Transcription Jennifer Tomes

Introduction: A video in which Jennifer Tomes, a professor at Mount Allison University, talks about her experiences in accommodating students with traumatic brain injury.

How did you accommodate a student with a disability in your class?

I've actually had several students in my class who I've had to accommodate in different ways. Many of the students have a concussion, so a mild traumatic brain injury, and the accommodation for these students is usually fairly short-term. The best accommodation you can give is just to give them time to heal, so that their symptoms resolve and they no longer are experiencing the symptoms that are causing them problems. There's a whole range of symptoms that you can get with a concussion. We typically think of students who will have headaches and perhaps vision problems but the number one issue for students with concussion is memory problems and other cognitive problems. So if you ask them to continue working on assignments and class material, it's very, very difficult for them and can actually exacerbate their concussion symptoms. The best accommodation I've found has been to just give the students the time they need to heal. So, I will postpone tests or assignments, encourage them not to work on class material until their symptoms resolve and then to work with them once their back in the classroom to get them up to pace, go over material that they've missed, create a schedule that allows them catch up on the material they've missed, because often it's not just my class they've missed, it's other classes as well. So they may need a slightly adjusted schedule to catch up on those sorts of assignments. I've also had a student who had multiple concussions and had developed post-concussive syndrome. He continued to experience problems long after the concussion should have resolved, and he and I talked about a number of strategies that he could adopt in my classes and in others. So he had to worry about his schedule. He had difficulty sleeping, so he didn't do well in morning classes because he wasn't very alert, so he had to make some adjustments like that. There were some other ones that sat at the front of the class so that he could attend and really focus his attention because, again, he had longterm attention issues as a result of his brain injury. I also had to be careful in terms of how I presented material. In one demonstration in my classroom, I was presenting a list of words and I very rapidly changed slides, and that rapid succession of images going across the screen actually caused him to get dizzy and nauseous. He mentioned that he had experienced something very similar in an Art History class where the changing images just triggered some of his symptoms. So I try and work with students to see what problems they're having and make adjustments to my course and how they're progressing through it on a case-by-case basis—what do they need, and work with each student. But by and large the most common accommodation I give is simply deferring and postponing tests and assignments so that the student has time to heal and their symptoms resolve.

How was the experience from your perspective?

So my experience has been quite positive. I feel sorry for the students, that they have an injury, that they're suffering, that they may be in pain. But I also like to be able to give back. I do research in the

area of concussion and I also like to be able to apply that knowledge, so I really feel that I've helped students, so for me it's been a really positive experience to apply my knowledge and give the students the accommodations that they need, give them access to information about concussions. I'm always surprised at how little people know about concussions and mild traumatic brain injuries. There's a lot of misconceptions out there, so I can provide information for students and they can know the symptoms they're experiencing are normal, so it's reassuring for them to know that the headaches will go away in all likelihood shortly and that the emotional problems that they may be experiencing are a common pattern associated with concussions. So, I've found it very rewarding to work with students in this context.

What would you say to a colleague who will have a student with a disability in his or her class?

The first thing I would say is that people need to recognize that these are real injuries. There seems to be this attitude that because the student isn't bleeding from their ears, that they're not really injured but a concussion is a mild traumatic brain injury, it is an injury to the brain and students need to be taken seriously. As a result of their injuries, they develop temporary disabilities. So, there are problems with memory and with cognition; there can be emotional problems as well—there's a whole myriad of symptoms that come with a concussion and they definitely produce temporary disabilities and students need to be accommodated because of that, because of their medical problem, they may need special accommodation. So I really want to encourage professors to take this seriously. These students do need assistance and do need to be accommodated for a real and valid reason. Education is important, and I think education is important for both students who may be experiencing a concussion and faculty members who may be dealing with students with a concussion. I think people have to realize that it is a valid condition, and it does create a temporary disability, that people have an obligation to work with the students to accommodate them. That the accommodations that they need to do will vary from case to case depending on what the student is experiencing; how long they are experiencing their temporary disability and that professors should work with students to accommodate them as need be.