Disability Resource Center
San Jose State University

Learning Outcomes and Assessment Report

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# LEARNING OUTCOMES AND ASSESSMENT REPORT

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INTRODUCTION

During the Summer 2005, the Disability Resource Center (DRC) was charged with engaging in a process to assess student learning as part of a university wide outcome-based education effort. The DRC’s Associate Director convened a Learning Outcomes Assessment (Committee) and tasked the group with a critical first step in the process, namely, developing a set of learning Outcomes. In order for the learning Outcomes to be reflective of the DRC in particular and to guide DRC practices and program development, the Committee reasoned that the learning Outcomes must capture the skill sets DRC students should be expected to achieve. Therefore, with this in mind, the Committee developed the following student learning Outcomes:

Learning Outcome 1:

a. Student can name his/her specific disability with ease.
b. Student can describe his/her specific disability with ease (e.g. student can provide one to three characteristics/symptoms of the diagnosed disability).
c. Student can articulate how the effects of his/her disability impact the student in an academic setting through concrete examples.
d. Student can communicate to others (including professors) about how the functional limitations of his/her disability impact the student in an academic setting.

Learning Outcome 2:

a. Student understands how the functional limitations of his/her disability impact specific curriculum requirements and can determine reasonable accommodations.
b. Student can communicate to professors the need for curriculum-related accommodations.

Learning Outcome 3:

a. Student understands the process of requesting and securing accommodations (and can communicate the various steps involved in the process)
The following section will provide a rationale for the development of the above-listed student learning Outcomes. The Committee affirmed that in order for students with disabilities to have equal access and opportunity to the curriculum, knowledge of one’s specific disability and understanding of how the disability impacts one in an academic environment are paramount. Additionally, it is not enough for students to merely possess this knowledge; students must be able to articulate how the functional limitations resulting from the disability impact one’s performance in the university setting. Without student initiated communication to professors and others in the academic arena, successful accommodations cannot be implemented.

The student Learning Outcomes assess the following student skills:

1. Disability diagnosis knowledge and elaboration accuracy (Learning Outcome 1a and b)
2. Disability knowledge, metacognition (or one’s ability to reflect on how one approaches learning), and self-awareness (Learning Outcome 1c)
3. Self-advocacy and willingness to communicate disability-related issues with those in the academic arena (Learning Outcome 1d)
4. Knowledge of accommodation needs and the relationship of disability needs to curriculum requirements (Learning Outcome 2a)
5. Communication of accommodation needs to professors (Learning Outcome 2b)
6. Knowledge of university and DRC procedures for requesting and securing curriculum-related accommodations (Learning Outcome 3a).

ASSUMPTIONS

The following assumptions were acknowledged by the Committee:

- Participants will answer the questions posed in the survey and the in-person assessment honestly and freely.
- Participants are not answering questions to please the evaluator or to put him/her in a better light.
- Participants accept that they have a disability as evidenced by their registration with the DRC.

METHODOLOGY

The Disability Resource Center (DRC) invited students to respond to four statements, encapsulated in Learning Outcome 1, on a student assessment survey delivered to all registered DRC students electronically in August 2005. See Appendix A for a copy of the invite letter and survey instrument. Twenty one students responded and completed the survey. Each statement was accompanied by four possible responses on a Likert scale, as follows: Strongly Agree, Agree, Disagree, and Strongly Disagree. The statements read as follows: (1) I can name my disability with ease, (2) I can describe my specific disability with ease, (3) I understand how the effects of my disability impact me in an academic setting
(e.g. classroom, studying, learning, and interacting, and, finally, (4) I can communicate to others about how the effects of my disability impact me in an academic setting (e.g. classroom, studying, learning, interacting). Results of the survey illustrated via pie charts are presented below. Brief discussion of the survey results will be addressed subsequently, in the section entitled Conclusion.

Following the student survey, the DRC contacted the 21 survey participants and asked the students to meet for a one hour follow-up appointment during the Spring 2007 semester. While the DRC contacted all 21 survey participants only four participants completed the follow-up assessment. The remaining 17 respondents presented the following reasons for lack of participation:

1. Since follow-up assessment appointment was not necessary, respondent declined (1)
2. Incorrect contact information (1)
3. No response to contact attempts (8)
4. Canceled appointment, did not reschedule (1)
5. No show for scheduled appointment (1)
6. No time to participate (1)
7. Simply declined (2)
8. Believed would not benefit (1)
9. Rescheduled two appointments, cancelled second appointment, stating would call back to reschedule, no follow-through (1) [authors believe the functional limitations of this individual student interfered with the individual’s ability to follow-through].
During the follow-up, in-person assessment sessions with the four participants, an evaluator asked participants the above-outlined seven learning outcome statements posed as questions and rated the participants' responses on the following scale: No, Somewhat, and Yes (see Appendix B). While the student survey aimed to determine students' perceptions of their disability and ability to self-advocate, the follow-up, in-person evaluator-directed assessment aimed to determine the accuracy of students' disability knowledge and self-advocacy skills. Furthermore, the in-person assessment permitted the evaluators to observe how the students responded to the questions and permitted glimpses into nonverbal communication.

**RESULTS**

In-person assessments were conducted on four out of the 21 survey respondents. The following section will highlight disparities between participants' perceived notions of their disability and self-advocacy skills and the actual disability diagnoses, descriptions, and self-advocacy skills. The evaluator educated the participants each time a participant’s perception did not match accurate disability-related information. The evaluator referred to the disability documentation in the participant’s case file along with the two evaluators’ combined disability knowledge when educating the participant. At the conclusion of each session, the evaluator gave each participant a written definition of his/her disability, a description of the disability's impact on one’s learning, and interventions and strategies. See Appendix C for copies of the individualized educational material provided to the participants.

**Statement One: “I can name my specific disability with ease.”**

In response to the first statement on the student survey, “I can name my disability with ease,” Participant A indicated that she disagreed with this statement. Following the student survey, an evaluator asked Participant A this statement and rated the Participant’s oral response as “Somewhat” (on the following scale No, Somewhat, and Yes) indicating that Participant A exhibited partial knowledge regarding the name of her disability. Evaluators observed that Participant A answered that question indecisively suggesting a degree of uncertainty about the accuracy of the disability term she provided. A second participant, Participant B, indicated on the student survey that he “strongly agreed” that he can name his specific disability with ease. However, the evaluation revealed that Participant B was unable to accurately name his specific disability. Evaluators observed that Participant B answered that question indecisively suggesting a degree of uncertainty about his response given.

The remaining two participants' perceptions regarding their ability to name their specific disability with ease was in harmony with their demonstrated ability to accurately name their disability. For example, Participant C replied that he “strongly agrees” with the statement, “I can name my disability with ease.”

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1 Participants’ names have been withheld to protect the participants’ identity.
and the evaluator found this to be the case during the in-person assessment. Furthermore, Participant D responded that she “disagrees” with the aforementioned statement. In-person assessment confirmed this, revealing that Participant D was unable to accurately name her specific disability. Evaluators observed that Participant D answered that question decisively suggesting a degree of certainty about her lack of knowledge regarding the name of her specific disability.

**Statement Two: “I can describe my specific disability with ease.”**

Overall, evaluations indicated that student participants possessed stronger ability to describe particulars of their disability than they were to articulate the actual disability diagnosis. Two participants’ perceived ability to accurately describe their disability particulars differed from the actual disability descriptions. For example, Participant C and Participant B both responded that they “Strongly agree” with the statement that reads, “I can describe my specific disability with ease.” In-person assessments however, revealed that both participants were only somewhat able to accurately describe their specific disability.

**Statement Three: “I understand how the effects of my disability impact me in an academic setting (e.g. classroom, studying, learning, interacting).”**

In-person assessment suggested that all four participants accurately understood how the effects of their disability impact them in an academic setting. Furthermore, students’ perceptions of their ability to understand how the effects of their disability impact them in an academic setting were in line with their demonstrated ability as evidenced during the one on one assessment.

**“Statement Four: I can communicate with others, including professors, about how the effects of my disability impact me in an academic setting (e.g. classroom, studying, learning, interacting).”**

Disparities between participant’s perceptions about their ability to communicate to others about how the effects of their disability impact them in an academic setting and participants’ demonstrated ability to communicate to others about the nature of the disability existed for two of the four participants. Specifically, Participant A responded that she agrees with the statement that she can communicate to others about how the effects of her disability impact her in an academic setting. However, the in-person
assessment suggests that Participant A is only somewhat able to communicate to others about how the effects of her disability impact her in an academic setting. In addition, Participant A responded that she agrees with the statement that she can communicate to others about how the effects of her disability impact her in an academic setting. However, the in-person assessment suggests that Participant A is unable to communicate to others about how the effects of her disability impact her in an academic setting.

CONCLUSION

This section aims to highlight some of the results that surfaced from 1) the survey and 2) the survey and the assessment.

Survey Findings (n=21)

- Thirty-eight percent of survey participants indicated that they could not name their specific disability with ease.
- Fourteen percent of participants indicated that they could not describe their specific disability with ease.
- Ninety-five percent, a large majority of participants, indicated that they understand how the effects of their disability impact them in an academic setting.
- Ninety percent, a large majority of participants, indicated that they could communicate to others how the effects of their disability impact them in an academic setting.
- Ten percent of participants, however, expressed an inability to communicate to others about how the effects of their disability impact them in an academic setting.

Comparison between the Survey (Assesses Perceptions) and Assessment Findings (Assesses Actual Knowledge and Skills Demonstrated during the in-person assessment (n=4))

- Disparities exist between participants’ perceptions of their disability knowledge and self-advocacy skills and participants’ actual (i.e. demonstrated) disability knowledge and self-advocacy and communication skills.
- Reflective of the survey results (38%), a substantial group of the assessment participants, namely 50%, could not name their specific disability with ease.
- Indecisiveness in responding to the questions characterized all participants in at least one of the questions posed.
- Participants exhibited a greater ability to describe aspects of their disabilities than they were able to define their particular disability diagnos[es].
Assessment Limitations and Outcomes

The following assessment limitations were acknowledged by the Committee:

LIMITATIONS

• The small sample size of the survey (n=21) and the follow-up assessment (n=4) does not permit the results to be generalizable to the DRC student population as a whole.
• Possible threat of internal validity due to maturation effect resulting from the time gap between the administration of the survey (Summer 2005) and the in-person assessment (Spring 2007).

The in-person assessments produced the following learning Outcomes:

• All four participants successfully achieved DRC’s three Learning Outcomes (refer to page 1) through their participation in, and, through their completion of the in-person assessment and the accompanying educational component. During the educational component, participants were provided with oral and written information explaining their disability, functional limitations, impact on the curriculum and intervention compensating strategies.

• All participants enthusiastically expressed appreciation for the comprehensive information presented in both orally and verbally, further stating they would be putting the information to use both academically and in the employment arena.

In conclusion, although the number of student participants was minimal with respect to the number of respondents, the DRC fully achieved the learning Outcomes for a segment of the registered DRC students.
Appendix A

Survey Invite letter

Copy of survey instrument

Respondents’ statistics
Appendix B

Assessment Tool
Appendix C

Individualized educational material presented to participants