

Hello from the RBHS Office of Disability Services!

Would you like additional information or a presentation in your course? Let us know: odsrbhs@ca.rutgers.edu

We invite your feedback https://rutgers.ca1.qualtrics.com/jfe/form/SV_5tcPBj4uh1vpwqi

The RBHS Office of Disability Services (RBHSODS) provides the necessary tools, resources and support for disabled students to become responsible decision-makers and self-advocates in charge of their own future. We are also here to support faculty and staff.

What is a Letter of Accommodations?

A Letter of Accommodations is a document provided by the Office of Disability Services that explains to faculty the reasonable accommodations to be provided to a student. The Letter of Accommodations is provided to students who have met all of the following criteria:

- ◆ Submitted [appropriate documentation](#) to verify their disability
- ◆ Met with a representative from the Office of Disability Services to discuss disability-related needs
- ◆ Have been approved as an individual who is covered under the Americans with Disabilities Act, Amendments Act (ADAAA) of 2008.
- ◆ Are eligible to receive reasonable accommodations at Rutgers University.

The letter contains course accommodations approved by the Office of Disability Services based on the functional limitations caused by the disability/disabilities. The Letter of Accommodations is just the first step in implementing Accommodations; students may still need to complete other request forms (such as a notetaking or alternate text format request form) in order to receive your accommodations.

How do students request Letters of Accommodations?

Students who have been approved to receive a letter of accommodations must submit a [Letter of Accommodations Request Form](#). Every RBHS nonmedical/nondental student seeking course accommodations is required to fill out the letter of accommodations request form every semester they require accommodations. Medical and Dental students are required to fill out the letter of accommodations request form once every academic year.

How are Letters of Accommodations provided to professors?

After students request their request for letters of accommodations, ODS staff personnel will review the request. If the request is accurate, the request will be approved and the letters of accommodations will be automatically sent to the student and their professors (for non-medical/dental school students).

Continued on page 3

“Everything Above the Neck”: A Look into Speech Language Pathology

“If you’re interested in education, if you’re interested in medicine, if you’re interested in performance, we have something for everybody.”

For many, Speech Language Pathology (SLP) is likely a bit of a mystery. Prior to my conversation with Professor Kelly Peña of the SLP program here at Rutgers, my knowledge of Speech Language Pathology was limited to speech impediments and early childhood intervention, which are just two small components of an expansive profession.

“We specialize in everything above the neck,” Professor Peña, “when we frequently think of SLPs, we think of children who can’t say sounds correctly or stuttering, and our work does include that, but it’s just a small percentage of what we do.”

Speech Language Pathologists work with patients with general language disorders, speech delays, autistic individuals, swallowing disorders, survivors of neck cancer, transgender and gender non-conforming individuals, anyone in a profession that is talking heavy who may develop voice fatigue, and even work with clients on cognition and developing more executive functioning and study strategies.

The field of Speech Language Pathology is relatively new, having been established in the 1970s, and the initial focus was solely on speech correction. Nurses and Occupational Therapists previously worked with patients with swallowing disorders or recovering from Traumatic Brain Injuries prior to the establishment of today’s SLPs.

As the profession evolved, so did the connection to social justice. “The idea that communication is a human right, and the Communication Bill of Rights was created by speech language pathologists,” Peña explained. Beyond advocating for communication rights, there has also been a focus on recruiting more diverse speech language pathologists that better represents the U.S. population and clients they work with. Still a predominantly White profession, Professor Peña shared the importance of not only recruiting diverse SLP students, but focusing on the retention of students, and how that benefits future clients.

“It’s not just about recruitment, but retention...we are a communication field, and over 50% of our country does not speak English as a primary language, so the idea of bilingualism and multilingualism and infusing that into our practices, recruiting clinicians who speak other languages other than English....research wise, it shows that [multilingual or bilingual clients] typically receive less services, less follow-up, less ethical, and less efficacious medical care because of their lack of English,” said Peña.

Continued on page 2



What is Ableist Language and How can we address it ? [Suzanne Wertheim, Ph.D.](#)

What is **ableist language**? This is a concept that seems less widely understood than other expressions of bias, like racist language or sexist language.

But it's really quite simple: **Ableist language presents disabled people as inherently problematic, incompetent, or simply having less value.** It often dehumanizes or marginalizes disabled people.

The scenarios invoked by ableist language cast disabled people in an inappropriately negative light. This shows up in phrases like "fell on deaf ears" and "blind spot."

These phrases don't actually describe people who have a disability — here, limited hearing or limited vision. "Fell on deaf ears" doesn't invoke a scenario where someone is deaf and because of it, something important goes unheard. "Blind spot" doesn't invoke a scenario where someone has a visual impairment and so doesn't see something.

Instead, these phrases invoke scenarios of people who are behaving in ways that feel inappropriate or wrong. For example, not listening to somebody when they should be. Or, because they are habitually inattentive when it comes to a particular person or topic, overlooking something important.

**Your words
have power.**

Use them wisely.

People have a choice when it comes to their behavior. But not when it comes to their disabilities.

They can't help being blind or deaf. Or having mental illnesses that might cause people to call them "insane."

So it's inaccurate, and harmful, to link problematic behavior with disabilities. Even if it feels like those disabilities are related to the problematic behavior, if you dig a bit deeper, you can see that they are usually two separate things.

That's why I don't use *blind spot* any more in my work, even though it used to feel like a useful phrase when talking about subtle culture clashes. Now I talk about *having blinders on*. Because blinders are placed on you by someone else and, with some work, can be removed.

And I don't use the phrase *fell on deaf ears* anymore. Because it's not about being able or unable to hear. It's about choosing to not listen, or to not offer any uptake. Now I use phrases like *met with resistance* or *went unheard*.

The same is true for *sane* and *insane*. These words are very often used to describe behavior and choices that aren't about mental illness at all. Instead, they frequently describe people who are being clear or unclear, predictable or unpredictable, compassionate or unempathetic, controlling or not controlling anger, and more.

Linking these behavioral choices to mental health is ableist.

Continued on page 3

988 Suicide & Crisis Lifeline

Need Support Now?

- ◆ If you are having thoughts of suicide
- ◆ If you need mental health-related crisis support
- ◆ If you are worried about someone else

Please call or text 988 or visit the National Suicide Prevention Lifeline chat to connect with a trained crisis counselor

Speech Language Pathology Continued...

Professor Peña discussed the importance of cultural responsiveness, as opposed to cultural competency. Examples of cultural responsiveness include discussing what foods clients eat when reviewing swallowing techniques, avoiding gendered language, not making assumptions about familial relationships of clients and their guardians, and being mindful of regional or cultural dialects clients may have. The framework of cultural responsiveness also leads to more supportive and comprehensive care for clients from underrepresented or minoritized backgrounds.

The SLP program at Rutgers has opened a free non-profit clinic located in the Bergen Building that provides services to clients at all stages in life. The goal of the clinic is to provide New Jersey citizens and the Rutgers community high quality evidence-based services to clients, and the opportunity for Rutgers SLP students to gain more clinical experience. The clinic also serves any Rutgers student interested in working on their executive functioning skills. According to the [Center on the Developing Child at Harvard University](#), executive functioning skills are the mental processes that enable individuals to plan, focus attention, remember instructions, and juggle multiple tasks successfully.

Students, faculty, or staff interested in learning more about the clinic **or free assistance with executive functioning skills** (mental processes that enable individuals to plan, focus attention, remember instructions, and juggle multiple tasks successfully), contact The Speech Language Pathology Clinic at:

RU-SLP-Clinic@shp.rutgers.edu or call

973-972-1008, or visit

<https://shp.rutgers.edu/rehabilitation-movement-sciences/ru-slp-clinic/>.



continued from page 1

Medical/Dental school students: upon approval of their letter of accommodations question, letters are automatically sent to the student and their student affairs (medical students) or academic affairs (dental students) offices for distribution to applicable personal.

Students and professors/school personnel should have a clear understanding of what is agreed upon regarding the use and implementation of these accommodations. This may require a discussion. ODS is available to facilitate such discussions upon request.

Students are encouraged to submit their letters of accommodations requests as early in the semester as possible. However, it should be understood that under some circumstances (e.g., student was approved for accommodations later in the semester, student was recently diagnosed) students may request their letters later in the semester. Anyone with questions regarding the accommodations process are to contact [ODS](#).

Making Sure Space is

Accessible for Everyone

A Bowling Green, Ohio woman just returned home from a so-called Mars colony in Arizona. She had one mission: making sure space is accessible for everyone.

“Like what if you’re on Mars and you lose your vision, it’s not like we can swap you out and send you home,” said Sheri Wells-Jensen, who teaches linguistics at Bowling Green State University for the past 23 years.

Wells-Jensen, who is fully blind, spent six days with four crew members in a hermetically sealed habitat located at the University of Arizona Biosphere 2, learning about what it would be like living on Mars or the Moon.

“But this opens the door for disabled kids, who are studying STEM fields, who feel like they want to be scientists or who want to be astronauts. We no longer have to say to them, when we get this work done, we won’t have to say to them, no, I mean you can read about science but you’re never, you can read about space but you can never go there,” said Wells-Jensen.

Wells-Jensen says her blindness, that she has had since birth, didn’t prevent her from becoming an astronaut. Instead, she argues it was the people and culture that surrounded her growing up.

“My original intention was to be a physicist and an astronomer or something like that, right, that was my plan going into junior high and high school, that was my plan, but it was just really clear that that was not going to happen, it was not culturally acceptable, it was not ok with my teachers, they didn’t think was practical and so I was gently carefully steered away from those things,” said Wells-Jensen.

When it comes to outer space, and being in outer space, she still wants to level the playing field.

Continued on page 3

Continued from page 2 Ableist Language

It’s ok to suggest to people that they should be clear, predictable, compassionate, and control their anger. Especially if they manage other people.

But it’s not ok to suggest that having these skills means someone is sane. Or that not having these skills means someone has mental health issues.

The inclusive option is to go more granular and focus on the behavioral specifics; what people have control over.

Instead of saying someone should be “sane” or an “island of sanity,” I recommend finding another metaphor and another description. What are the granular behaviors that delineate a “sane” person in the circumstances she’s talking about? Then, what are other adjectives that can be used to describe those behaviors? That’s the process I recommend we go through to brainstorm and come up with alternatives.

What we find is that looking for granular alternatives to problematic words usually results in clearer, more precise, and more powerful language.

What’s more, with alternative phrasings, our work will be more inclusive of people with mental health issues who want to benefit from her insights. And it will protect her from being called out as ableist.

Ableist language permeates our everyday speech and writing. The more we can identify and replace it, the more precise and more accessible our language will be.

Mind Your Words:

Finding Alternatives to Replace Ableist Language

It helps to have alternative phrases to pull from. Here are some examples of ableist language and alternative words or phrases you can use instead:

“Crazy” — Instead of using this word, “wild,” “outrageous,” or “unbelievable.”

“Insane” — Use words like “unreasonable” or “absurd” instead.

“Tone deaf” — Try another a word like “insensitive” or “out of context.”

“Lame” — Instead of using this word to describe something as bad or uncool, use words like “unimpressive” or “unappealing.”

“Blind to” — Instead of using this phrase to describe someone who is not aware of something, use words like “unaware” or “ignorant.”

“Deaf to” — Instead of using this phrase to describe someone who is not listening to something, use words like “unresponsive” or “unyielding.”

“Mute” — Instead of using this word to describe someone who can’t speak, use the phrase “nonverbal.”

“Wheelchair-bound” — Instead of using this phrase to describe someone who uses a wheelchair, use the phrase “uses a wheelchair.”

“Suffering from” — Instead of using this phrase to describe someone with a disability or illness, use the phrase “living with” or “has.”

For a comprehensive list of ableist language and alternative words, check out this blog created by disability justice advocate [Lydia Brown](#), titled [Ableism/Language](#).



Continued from page 2 Making Space Accessible

“We can’t tell kids dream hard and you’ll go to space, because like I said, hundreds of thousands of people yearning for space six hundred have gone, so odds are low, but odds are there now, what I want to do is give this kid, give this disabled kid the same grab at it that everybody else has,” Wells-Jensen said.

Wells-Jensen knows her shot at being an astronaut has passed, but her message is simple: everyone has the right to try.

“But what I want to be able to say to that kid is yeah, you can be in there, you can be in there fighting to do it. There is nobody systemically excluding them based on how their bodies are made,” she said.

Space Analog for the Moon and Mars (SAM) integrates the Biosphere 2 prototype Test Module greenhouse (TM) with adjacent crew quarters and workshop, kitchen, common area, and private sleeping accommodations. The TM provides hydroponic and soil-based grow environments, controlled lighting, humidity, heating, and cooling. A mechanical CO2 scrubber and bioregenerative life support system work in concert to provide clean air.

An airlock leads to an adjacent half acre indoor/outdoor Mars yard. Pressure suits, rovers, and drones can be tested over varied terrain and obstacles. A massive synthetic lava tube with skylight will support otherworld cave exploration and a gravity off-set rig to provide the experience of exploring on foot in lower gravitational fields.



RBHS Students for Disability Education and Advocacy

According to the CDC, one in four people in the United States are disabled. RBHS students might work, take classes, and socialize with disabled individuals, or are disabled themselves. ODS is working toward creating a student organization focused on issues that impact disabled people. The organization will focus on promoting disability education, advocacy, and awareness on campus and beyond. This will be the first RBHS student organization that is not school or program specific. **If you are an RBHS student and you have an interest in issues that impact disabled people, please contact Jenna Rose at jer298@rbhs.rutgers.edu.**

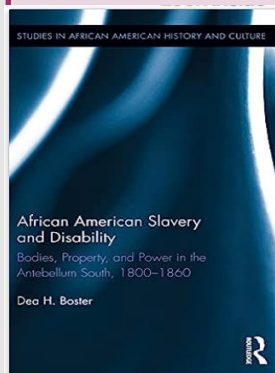
What is Juneteenth?

Juneteenth is a holiday celebrated on June 19 to commemorate the emancipation of enslaved people in the US. The holiday was first celebrated in Texas, where on that date in 1865, in the aftermath of the Civil War, enslaved people were declared free under the terms of the 1862 Emancipation Proclamation.

“As I reflect on Juneteenth, I think about what happened to the disabled slaves? I have often wondered about slaves with disabilities in general. How they managed on the plantation. Since the existence of a slave is the ability to work and be abled bodied how does that actually look for a person who has limited abilities and functioning? As I have been and continue to do research, I have struggled to find a lot on the topic. I read the books on Blind Tom and wrote about it in a previous post. He was a famous musician that was never emancipated. But when he was born his master wanted to get rid of him. It was his mother who begged for his life. Later he discovered the piano and the rest is history. The intersectionality of slavery, labor and disability is something I find very interesting.” –Empish J. Thoms, a Freelance Writer, Disability Blogger, and Accessibility Consultant

Where do Slavery and Disability Intersect?

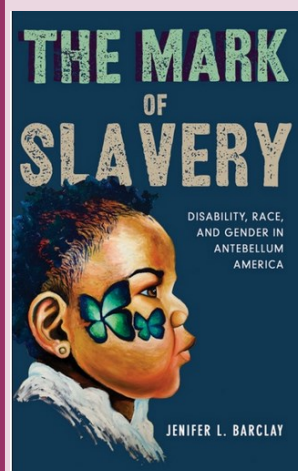
African American Slavery and Disability



Disability is often mentioned in discussions of slave health, mistreatment and abuse, but constructs of how "able" and "disabled" bodies influenced the institution of slavery has gone largely overlooked. This volume uncovers a history of disability in African American slavery from the primary record, analyzing how concepts of race, disability, and power converged in the United States in the first half of the nineteenth century.

Slaves with physical and mental impairments often faced unique limitations and conditions in their diagnosis, treatment, and evaluation as property. Slaves with disabilities proved a significant challenge to white authority figures, torn between the desire to categorize them as different or defective and the practical need to incorporate their "disorderly" bodies into daily life. Being physically "unfit" could sometimes allow slaves to escape the limitations of bondage and oppression, and establish a measure of self-control. Furthermore, ideas about and reactions to disability—appearing as social construction, legal definition, medical phenomenon, metaphor, or masquerade—highlighted deep struggles over bodies in bondage in antebellum America.

The Mark of Slavery



“The esteemed Frederick Douglass shares stories of disability in his widely read autobiographical writings, but no one had really read his work with an eye toward disability,” says Barclay. “He even shares personal stories about his grandmother who experienced disabilities as she grew older. He was furious at the way she was ‘turned out to die,’ as he put it, by a slaveholder who no longer saw her as valuable enough to care for despite the wealth she had brought the family through her lifetime of forced labor and the children she had borne.”



Cindy Poore-Pariseau, ODS Director



Jenna Rose, ODS Coordinator

