

June 2026

RARC Workshop Recap

Beth Pollock, Ph.D., C.Psych.
Regional Assessment Resource Centre



Regional Assessment Resource Centre:

Lunch and Learn Series

Summer 2026



Free to join. No registration required.

**From Policy to Practice: Key Takeaways from
Sari Springer and the RARC Workshop**

Thursday, June 18th | 12pm to 1pm

**Student Transitions: Trends, The New TRG &
Access to Assessments**

Thursday, July 23rd | 12pm to 1pm

Tricky Accommodations Issues

Thursday, August 20th | 12pm to 1pm

Regional Assessment Resource Centre

RARC is a Centre of Excellence housing clinical psychologists, educators, transition specialists and researchers.

Services provided under 4 pillars:



Transition



Research



Training



Assessment

Overview:

Key Takeaways from:

- **Section 1:** Talk by Sari Springer and moderated panel with Sari Springer, Allyson Harrison, and Jeanette Parsons
- **Section 2:** Navigating Difficult Accommodation Decisions with Beth Pollock
- **Section 3:** RARC Updates (with the exception of Transitions-stay tuned for July 23rd!)



Section 1:

Talk by Sari Springer and moderated panel with Sari Springer, Allyson Harrison, and Jeanette Parsons



Sari Springer



Allyson Harrison



Jeanette Parsons

Decisions Discussed

- Longueepee v University of Waterloo 2020 onca 830
- Hejazi v Saint Paul University and University of Ottawa 2020 HRTO 46
- LB v University of Alberta and Dr. Clive 2021 AHRC 156
- MH v Trinity Western University 2025 HRTO 2089
- Cristiano v Professional Development Legal Education Society 2025 HRTO 2647
- Ilic v Canadore College and Dr. Vivian Papaiz 2025 ONSC 4611
- Lessard v University Appeals Board, University of Saskatchewan, College of Medicine 2024 SKCA 109
- Selkirk College 2025 BCHRT 178
- University of Bristol v. Abrahart

Section 1: Key Content

The Human Rights Code remains the foundation of accommodation practice

- Regardless of changes in technology, teaching methods, or student needs, the legal framework governing accommodation remains unchanged.
- Accessibility advisors should continue to ground their work in:
 - The duty to accommodate
 - Individualized assessment
 - Meaningful participation in the accommodation process
 - The prevention of discrimination on the basis of disability

Section 1: Key Content

Accommodation does not require altering essential academic requirements

- One of the most important themes was the distinction between **accommodating disability-related barriers** and **waiving essential academic requirements**.
- Institutions are not required to:
 - Remove core competencies
 - Eliminate essential learning outcomes
 - Guarantee academic success
 - Fundamentally alter a program
- For accessibility advisors, this reinforces the importance of understanding and articulating what constitutes an essential requirement within a course or program before recommending accommodations.

Section 1: Key Content

Accommodation decisions must be individualized and evidence-based

- The discussion highlighted that accommodation decisions cannot be based on assumptions or blanket approaches.
- When evaluating requests, advisors should consider:
 - The student's functional limitations
 - The specific academic context
 - Available accommodation options
 - Whether requested accommodations impact essential requirements
- The goal is not to provide every accommodation requested, but to determine what accommodations are reasonable and appropriate in the circumstances.

Section 1: Key Content

The duty to inquire remains an important professional responsibility

- Accessibility professionals should be aware that institutions may have a positive duty to inquire when there are indications that disability-related barriers may be affecting a student.
- However, the duty is not unlimited.
- The discussion highlighted that:
 - Advisors cannot force disclosure.
 - Not every academic difficulty signals disability. Context matters.
 - Students retain responsibility for participating in the accommodation process.
- The challenge is knowing when concerns rise to the level that further inquiry is appropriate.

Section 1: Key Content

Documentation and process are critical

- A recurring lesson from the case law was that tribunals pay close attention to process.
- Accessibility advisors should ensure:
 - Accommodation discussions are documented.
 - Rationales for decisions are recorded.
 - Communication with students is clear.
 - Alternative options are explored where appropriate.
 - Decision-making demonstrates individualized consideration.
- Well-documented processes often become the strongest institutional defence when accommodation decisions are challenged.

Section 1: Key Content

Undue hardship is a high legal threshold

- Institutions cannot deny accommodation simply because it is difficult, inconvenient, or unpopular.
- To establish undue hardship, institutions must rely on evidence relating to factors such as:
 - Significant costs
 - Health and safety risks
 - Availability of outside funding
- For accessibility advisors, this means that most accommodation discussions should begin with exploring possibilities rather than searching for reasons to deny requests.

Section 1: Key Content

Professional programs create unique accommodation challenges

- Many of the examples discussed involved programs such as Nursing, Medicine, Respiratory therapy, and other clinical or placement-based programs
- In these environments, advisors must balance:
 - Disability accommodation rights
 - Public safety
 - Professional standards
 - Competency requirements
- Accommodations may need to be modified or limited when essential professional competencies or safety requirements are involved.

Section 1: Key Content

Retroactive accommodation continues to be an evolving area

- The Waterloo case highlighted the growing importance of retroactive accommodation.
- The case raised questions about students who:
 - Were not diagnosed at the time of academic difficulty
 - Later discover a disability affected their performance
 - Seek consideration of past academic outcomes
- For accessibility advisors, the key lesson is that disability-related impacts may not always be identified at the time they occur, and institutions increasingly need processes for evaluating retrospective accommodation requests.

Section 1: Key Content

Not every student concern is an accommodation issue

- Several discussions during the presentation illustrated the importance of distinguishing between:
 - Disability accommodation
 - AND
 - Compassionate consideration, academic discretion, and/or personal hardship
- Accessibility advisors frequently encounter situations where students are experiencing significant challenges that do not necessarily meet the threshold for disability accommodation.
- Determining which process is most appropriate remains an important part of the advisor's role.

Section 1: Key Content

Extensions and prolonged academic timelines remain complex issues

- The discussion around graduate studies and repeated extensions highlighted a tension many advisors encounter:
- Students may require additional time because of disability-related impacts, while institutions must maintain:
 - Academic standards
 - Program progression requirements
 - Resource sustainability
- There is still limited legal clarity regarding where accommodation obligations end and when ongoing extensions may no longer be reasonable.

Section 1: Final Wrap-Up

- The strongest message for accessibility professionals was that accommodation work is becoming **increasingly complex**, but the core principles remain the same:
 - Focus on:
 - individual circumstances,
 - understand essential academic requirements,
 - engage in meaningful accommodation processes,
 - document decisions carefully, and
 - ensure that disability-related barriers are addressed without compromising legitimate academic or professional standards.

Section 1: Final Wrap-Up

- The case law reviewed throughout the session reinforces that successful accommodation practice is rarely about finding the "right" answer immediately—it is about demonstrating a thoughtful, evidence-based, and procedurally fair decision-making process.
- The legal question is not always:

"Was accommodation provided?"

but often:

"Was the student treated fairly and consistently in light of disability-related needs?"

Section 2:

Navigating Difficult Accommodation Decisions with Beth Pollock



Beth Pollock

Why Unnecessary Accommodation Requests Occur

- Potential drivers:
 - Fear of failure
 - Previous K–12 accommodation models
 - Pandemic flexibility normalization
 - Social media narratives
 - Clinical recommendations without academic context
 - Misunderstanding of “rights”
 - Society demands (burnout)



Why Unnecessary Accommodation Requests Occur

- **Poor understanding of distinction: Helpful ≠ Required**
- Examples:
 - Preferential scheduling may be helpful
 - Reduced course load may be helpful
 - Unlimited deadline flexibility may be helpful

But the institutional question is:

- **Is the accommodation necessary to provide equitable access without fundamentally altering academic requirements?**

Mediation Framing Principles

- **Subjective Reality:** Parties enter with their own "frames" (lenses) that define the problem, the issues in dispute, and what is necessary for resolution.
- **Types of frames** include:
 - **Identity frames:** How they see themselves in the conflict.
 - **Characterization frames:** How they view the other party.
 - **Power frames:** Disputants' concepts of power and control.
 - **Loss vs. Gain frames:** A tendency to focus on potential losses (risky) rather than potential gains.
- Analyzing the frames people use in a given conflict provides fresh insight and better understanding of the conflict dynamics. With such insight, and with the help of reframing, stakeholders may find new ways to reach agreements.



Principles of Effective Reframing

- **Example:**
- **Broaden the Focus:** Move from narrow, rigid positions to broader interests.
 - **Request:**
“I need memory aids.”
 - **Reframe:**
“It sounds like your main concern is your ability to demonstrate your knowledge effectively on tests and exams. Does that sound right? Let’s discuss the challenges you experience so I can better understand what supports might address the barriers.”

Collaborative Reframe

Collaborative reframes focus on a joint, participatory approach to change how a problem is defined.

- **Joint Ownership:** Both parties participate in defining a new, shared context for the discussion.
- **Shifting from Adversarial to Cooperative:** It turns "me vs. you" into "us vs. the problem".
- **Identifying Shared Interests:** Rather than focusing on positions (what they want), it focuses on interests (why they want it) to create a new, shared understanding.
- **Focus on Pattern, Not Person:** It moves away from blaming individuals to understanding the pattern.

These statements are especially useful when conversations become polarized.



Collaborative Reframe

Instead of:	Reframe:
Advisor: “That accommodation is unreasonable.”	“Let’s explore the barrier you’re experiencing and identify supports that address it while preserving the essential course requirements.”
Student: “I need unlimited extensions.”	“It looks like we might need to explore options for flexibility during periods when symptoms become more severe.”
	“We need to consider what happens when symptoms interfere with deadlines.”
	“Predictability and reduced penalty risk seem important here.”

Collaborative Reframe

Instead of:	Reframe:
Student: "My doctor said I should get this."	"The provider's perspective is important information, and we also need to assess accommodations within the educational context."
Advisor: "We can't do that."	"Let's explore what options may address the barrier effectively."
	"We may need to identify an alternative approach that is workable within the course requirements."
	"Let's focus on the underlying access issue and possible supports."

The goal is not to **eliminate** tension from accommodation work.

The goal is to **navigate** tension fairly, transparently, and collaboratively.



Section 3:

RARC Updates (with the exception of Transitions-stay tuned for July 23rd!)



RARC Updates

Assessments



Transitions



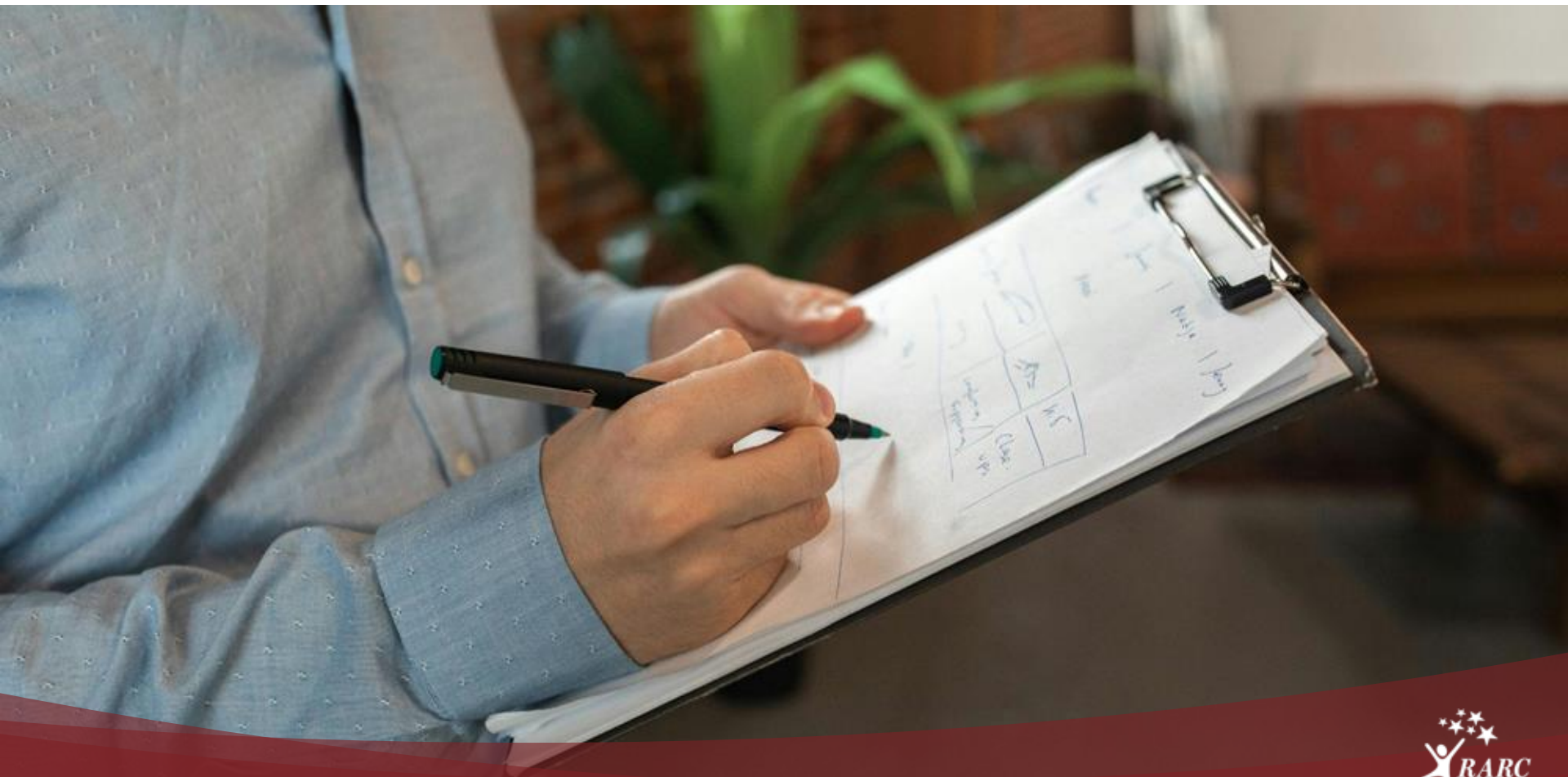
Research



Training



Assessments



Barriers to Referrals

Referrals have decreased over the last 10 years. The accessibility landscape has also changed - increased caseloads and evolving policies.

2 Solutions Currently Being Piloted:

- 1) Simultaneous process with Accessibility Services
- 1) OLTS \$1000 assessments



Summer Assessments - Testing Space

We are working to increase our summer assessments to help students get documentation completed before school starts in September.

If a student does not live near their post-secondary campus or a MAT provider, this becomes tricky. We're happy to send a practitioner to them - but it means we may not have office space nearby. We may ask to use your campus space to test non-students that live in your city, as they're not easily able to travel to their own campus during the summer.



Research



AD/HD symptoms in assessment seeking post-secondary students: Has the COVID-19 pandemic made a difference?

Emma Jamieson , Beth Pollock , Nathaniel Davin , and Allyson G. Harrison 

Regional Assessment and Resource Centre, Queen's University, Kingston, Canada

OBJECTIVE Anecdotally, individuals reporting symptoms of Attention Deficit/Hyperactivity Disorder (AD/HD) seem to have increased over the past few years, particularly since the onset of the Coronavirus disease 2019 (COVID-19) pandemic. As such, this study aimed to objectively investigate the validity of this observation.

METHOD Using archival data from 667 students assessed in a University-based clinic between 2018 and 2024, self-reported AD/HD symptoms on the Conners' Adult AD/HD Rating Scales–Self-Report: Long Version (CAARS–S:L) were compared across three time periods: pre-COVID ($n=407$), during COVID ($n=110$), and post-COVID ($n=150$).

RESULTS Results indicate a significant increase in reported symptoms of inattention/memory, impulsivity/emotional lability, DSM-IV inattentive and hyperactive-impulsive symptoms, total AD/HD symptoms, and AD/HD index after the pandemic. Notably, there was a significant increase in problems with self-concept during and after the pandemic, and there were no significant changes in symptoms of hyperactivity/restlessness across all time points. However, the actual rate of diagnosed AD/HD in the sample did not significantly change across these periods.

CONCLUSIONS The findings support anecdotal observations and suggest that the pandemic may have exacerbated AD/HD-like symptoms in an assessment-seeking post-secondary population, even among individuals without formal AD/HD diagnoses. Increases in reported AD/HD symptoms may be related to COVID-19 pandemic factors such as heightened stress, disrupted routines, and increased screen time. The results underscore the need for careful diagnostic practices and further research on the impact of environmental factors on AD/HD symptomatology in young adults.



AD/HD symptoms in assessment seeking post-secondary students: Has the COVID-19 pandemic made a difference?

- **Question:** Have self-reported AD/HD symptoms in assessment-seeking postsecondary students changed before, during, and after the COVID-19 pandemic?
- **Participants:** Archival data from 667 postsecondary students assessed between 2018–2024 at a university-based clinic.
- **Main findings:** Reported AD/HD-like symptoms significantly increased after COVID, especially inattention, impulsivity/emotional lability, and self-concept problems, while actual AD/HD diagnosis rates remained stable.
- **Implications:** Pandemic-related stressors may have increased AD/HD-like symptoms in young adults, emphasizing the need for careful AD/HD assessment and consideration of environmental influences.

Changes in validity test scores after COVID: Reflection of general distress or something else?

Allyson G. Harrison , Nathaniel Davin , and Emma Jamieson 

Regional Assessment and Resource Centre, Queen's University, Kingston, Canada

ABSTRACT

Objective: This study examined whether rates of symptom and performance validity test (SVT, PVT) failure among assessment-seeking postsecondary students changed during and after the COVID-19 pandemic relative to pre-pandemic levels, and whether such changes co-occurred with increased general psychological distress (GPD). **Method:** Archival data were analyzed from 1076 students assessed for possible attention-related disorders between 2018 and 2024 at a regional university-based assessment center. Participants completed multiple symptom and performance validity measures, a self-report measure of Attention-Deficit/Hyperactivity Disorder (ADHD), and a higher-order measure of general psychological distress. Students were grouped by assessment timing: pre-COVID (2018–March 1, 2020), during COVID (March 2, 2020–August 2022), or post-COVID (September 2022–September 2024). **Results:** Failure rates on most PVTs did not differ significantly across time periods, indicating overall stability in performance validity, with one dyslexia-related validity measure showing higher failure rates post-COVID. On a personality assessment, students assessed during and after COVID reported significantly higher Negative Impression Management scores, lower Positive Impression Management scores, and greater GPD. Rates of severe GPD increased from 23% pre-COVID to 38% during and after COVID. Failure on ADHD-specific SVTs also increased significantly post-COVID, indicating higher rates of non-credible ADHD symptom reporting despite stable performance validity. **Discussion:** Since the onset of COVID-19, postsecondary students have demonstrated heightened psychological distress alongside increased non-credible self-reporting, particularly for ADHD symptoms. These findings reflect parallel trends rather than a direct causal relationship and underscore the importance of incorporating both symptom and performance validity testing when interpreting self-reported symptoms in clinical and psychoeducational assessments.



Changes in validity test scores after COVID: Reflection of general distress or something else?

- **Question:** Did symptom validity (SVT) and performance validity (PVT) test failure rates change in postsecondary students before, during, and after COVID-19?
- **Participants:** Archival data from 1,076 postsecondary students assessed for possible neurodevelopmental disorders between 2018–2024.
- **Main findings:** Performance validity remained mostly stable across time, but ADHD-specific symptom validity failures and general psychological distress increased significantly during/post-COVID.
- **Implications:** Results show increased invalid self-reporting related to increased psychological distress rather than changes in performance validity. Highlights the need for both symptom and performance validity testing when interpreting ADHD self-report measures in postsecondary assessments.

Do Post-Secondary Students With ASD Process Information More Slowly Than Others? Implications for Accommodations of Extra Time

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Beth Pollock¹ , Nathaniel Davin¹, Dylan Kwan¹,
Kieran Bodner¹, and Allyson G. Harrison¹ 

Abstract

Given the frequency with which students with Autism Spectrum Disorder (ASD) receive extended time accommodations in post-secondary settings, this study examined whether students with ASD—alone or with comorbid conditions—perform below peers without neurodevelopmental diagnoses on speeded tasks. A total of 729 post-secondary students who completed psychoeducational assessments were divided into four groups: ASD only ($n=56$), ASD with Learning Disorder (LD; $n=58$), ASD with ADHD and/or mental health conditions (MH; $n=27$), and a No Diagnosis (No Dx) group ($n=588$). Participants completed a flexible battery of individually administered tests assessing intellectual ability, processing speed, speed of retrieval, efficiency of cognitive flexibility and academic fluency. Overall, students in the ASD groups did not perform significantly below the No Dx group on most speeded cognitive and academic tasks. Further, mean scores on measures of speeded cognitive and academic functioning generally fell in the Average range across study groups. As such, the results did not suggest a need for extended time accommodation based on a diagnosis of ASD alone. The results reinforce the need for performance-based data to understand the diverse cognitive and academic profiles among students with ASD to guide appropriate supports.



Do post-secondary students with ASD process information more slowly than others? Implications for accommodations of extra time

- **Question:** Do post-secondary students with ASD process information more slowly than peers without neurodevelopmental conditions?
- **Participants:** 729 postsecondary students, including ASD-only, ASD + Learning Disorder, ASD + ADHD/mental health, and No Diagnosis groups.
- **Main findings:** Students with ASD generally performed similarly to peers without diagnoses on most speeded cognitive and academic tasks, with average-range scores overall.
- **Implications:** ASD alone may not justify extended-time accommodations; performance-based assessment is important for determining appropriate supports.

Validation of the Test of Attention Distraction in identifying non-credible performance in diagnosis-seeking postsecondary students

Allyson G. Harrison  and Irene T. Armstrong

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ABSTRACT

Diagnosing Attention-Deficit/Hyperactivity Disorder (ADHD) in young adults is complicated by reliance on self-report, psychiatric comorbidity, and vulnerability to exaggerated or noncredible responding in assessment-seeking populations. The Test of Attentional Distraction (TOAD) is a computerized attention task developed to function as a domain-specific performance validity indicator. Archival data from 95 postsecondary students referred for comprehensive ADHD evaluation were examined using a multimethod battery that included clinical interview, collateral information, self-report ADHD measures, embedded ADHD-specific symptom validity indices, traditional performance validity tests (PVTs), continuous performance test (CPT) indices, and the TOAD. Thirty-one participants (32.6%) were classified as significant or high risk for suspect effort on the TOAD. TOAD failure was associated with substantially elevated ADHD symptom endorsement across nearly all Conners' Adult ADHD Rating Scales (CAARS) subscales and with ADHD-specific symptom validity indices, including Dissimulation and Infrequency scales. Associations with most traditional memory-based PVTs were limited. In contrast, TOAD indices demonstrated strong convergence with CPT-derived exaggeration indices and effectively discriminated individuals with extreme CPT profiles previously linked to noncredible ADHD presentation. Findings support the TOAD as a clinically useful, domain-specific performance validity indicator that provides incremental information beyond traditional PVTs in adult ADHD assessment.



Validation of the Test of Attention Distraction in identifying non-credible performance in diagnosis-seeking postsecondary students

- **Question:** Can the Test of Attentional Distraction (TOAD) identify non-credible/exaggerated performance in ADHD assessment-seeking postsecondary students.
- **Participants:** Archival data from 95 postsecondary students referred for comprehensive ADHD evaluations.
- **Main findings:** About $\frac{1}{3}$ of participants were identified as showing suspect or non-credible effort on the TOAD, which was strongly associated with exaggerated ADHD symptom reporting and CPT exaggeration indices.
- **Implications:** The TOAD may be a useful ADHD-specific performance validity tool that provides additional information beyond traditional memory-based performance validity tests (PVTs).



Emotional Distress or Executive Dysfunction? What Is the Behavior Rating Inventory of Executive Function–Adult Self-Report Scale Actually Assessing in an Assessment-Seeking Postsecondary Sample?

Allyson G. Harrison, Irene T. Armstrong, and Beth Pollock
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Using archival Behavior Rating Inventory of Executive Functioning–Adult (BRIEF-A), Personality Assessment Inventory (PAI), and executive functioning (EF) test data from 826 assessment-seeking postsecondary students, this study sought to assess the impact that response bias, symptom validity, and psychological factors have on self-reported executive dysfunction and the relationship between self-reported EF and objective performance. Study 1 examined whether the BRIEF-A adequately samples negative response bias (NRB) and what the effect was of undetected NRB on obtained BRIEF-A scores. Study 2 explored the relationship between PAI scales and the BRIEF-A Metacognitive Index. When controlling for NRB, Study 3 examined whether objective EF test scores or psychological complaints best predict self-reported EF problems on the BRIEF-A. Findings demonstrate that NRB, as measured by the PAI, resulted in significantly elevated scores on all of the BRIEF-A scales and indices compared with valid reporters. The BRIEF-A Metacognitive Index was most strongly correlated with and best predicted by an overall measure of general psychological distress on the PAI. When controlling for NRB, all BRIEF-A indices were unrelated to objective EF performance but significantly related to general psychological distress along with psychological symptoms reported on the PAI. Overall, in a postsecondary population, responses on the BRIEF-A appear most reflective of psychological symptoms and NRB, not performance on objective EF tests. Clinical implications are discussed.

Emotional distress or executive dysfunction? What is the BRIEF-A self-report scale actually assessing in an assessment-seeking postsecondary sample?

- **Question:** Do BRIEF-A self-reports reflect true executive dysfunction or are responses more influenced by emotional distress and response bias in assessment-seeking students?
- **Participants:** Archival data from 826 post-secondary students completing BRIEF-A, PAI, and objective executive functioning tests.
- **Main findings:** Higher BRIEF-A scores were strongly linked to negative response bias and general psychological distress, but not to objective executive functioning performance.
- **Implications:** BRIEF-A scores in postsecondary assessments may reflect emotional distress more than actual executive dysfunction, highlighting the importance of validity testing and multi-method assessment.

Diagnosing specific learning disorder in adults Part II: bias, base rates, and a path forward

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INTRODUCTION The diagnosis of specific learning disorders (SLDs) in adults has increased substantially over the past two decades, particularly within selective postsecondary and professional training settings. Part II of this paper examines why adult SLD diagnosis is especially vulnerable to error and bias, despite diagnostic criteria requiring substantial, developmentally grounded academic impairment.

METHODS We synthesize empirical research from neuropsychology, education, and psychometrics to identify systematic sources of diagnostic distortion in adult SLD assessment. Particular emphasis is placed on statistical artifacts (e.g. restriction of range), base-rate neglect, contextual performance effects, performance validity, reliance on self-report, and the misapplication of sociostructural frameworks to clinical decision-making.

RESULTS To combat overdiagnosis and ground diagnosis in empirically-supported practices, we propose a four-step diagnostic framework for first time diagnosis of SLD in adults: 1) Documented academic achievement below at least the 16th percentile relative to the general population norms; 2) Clear evidence of onset in early school years, including impairment when scaffolding and supports are removed; 3) Evidence that academic difficulties persisted despite adequate educational opportunity and, when available, targeted intervention; and 4) Exclusion of contextual, motivational, neurological/medical, language, or instructional explanations.

CONCLUSIONS Accurate diagnosis of SLD in adulthood requires population-referenced criteria, corroborated evidence of childhood onset, objective demonstration of current academic impairment, systematic exclusion of alternative explanations, and assessment of performance credibility. Adoption of a structured, evidence-based diagnostic framework is essential to preserving the scientific validity, ethical application, and equitable use of SLD diagnoses in adult educational and professional settings.



Disability and foreign language learning: Countering systemic ableism in secondary and postsecondary education

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Abstract

Ableist ideologies in schools and among clinicians have impeded equity for students with disabilities. By excluding individuals with diagnoses of learning disability (SLD) and attention deficit hyperactivity disorder (ADHD) from foreign language (FL) courses, professionals and schools discriminate against students who could benefit from participation. This essay reviews evidence falsifying the notion of an FL learning disability and contradicting the practice of FL substitutions for students with SLDs and ADHD. Evidence demonstrates that most students with SLDs and ADHD can pass FL classes. We maintain that clinicians who make these diagnoses and educators who recommend FL substitutions have no expertise in determining students' suitability for FL learning. Their automatic assumptions regarding exclusion from rather than inclusion in FL courses are a form of systemic ableism that ignores the intent of disability law and denies agency to these students. We explore how the myth of an FL "learning disability" emerged and why the myth persists despite evidence to the contrary.



Stability and accuracy of specific learning disability diagnosis from childhood through young adulthood

(in press)

- **Question:** Do childhood learning disability (LD) diagnoses remain stable into young adulthood?
- **Participants:** Archival data from 325 postsecondary students with both childhood and adult psychoeducational assessments.
- **Main findings:** Most childhood LD diagnoses were supported by academic impairment at the time, but only about 59% remained confirmed in adulthood.
- **Implications:** Childhood LD diagnoses may be accurate initially but not always stable over time, highlighting the importance of reassessment in postsecondary settings.

Differentiating ADHD from internalizing disorders in young women: Is it possible clinically?

(just submitted)

- **Question:** Can common ADHD self-report and attention measures distinguish ADHD from anxiety/depression in young women?
- **Participants:** 425 postsecondary women diagnosed with either ADHD or an internalizing disorder completed the CAARS and TOVA.
- **Main findings:** Women with ADHD reported higher ADHD symptoms overall, but there was major overlap between groups, and TOVA performance did not significantly differ.
- **Implications:** ADHD checklists and computerized attention tests have limited value for individual diagnosis in young women; comprehensive assessment and developmental history remain essential.

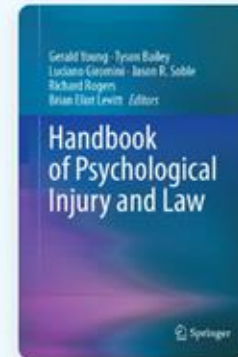


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ADHD in Adolescence and Emerging Adulthood: Diagnostic Considerations and Caveats

Chapter | First Online: 26 January 2025

pp 737–773 | [Cite this chapter](#)



Handbook of Psychological Injury and Law

[Allyson G. Harrison](#)  & [Beth Pollock](#)

[Access this chapter](#)



Current Projects

- Best practices for transitioning students with disabilities from high school to a post-secondary pathway – A critical interpretive synthesis
- Did the COVID-19 pandemic affect self-reported symptoms of executive dysfunction?
- Gender differences in adult ADHD: Higher symptom reporting in women without corresponding differences in objective performance
- Extremely elevated self-reported autism symptoms in post-secondary assessment: Associations with symptom validity and psychological distress
- Exploring differences with self-reported psychological functioning on the PAI pre, during, and post COVID
- Psychometric properties and construct validity of the ACTT in post-secondary students assessed for learning disorders or ADHD
- What is test anxiety, how is it structured, and has it has changed over time in people undergoing academic assessments



Training



Post-Secondary Accessibility Services: Foundations and Practice

We are developing a new course for accessibility advisors and want some feedback!

Course Title: Post-Secondary Accessibility Services:
Foundations and Practice

A competency-based 12-module onboarding curriculum designed for Accessibility Services staff in post-secondary education, reflecting the current Canadian legal framework, evidence-informed practice, and the applied decision-making required for defensible accommodation planning.



Course Overview

Module 1: Foundations of Accessibility in Post-Secondary Education

Module 2: Legal Frameworks and Duty to Accommodate

Module 3: Understanding Disability and Functional Impairment

Module 4: Documentation Standards and Acquisition

Module 5: Interpreting Psychoeducational and Medical Documentation

Module 6: Student-Centered Intake and Interviewing

Module 7: Analyzing Academic and Program Demands

Module 8: Matching Functional Impairments to Accommodations

Module 9: Developing Legally Defensible Accommodation Plans

Module 10: Communication and Implementation

Module 11: Managing Conflict and Complex Cases

Module 12: Ethics, Professional Judgment, and Self-Care



Transition Advisory Board

The RARC Transitions team hosts a transition advisory board to help plan, expand, and promote our free programs across Ontario, including programs supporting the transition to post-secondary.

We meet virtually 1-2 times a year - if you're interested to learn more and possibly join our board, please complete our [Expression of Interest form](#).



Thank You!

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