MOBILITY IMPAIRMENTS

Mobility impairments range in severity from limitations on stamina to paralysis. Some mobility impairments are caused by conditions present at birth while others are the result of illness or physical injury. Injuries cause different types of mobility impairments, depending on what area of the spine is affected.

QUADRIPLEGIA is paralysis of the extremities and trunk caused by a neck injury. Students with quadriplegia have limited or no use of their arms and hands and often use electric wheelchairs.

PARAPLEGIA is paralysis of the lower extremities and the lower trunk caused by an injury to the mid-back. Students often use a manual wheelchair and have full movement of arms and hands. Below are brief descriptions of other causes of mobility impairments.

AMPUTATION is the removal of one or more limbs, sometimes caused by trauma or another condition.

ARTHRITIS is the inflammation of the body’s joints, causing pain, swelling and difficulty in body movement.

BACK DISORDERS can limit a student’s ability to sit, stand, walk, bend or carry objects. They include, but are not limited to, degenerative disk disease, scoliosis and herniated disks.

CEREBRAL PALSY is the result of damage to the brain prior to or shortly after birth. It can prevent or inhibit walking and cause a lack of muscle coordination, spasms and speech difficulty.

NEUROMUSCULAR DISORDERS include a variety of disorders, such as muscular dystrophy, multiple sclerosis and ataxia that result in degeneration and atrophy of muscle or nerve tissues.

Some considerations:

- Many students with mobility impairments lead lives similar to those without impairments. Dependency and helplessness are not characteristics of physical disability.
- A physical disability is often separate from matters of cognition and general health; it does not imply that a student has other health problems or difficulty with intellectual functioning.
- People adjust to disabilities in a myriad of ways; students should not be assumed to be brave and courageous on the basis of disability.
- When talking with a wheelchair user, attempt to converse at eye level as opposed to standing and looking down. If a student has a communication impairment as well as a mobility impairment, take time to understand the person. Repeat what is understood and when something is not understood, say so.
- A student with a physical disability may or may not want assistance in a particular situation. Ask before giving assistance and wait for a response. Listen to any instructions the student may give; by virtue of experience, the student likely knows the safest and most efficient way to accomplish the task at hand.
- Be considerate of the extra time it might take a disabled student to speak or act. Allow the student to set the pace walking or talking.
- A wheelchair should be viewed as a personal-assistance device rather than something one is “confined to.” It is also part of a student’s personal space; do not lean on or touch the chair and do not push the chair, unless asked.
- Mobility impairments vary over a wide range, from temporary (e.g., a broken arm) to permanent (e.g., a form of paralysis). Other conditions, such as respiratory conditions, affect coordination and endurance; these can also affect a student’s ability to perform in class.
- Physical access to a class is the first barrier a student with a mobility impairment may face and this is not only related to the specific accessibility of the building or classroom. A construction area, lack of reliable transportation or mechanical problems with a wheelchair can easily cause a student to be late.
- A student with a physical disability may use an electronic device to communicate and therefore, may take longer to speak.
- It may take a student with a physical disability longer to travel between classes.
Students who must tend to their physical needs or require attendant care before and/or after classes, may need to adjust their class schedules accordingly.

Common accommodations for students with mobility impairments include priority registration, note-takers, accessible classroom/location/furniture, alternative ways of completing assignments, lab or library assistants, assistive computer technology, exam modifications and conveniently located parking.

Instructional Strategies
The following strategies are suggested to enhance the accessibility of course instruction, materials and activities. They are general strategies designed to support individualized reasonable accommodations.

- Include a Disability Access Statement on the syllabus.
- If necessary, arrange for a room change before the term begins.
- If possible, try not to seat wheelchair users in the back row. Move a desk or rearrange seating at a table so the student is part of regular classroom seating.
- Make arrangements early for field trips and ensure that accommodations will be in place on the given day (e.g., transportation, site accessibility).
- Make sure accommodations are in place for in-class written work (e.g., allowing the student to use a scribe, to use assistive computer technology or to complete the assignment outside of class).
- Be flexible with deadlines: assignments that require library work or access to sites off-campus will consume more time for a student with a mobility impairment.
- When in doubt about how to assist the student, ask him or her.
- Allow the student the same anonymity as other students (i.e., avoid pointing out the student or the alternative arrangements to the rest of the class).

Documentation for this disability, as with all disabilities, is required before services can be provided.