Student Relations Advisory Committee
Minutes
March 13th 2009

Present: Chair Charles Koopmann, Bonnie Fauman, Karl-Georg Federhofer, Annette Haines, Royster Harper, Janine Maddock, David Potter, Mark Tucker, Ian Margolis, Karin Teske (Student Support)

Guests: Todd Sevig; Director, Counseling and Psychological Services
        Sam Goodin; Interim Assistant Dean of Students
        Stuart Segal; Interim Director, Services for Students with Disabilities

The meeting was called to order at 11:58am

Chair Remarks

The residency issue is on hold; more information is needed on the residency requirements of other Michigan universities, other big 10 universities, as well as peer universities.

The April agenda was left open; the meeting could be used to address residency issues if the information is available in a timely manner.

An additional resource for information may be the university ombudsman Bob Holmes who sees residency cases and could provide a neutral perspective on the topic. Another suggestion was to invite a member of the review board that deals with student petitions for residency.

It was noted that first the information should be gathered to see if Michigan is an outlier in residency policies before moving forward.

An email will be sent out to poll the committee about whether to hold the April meeting currently schedule on the 24th of April, or possibly changing the date to the 17th.

Updates on Students with Disabilities

An issue that still remains regarding students with disabilities in the stigma surrounding it. One area that is being worked on in conjunction with MSA is advocacy efforts. Two additional projects currently being pursued are:

- Mentoring program for students with disabilities to have an upper class person as a mentor
- Creating an honor society for students with disabilities; one currently exists internationally

The Alpha Smart Pen is a technology that records lectures as the student takes notes; if the student leaves gaps in their notes, the student can go back and press the paper where they stopped taking notes to hear a recording of the lecture at that point. Two of these pens for trial are available for students for the asking.
This year 300 new students registered for services. Currently serves over 1,200 students of which 99% receive accommodations in the classroom. Close to 7,000 tests have been given with accommodation by faculty without denial by faculty for such accommodation. It is the student’s responsibility to give two weeks prior notice, if notice is not given the faculty can rightfully decline to accommodate.

The two biggest groups of students with disabilities are those with learning disabilities and those with mental health conditions including anxiety and depression, which are the fastest growing groups. The majority of the 300 new students this year fit into this category; mood disorders such as depression can have an effect at the cognitive level such as knocking out short term attention and memory. Accommodations such as additional test time or quieter work space helps to address these problems.

A question was raised as to what training the faculty receive to deal with student accommodations

Usually stories from the students do not surface in time to do anything about it; many unaccommodating faculty are not full time; some may be graduate students who are no longer at the university by the time the problem has been identified.

A message from the provost or president should be explicit to faculty that this program of accommodation is supported and that the expectation is to do what is necessary; it is an expectation of the university that the faculty comply.

How have things changed with accommodations for physical disabilities?

The Office of Institutional Equity is about to engage in a 2-3 year program of doing an overhaul of accessibility of the campus; make changes in signage, produce a virtual map of campus that will be on the web.

The services provided that are available on the web are not updated and links are broken. There are 120 sites that involve academic related support, mentoring, etc. and these sites have been made searchable. A system was created for keeping it updated by using a database that is modified each semester.

Knowledge and perceptions have changed getting the word out to students and letting them know they are eligible for accommodations; the definition of disability has not changed but disabilities are more recognized as needing services to address them.

Update on Campus Mental Health

College counseling centers not only work on mental health issues but also look at student life and development. CAPS and other mental health services on campus address anything from emergency issues to subclinical issues such as how a college student’s world view changes over time.

CAPS: ensure accessibility to care, use a community approach and anticipate future needs, often looking at middle and high school trends.
College and university environments have been recognized as protective against suicides, with a lower rate for college students than for non college students (7.5/100,000 v. 15/100,000) Everyone, not just CAPS and mental health services, plays a role in promoting protective factors.

The job of CAPS is also to help faculty, staff and students when they are concerned about a friend, student, roommate, etc to do something. “Do Something” campaign, and MiTalk have helped to encourage a community of caring on campus.

CAPS has extended hours now serving until 7pm most days of the week to better accommodate a student’s schedule.

-About half of students were satisfied with the amount of time they had to wait for CAPS services, including emergency and non-emergency.
- the level of urgency to seek help is subjective to the individual; students define for themselves to see someone right away or not rather than have a healthcare professional make an assessment and make that decision.

-Self-reported data shows that compared to undergraduates, graduate students have a higher rate of mental health issues interfering with academics.
- A big-10 study showed that the highest rates of suicide were for graduate students
- Graduate advisors have not had training in the area of mental health issues affecting students; there has not been training of this nature for the graduate directors in LS&A.

Based on the given information, the current availability of CAPS resources should be improved to become more available to graduate students.

SRAC concluded that training is something that needs to be forced upon faculty by pushing CAPS issues and training onto the Rackham agenda for their department meetings.

Motion to make a recommendation to include an informal session during Rackham chairs’ and directors’ meetings covering CAPS programs and how to incorporate facilities and resources for graduate students.

-As a resource, Janet Weiss could be contacted for the purpose of getting CAPS involved in Rackham orientation.
-Initially start with the training of chairs and directors in how to incorporate mental health facilities and resources for graduate students.
-Encourage all graduate student orientation programs to include information from CAPS- visits from representatives, pamphlets, etc.

Recreational Sports Task Force Report

Executive summary recommendations; in general we need more facilities and geographically dispersed facilities for the health and physiological well being of being active; Pfizer area would be excellent; especially for faculty on the north side of campus.
Closing Comments

Back to the residency issue, until you have a conversation you cannot decide if what is going on is sufficient. People with the information believe what is going on is sufficient. For the students who will be approved for in state residency, why have the cumbersome process to do so? Even if we do not change the rules there still may be a problem with the current policies but we won’t know until we are able to frame a conversation.

VPSA Remarks

Think about meeting topics for next year.

The meeting was adjourned at 1:36pm.

Respectfully Submitted by:

Karin Teske

SACUA Student Support