

Hidden Disabilities.... Hidden Potential: Empowering Yourself and Others to Dare to Dream

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**“Everybody is a genius.
But if you judge a fish by its ability to climb a tree,
it will live its whole life believing that it is stupid.”**

Albert Einstein

Famous People with Learning Differences

Many people have had to deal with a learning difference. You are not alone. Here are just a few leaders and scientists who will inspire you.

Winston Churchill

Young Churchill failed the 6th grade and later became a great statesman and Prime Minister of Great Britain.

Tom Cruise

Actor, who starred in *Top Gun*, *Mission Impossible*, *Rainman*, and many other movies, has a learning disability.

Thomas Edison

One of Edison's teachers told him that he was too stupid to learn anything. He went on to be a famous American inventor responsible for the photograph, phonograph and electric lighting. Edison wasn't identified with a disability but may have had a learning disability.

Albert Einstein

Einstein was four years old before he could speak. He failed high school math but went on to be a brilliant physicist who developed the Theory of Relativity. Einstein may have had autism, according to Temple Grandin, PhD.

Temple Grandin, PhD

Dr. Grandin, diagnosed with autism as a child, designed a cattle processing system that over half of U.S. facilities use. She makes the case that the world needs people with autism – visual thinkers, pattern thinkers, and all kinds a smart, geeky people.

Whoopi Goldberg

Whoopi Goldberg is an American comedian, actress, singer-songwriter, political activist, author and talk show host who has depression.

Steve Jobs

Steve was an entrepreneur, marketer and inventor who was the co-founder and chairman and CEO of Apple Inc and ADHD.

J.C. Penney

Penney was in a psychiatric hospital when he was 56. He owed more than six million dollars. However, when he died at the age of 92, he was a multi-millionaire.

Tim Tebow

Tim Tebow is an American football quarterback who is the winner of the Heisman trophy, and two NCAA National Football Championships. He has learning disabilities.

And You - Nothing is Impossible!

Federal definitions, number and percent of students ages 6 -21 served under IDEA by disability category		
Federal Definition, as defined by IDEA of 2004	Percent	Approximate number
Autism means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three that adversely affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance environmental change or change in daily routines, and unusual responses to sensory experiences.	3.7	225,030
Deaf-blindness means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness.	>.1	
Deafness means a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification that adversely affects the child's educational performance.	>.1	
Emotional disturbance means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance: (A) An inability to learn that cannot be explained by intellectual, sensory or health factors. (B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers. (C) Inappropriate types of behavior or feelings under normal circumstances. (D) A general pervasive mood of unhappiness or depression. (E) A tendency to develop physical symptoms or fears associated with personal or school problems.	7.5	456,142
Intellectual disability (previously defined as Mental Retardation) means significantly subaverage general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a child's educational performance.	8.6	523,043
Hearing impairment means an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but that is not included under the definition of deafness in this section.	1.2	72,983
Multiple disabilities means concomitant impairments (such as intellectual disability-blindness or intellectual disability-orthopedic impairment), the combination of which causes such severe	2.2	133,802

educational needs that they cannot be accommodated in special education programs solely for one of the impairments. Multiple disabilities does not include deaf blindness.		
Specific learning disability means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.	44.6	2,712,523
Speech or language impairment means a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, that adversely affects a child's educational performance.	19.1	1,161,641
Orthopedically impaired means a severe orthopedic impairment that adversely affects a child's educational performance. (e.g. cerebral palsy, amputations).	1	60,819
Other Health Impairment means having limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that—(i) is due to chronic or acute health problems such as asthma, attention deficit disorder, or attention deficit hyperactivity disorder , diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette syndrome; and (iii) adversely affects a child's educational performance.	9.9	602,107
Traumatic brain injury means an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance.	.4	24,328
Visual impairment including blindness means an impairment in vision that, even with correction, adversely affects a child's educational performance. The term includes both partial sight and blindness.	.4	24,328
Total		6,081,890

IDEA regulations: Part 300/A/300.8(c). 8/14/2006. Retrieved from idea.ed.gov on July 14, 2013.

U.S. Department of Education, Office of Special Education and Rehabilitative Services, Office of Special Education Programs, *30th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2008*, Washington, D.C., 2011

Hidden Disabilities..... Disappointing Outcomes Drug Abuse, Addiction and Lost Potential

Many Youth with Disabilities Transition to Unemployment or Underemployment

- Bureau of Labor Statistics (2012) report that only 20.5% of adults with disabilities are employed compared to 69% of adults without disabilities
- Employment is higher for transition-age youth with disabilities, ranging from 30% of youth with deaf-blindness to 79% for youth with SLD (NLTS2, 2013)
- Postsecondary enrollment rates also varied widely, ranging from 28% for youth with ID/MR to 71% for youth with SLD (Sanford et al., 2011).
- Students with hidden disabilities experience higher rates of school dropout, unemployment, and substance abuse as compared to their non-disabled peers (Annie E. Casey Foundation, 2009).

American teenagers use drugs at a higher rate than any other country

- One in twelve Americans over the age of 12 is addicted to drugs
- Everyday drugs kill over 365 Americans, more than any other preventable health problem.
- Drugs are the number 1 cause of crime
- Overall cost of drug abuse in U.S. exceeds \$400 billion annually
- 40% of college students binge drink (more than 5 drinks at a time)

Having Hidden Disabilities Increases the Likelihood of Using Drugs

- Academic failure and peer rejection are common risk factors associated with substance abuse
- Many kids have checked out of school – It's better to look like you don't care than to look stupid
- Kids with LD, ADHD or anxiety disorders are more likely to use and abuse drugs
- Six out of ten addicts have reported having a hidden disability
- Some people are “wired for pleasure” and have “the addiction gene”

Addiction is a Disease & a Hidden Disability and Must Be Prevented/Treated

- Addiction is usually an attempt to soothe emotional suffering –often rooted in childhood
- Start early and communicate about feelings, disabilities and risks of drug & alcohol use/abuse; parents need to listen to their children and gain help, when needed
- Set limits and consistently enforce them; Do NOT tolerate recreational drug use in teens
- Exercise, journaling and yoga decrease stress, eases pain and increase pleasure
- Build social and academic competencies to strengthen kids' self-esteem
- Know the impact of hidden disabilities and advocate for accommodations and supports
- Teach/model self-awareness of emotions and coping strategies to manage emotions/expectations
- Teach/model disability pride – disclose proudly!

Strategies to Teach/Strengthen Your Brain's Executive Functioning

Executive Function	Strategies
Organize	<p>Organize time</p> <ul style="list-style-type: none"> • Choose either a paper or electronic calendar for school, sports, work, chores, and recreational activities (smart phone or tablet have calendar apps) • Use only one calendar to record all project due dates, recreation dates and To Do tasks • Record important family events (birthdays, etc.) on calendar • Allocate time for studying and completing projects (or parts of projects) • Estimate more time than may be needed (twice the amount of time that you think is needed is recommended) <p>Organize tasks</p> <ul style="list-style-type: none"> • Break projects into smaller steps working back from the due date • Schedule time for reading, exercise, friends, and yourself • Schedule time for each step or “chunk” of the project by allocating blocks of time to work on the project • Check off tasks that are completed and reinforce self-regulation <p>Organize materials</p> <ul style="list-style-type: none"> • Maintain an organized workspace with writing supplies (computer, pen, paper), reference materials (calculators, internet access), and color coded files for important papers (permission slips, homework) • Schedule a regular time each week to clean out mail and paperwork to maintain organization
Prioritize	<ul style="list-style-type: none"> • Lead by example – model your own organizational strategies and share examples of how you prioritize on a daily, weekly or monthly basis. • Rank tasks based on due dates and difficulty level or stress level • Gather materials needed for projects • Break down tasks into smaller chunks, if needed • Sequence tasks logically • Create comfortable routines so each day and week you have consistent expectations • Start small and reinforce completing tasks often • Keep your calendar prioritized, shifting events to accommodate higher priority tasks

Function	Strategies
Shifting/ Thinking Flexibly	<ul style="list-style-type: none"> • Use puzzles or games to demonstrate that when you get stuck, it's ok to start over with a different puzzle piece or approach (Words with Friends, etc) • Visualize and discuss jokes and riddles to recognize ambiguities and reinforce the use of context clues • When reading, stop and question the meaning of the text • Post uplifting quotes on post-it notes to remind yourself of your worth and priorities <p>“When the Going Gets Tough – the Tough Get Going” “Where there is a WILL – There is a WAY”</p>
Access Working Memory	<ul style="list-style-type: none"> • Take learning style inventories to determine your preferred learning styles www.vark-learn.com (Visual, Aural, Read/Write, Kinesthetic) • Process info using your learning style strengths and advocate for others to present info using your strengths • If you have poor auditory memory, write down decisions and action items • Give written and verbal instructions • Discourage multitasking and focus on one thing at a time.
Self-Monitor/ Self-Check	<p>Calendar Priorities</p> <ul style="list-style-type: none"> • Spend 5 -15 minutes every morning prioritizing tasks for the day • Spend 15 minutes at the end of the “work day” checking off tasks completed and reorganizing the calendar “To Do List” for the next day <p>Reading</p> <ul style="list-style-type: none"> • Read small sections and check for understanding by answering questions (What was the main idea? What facts were stated? Who did what?) <p>Writing</p> <ul style="list-style-type: none"> • Read your writing aloud or use text-to-speech technology to check for sentence structure and grammar • Use different colored pens or print drafts on different color paper to review and edit drafts • Use computer editing functions and make a list of common mistakes (words often misspelled, grammar errors); then make a list of errors to watch for. <p>Math</p> <ul style="list-style-type: none"> • Check work for accuracy by using the reverse operation and/or using a calculator • Create a personalized checklist to identify common errors

Addressing Common Behavior Problems

Problem Behavior	Strategies
Interrupting with unrelated topics	<ul style="list-style-type: none"> • Teach self-regulation skills by identifying clear guidelines for when appropriate times to discuss unrelated topics • Provide an appropriate time (lunch, regularly scheduled meetings, drive time) for individuals to share on their passionate topics • Pair individuals with another others with similar interests • Allow children to use their passion for specific projects whenever possible
Meltdowns	<ul style="list-style-type: none"> • Teach coping techniques to use when anxiety increases. • Have children carry a laminated card with the steps outlined that they can pull out to review when anxiety increases • Spend a few minutes each day reviewing the schedule and preparing the student in advance of unusual transitions or class activities • Identify a safe place the child/youth/adult can go and give the them permission and praise for using their safe place to avoid a public meltdown • As teens prepare for transition to college and careers, align breaks and coping strategies to what is appropriate within job settings and/or college classrooms
Refusing to complete work/assignments	<ul style="list-style-type: none"> • Reduce the amount of problems that need to be completed if high accuracy occurs (for example, if you get all the even problems correct with 100% accuracy, you can skip the odd numbered problems) • Use speech-to-text technology to reduce writing tasks that children/teens might find challenging. • Pair the teens with another teen to work on a project together so each individual can contribute to the completion of the project using their strengths.
Inappropriate social skills, including poor problem solving behaviors	<ul style="list-style-type: none"> • Model appropriate social skills and identify good examples of social skills when modeled by others • Meet with children individually to discuss poor examples of social skills • Role play both appropriate and inappropriate social skills and discuss how poor social skills detract from a productive class climate • Post rules and other positive behavior support strategies in the class and provide visual and verbal prompts when he/she deviate from what is acceptable

Examples of How to Improve Coping Strategies

Example A: When other kids say things that upset me, I can tell myself...

- Just because someone says something doesn't make it true.
- I am staying in control of myself. I won't let others' words control me.
- I don't want to react while I'm upset.
- I can speak up for myself in a positive way.
- My mad and sad feelings will change soon.
- I can go talk to _____ (fill in a safe person such as guidance counselor, librarian, etc).

Example B: We all have to do things we don't like to do.

- I may want to quit. When that happens I will take a break and ask for help.
- It is important that I show myself and others that I can do things I don't like to do.
- Even teachers, parents and the others have to do things they don't like to do.
- When I have to do things I don't like, I will remind myself that this task will not go on forever.
- Being mature means doing things without complaining.

Example C: Taking a break when I'm upset.

- Sometimes I will need to take a break
- It's ok to take a break when I'm upset
- It is important to take a break so that I have time and space to calm down
- I must request a break before leaving the room.
- I must go to the _____ (fill in safe space in the home or school).
- When I take a break, I must stay in my break area.
- Before leaving my break area, I will do a "self-check" to make sure I am ready.
 - Am I still feeling tense?
 - Has my breathing slowed down?
 - Do I feel calm?
 - Have I quieted down?



Disability Pride

Stages	Path of Disability Acceptance	Path of Disability Rejection
1. Challenges at school, home or with friends	Grief, confusion, frustration	Grief, confusion, frustration
2. Referral for counseling/evaluation	Search for answers/solutions	Do not cooperate with evaluation process
3. Evaluation confirms hidden disability	Initial sadness or relief of diagnosis to explain challenges that transcends into appreciation of additional resources/services	Denial/refusal of additional resources/services/medication/modifications Frustration continues
4. Awareness of disability characteristics, accommodations, etc. Positive role models with similar diagnosis identified	Acceptance – positive role models promote optimism; Use of medication and/or accommodations result in achievement and gains	Denial, refusal of assistance. Search for rebel peer group to find acceptance and a sense of belonging
5. Gain self-advocacy skills; increased comfort in discussing disability among peers with and w/o disabilities	Disability pride grows; system values students for individual assets; interests, passions and preferences unfold	Rejection of establishment's decisions; self-medication to deal with anger and frustration. If not controlled, leads to addiction
6. Disability Pride - Shares disability experiences openly and advocates for accommodations	Pay forward as mentors for others with hidden disabilities to promote disability pride	Risks of <ul style="list-style-type: none"> • Underachievement • Drug use/abuse • Underemployment • Challenging relationships

We need to have a better understanding of disability – parents, teachers and children and adults with hidden disabilities - must gain a sense of acceptance and pride in who we are!

Hidden Disabilities....Hidden Potential: Assisting Struggling Students Dare to Dream

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Rationale: Why do the millions of people with learning challenges face school failure, unemployment, underemployment, or difficulty navigating life's major transitions from school to adult life? Told through the eyes of successful people with hidden disabilities, this book will inspire educators, parents and youth themselves. Successful strategies, interventions and activities to empower youth in the classroom and the community are described to maximize the potential of people with hidden disabilities. Personal stories demonstrate how recommended strategies are positively associated with the ability to achieve your life goals.

Chapter 1: Who Are the Millions of People with Hidden Disabilities and Why Do So Many Struggle? Chapter 1 provides an overview of the number of students with hidden disabilities; define the types of disability categories that are official members of the cohort, as well as those who were never identified but share many similar characteristics.

Chapter 2: Self-Advocacy: What is it and How do you Promote It? Chapter 2 introduces the principles of self-advocacy, explain how it works in a variety of environments, and challenges readers to embrace self-advocacy from an authentic and strength-based foundation.

Chapter 3: Mentoring: The Role of Positive Role Models. Mentoring assists students who often feel alone connect to a larger community of people who lend support to students through critical junctures and transitions. Various models of mentoring are defined and described

Chapter 4: Transition GPS: Planning for College and Careers. Chapter 4 provides an overview of self-directed transition planning so educators and parents can empower students to take charge of their own transition to college and careers.

Chapter 5: College Life: Valuable Life Lessons In the Classroom and On the Campus. Chapter 5 explores the rights and responsibilities of a college student with hidden disabilities. Strategies for test preparation, writing research papers, and advocating on campus are provided.

Chapter 6: Daring For the Dream Job: Living a Life of Value. Studies have shown that more than 40% of America's entrepreneurs are people with hidden disabilities. This chapter will describe strategies to assist students explore their own interests, passions and abilities and learn how to explore career opportunities that turn a job into a career.

Chapter 7: Family Life: The Final Transition. We address how hidden disabilities impacts family life, including relationships with spouses, children and parents.

Partial List of References, Websites and Additional Resources

Attention Deficit Disorder Associations – www.add.org or www.chadd.org

Association for Positive Behavioral Supports, www.apbs.org

American Psychiatric Publishing. (2013). Diagnostic and Statistical Manual of Mental Disorders, 5th ed (DSM-IV). Arlington, VA, American Psychiatric Publishing, Inc.

IDEA regulations: Part 300/A/300.8(c). 8/14/2006. www.idea.ed.gov on July 14, 2013.

Disability Statistics and Demographics, 2011 Annual Disability Statistics Compendium
www.disabilitycompendium.org/

The Partnership for 21st Century Skills, www.p21.org

National Center for Learning Disabilities, www.ncld.org (includes resources for parents, adults with LD and ADHD, and school personnel on treatment, symptoms and executive functioning)

National Center on Response to Intervention (RTI) www.rti4success.org/ Resources for Families

National Dropout Prevention Center for Students with Disabilities, www.ndpc-sd.org/NDPC-SD

National Longitudinal Transition Study 2 website and related reports, www.nlts.2.org

National Secondary Transition and Technical Assistance Center, www.nsttac.org

Sheff, D. (2013). Clean: Overcoming addiction and ending America's greatest tragedy. Boston: Houghton Mifflin Harcourt. www.hmhbooks.com

Videos of personal testimonials of living with hidden disabilities: www.ted.com and Youtube

The Technical Assistance Center on Positive Behavioral Interventions and Supports
www.pbis.org

Universal Design for Learning, www.cast.org

U.S. Department of Education, Office of Special Education and Rehabilitative Services, Office of Special Education Programs, *30th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2008*, Washington, D.C., 2011.

Who Cares About Kelsey? <http://www.whocaresaboutkelsey.com/>