21</td>
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<td>7. Support from your academic advisor(s) and counselor(s)</td>
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<td>8</td>
<td>14</td>
<td>27</td>
<td>11</td>
<td>3.52</td>
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<td>8. Advance notice</td>
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<td>18</td>
<td>28</td>
<td>13</td>
<td>3.75</td>
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<td>9. Length of program</td>
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<td>19</td>
<td>33</td>
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<td>10. Academic assistance such as notetakers, readers, modified testing and interpreters</td>
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<td>8</td>
<td>12</td>
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<td>16</td>
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<td>11. Personal care attendants, animal assistants (e.g. dog guides) and/or other non-academic help</td>
<td>47</td>
<td>9</td>
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<td>3</td>
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<td>12. Accessible facilities such as housing &amp; classrooms</td>
<td>31</td>
<td>2</td>
<td>6</td>
<td>17</td>
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<td>2.52</td>
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<td>13. Accessible transportation and parking</td>
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<td>5</td>
<td>17</td>
<td>10</td>
<td>2.61</td>
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<td>14. Designated office or person to assist you abroad on disability related needs</td>
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<td>10</td>
<td>17</td>
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<td>10</td>
<td>3.30</td>
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<td>15. Assistive devices</td>
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<td>4</td>
<td>7</td>
<td>17</td>
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<td>16. Equipment maintenance</td>
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<td>4</td>
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</table>

Composite Weighted Mean (X) 2.93

Responses (Total = 1,022) 259 141 191 269 162

Percent of Total Responses 25% 14% 19% 26% 16%

Key - 1 = not 2 = little 3 = some 4 = a lot 5=utmost
References


**Authors Note**

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About the Authors

Peter R. Matthews, D. Ed., is a Professor of Special Education and Chair of the Department of Special Education and Early Childhood Education at Lock Haven University of Pennsylvania. For more than 10 years, much of his professional interest has focused on eliminating barriers, and accommodating and supporting students with disabilities in higher education.

Brenda G. Hameister received M.S. degrees from the University of Michigan and The Pennsylvania State University in Speech Pathology and Health Administration, respectively. For 15 years she directed the Office for Disability Services at Penn State. Currently, she serves as Special Assistant to the Executive Vice President and Provost there.

Nathaniel S. Hosley is an Associate Professor/Chair in the Department of Academic Development and Counseling and the Director of the Student Support Services Program at Lock Haven University of Pennsylvania. Among his responsibilities are providing academic support services to students with disabilities and students from disadvantaged backgrounds.