

Statement of Laysha Ostrow, MPP

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“Promoting College Access and Success for Students with Disabilities”

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My name is Laysha Ostrow. I am a PhD candidate at the Johns Hopkins School of Public Health and the Co-Executive Director of the Lived Experience Research Network. I was hospitalized in a psychiatric unit for the first time when I was 14 years old, and labeled with bipolar disorder. In high school I was in a residential treatment facility for girls with emotional and behavioral problems for two and a half years. As an undergraduate I was able to secure accommodations primarily because of neuropsychiatric test results obtained as a secondary school student. This kind of testing is often unavailable to college students who first experience problems after high school. During my junior year of college I took a medical leave for depression. When I tried to return to school, I was discouraged from pursuing higher education by university clinicians, leading me to drop out. Subsequently I was declared permanently disabled and was on SSDI. I finished my Bachelor's degree when I was 26. Because of these experiences and experiences of colleagues, I co-founded the only national support group for graduate and doctoral students with psychiatric disabilities in 2011. Through participation in the group I became aware of even more widespread and often devastating discrimination and lack of support at both the undergraduate and graduate levels. My organization's Discrimination in Higher Education research and advocacy project has further documented the degree of discrimination and marginalization that students all too often face, as has the recent Newsweek headline story *How Colleges Flunk Mental Health*. Research confirms these reports: in a national postsecondary survey, for example, over 50% of students reported discrimination or stigma in the process of requesting accommodations. Researchers working in higher education have noted that few universities have the expertise or experience to support students with psychiatric disabilities, even though this group is one of the largest disability groups in higher education.

Based on my experiences and advocacy work with other students I recommend three major areas in need of attention: (1) policies that facilitate grassroots organizing by students for independent mutual support and self- and systems-advocacy; (2) institutional policy change, including education about accommodations tailored to students with psychiatric disabilities; (3) ensuring confidentiality and privacy in campus counseling settings, oversight of involuntary leave policies to prevent schools from dismissing students, and critical investigations of the consequences of stigmatizing policies to increase student surveillance.

The role of institutions of higher education is to facilitate intellectual growth of students--not punish them for their struggles. Education policy should not be focused on us as sick members of society needing treatment, but individuals with disabilities with a right to education and employment.