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Universities need educational psychologists

WHY are educational psychologists considered to be able to make useful contributions that assist learning in pre-school environments, primary and secondary education but generally not in further or higher education?

When the Dearing Report (National Committee of Inquiry into Higher Education, 1997) provided an admirable vision of the UK transformed into a society 'committed to learning throughout life' within 20 years, there was no mention of the range of contributions educational psychologists might make in helping to realise the vision of 'Higher education in the learning society'.

Wrong assumptions

It is now almost two years since I ceased to be the educational psychologist/counsellor in a student support and counselling team for undergraduate and postgraduate students in an 'old' university. Since leaving the post, I have had time to mull over the significance of the role I played.

When disclosing that I once worked as an educational psychologist with university students, I note surprised responses from those both in and out of 'the profession'. There is wonder that university students might actually need the services of an educational psychologist. And there is an apparently widespread assumption that those who can complete a university application form and attain entry requirements will accordingly be able to complete degrees successfully.

It is doubtful that all university students who experience difficulties that impact upon their academic performance are effectively having problems with study skills. While many students sail through their degree courses without apparently needing support, others seek out trained counsellors and welfare officers for help

with a variety of psychological issues that may affect their work.

However, it was my experience that there are also substantial numbers of students for whom the skills of an educational psychologist are most appropriate, in providing the particular support required for successful completion of undergraduate and postgraduate degree courses.

Dyslexia

Within an 18-month period, I worked individually with approximately 200 students, most of whom self-referred or were referred by tutors. I was principally allocated referrals where there was an educational focus mentioned in the 'presenting problem'.

As might be predicted, students with dyslexia formed the main body of my client group. These students included those who had previously been statemented (i.e. had a Statement of Special Educational Needs by which statutory provision is made for an individual learning programme at school) and had declared their specific learning difficulties when applying for a university place.

A second group of students with dyslexia referred themselves in response to leaflets distributed to freshers and the student guild. My leaflets offered advice to students with specific learning difficulties, and were complemented by leaflets addressed to tutors. These defined and described dyslexia, and identified how appropriate support could be accessed.

A third group with dyslexia emerged as the spectre of examination stress stalked the halls of residence. This group included statemented students who had not wished to declare their dyslexia as a disability in the belief that they might jeopardise their acceptance on university courses. While some of this group viewed dyslexia as a disability to be overcome, others saw it as

a gateway to the prized resource of 'maximum additional time' in examinations.

I screened all students who thought they might be dyslexic or whose tutors thought they might be. Full assessments were conducted by external educational psychologists who were requested to send me copies of their reports. I was then able to discuss assessments and recommendations directly with the students and their tutors in the light of individual needs and university requirements.

It seemed useful to establish 'Discussing dyslexia' workshops within the study skills support programme initiated by my service. The twice-weekly workshops were centred on a general programme that provided input on essay-writing skills, managing examinations and understanding stress.

The sessions drew 15 to 20 students who were willing to share their own coping strategies and together identify their needs within the university. It was decided that they would then create their own self-help group, under the umbrella of a 'students with disabilities' standing committee.

Other problems

Students with specific learning difficulties were only a part of my client group. Here I will mention medical students who had achieved the highest A-level grades and were competent in the traditional modes of assessment including ward rounds, essays and projects but who found multiple-choice papers presented a particular problem they were failing to solve.

I considered these students to be at the tail-end of the dyslexia continuum. Once we had undertaken specific work on using skills to order, sequence and eliminate choices, their performance reportedly improved.

An interesting group of — mainly male

