

Conceptualisations of 'Normal' For Persons with Disabilities in the Context of Special Education

Danielle H. McDougall

Abstract—More than two decades since the signing of the Salamanca Statement, persons with disabilities are still left on the fringes of the education process within mainstream schools. Their full inclusion into regular education has been marred and obstructed by conceptualisations of normal held by educational practitioners and policymakers. Persons with disabilities have been 'othered' by educators and this othering has impeded the education they receive. Although disability is just one marginalised group in which conceptualisations of normal has been applied in society, the issue of functionality sets disability apart from those groups.

Index Terms—Disability, other, special education.

I. INTRODUCTION

The Salamanca Statement was signed and ratified in 1994 by many countries around the world (UNESCO, 1994) signalling those countries commitment to bring an end to segregated instruction for children with disabilities [1]. According to the Statement 'those with special educational needs must have access to regular schools which should accommodate them within child centred pedagogy capable of meeting these needs' (UNESCO, 1994, p. viii). The purpose of the Statement was to see persons with disabilities educated alongside their typically developing peers in an inclusive education structure.

Inclusive education was not only a way to bring children with disabilities in from the fringes of society to occupy more mainstream positions but also as one of the ways to combat the discriminatory attitudes that kept them on the fringes in the first place (UNESCO, 1994). However, more than two decades since the signing of the Statement, discriminatory attitudes still surround the provision of inclusive education for children with disabilities. One way in which these attitudes manifest is the manner in which educators have conceptualised children with disabilities and their ability to 'fit' into mainstream education. Though inclusive education has been the basis to bring children with disabilities into mainstream education, the ideological underpinnings with the related conceptualisations of 'normal' and the ensuing practices of inclusive education have actually served to exclude children with disabilities.

II. DEFINITION

According to the Oxford dictionary, normal is defined as usual, typical or conforming to a standard [2]. This definition implies homogeneity in compliance to a standard either explicitly or implicitly stated. . In the United Kingdom, the Department

for Education Special Education Needs and Disability Code of practice defines someone as needing special education if he or she 'has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools' (DFE, 2015, p.16) [3]. According to DFE (2015), a person's disability is constructed against the backdrop of the abilities of others and need is characterised through his or her (in) ability to meet the standard of the majority. It is the 'normalised', homogenous, able-bodied group that is the standard by which persons with disabilities are judged and categorised (Fitzgerald, 2012) [4].

III. MODELS OF DISABILITY

To understand the importance of conceptualisations of normal to disability, there is a need to examine how disability is defined and theorised. The World Health Organization (1976) first defined disability as 'any restriction or lack of ability (resulting from an impairment) to perform an activity in the manner or within the range considered normal for a human being' (p.142) [5]. While impairment was defined as the physical, physiological or anatomical loss of function of a part of the body (WHO, 1976), disability described what that loss of function produced – an inability to measure up to a 'normal' standard. Person with disabilities were urged to 'fix' their flaws through medical intervention to then be accepted into the mainstream, normal society (Landsman, 2005) [6]. In the early days of special education, the medical model permeated the education world to influence practice. Children with disabilities were isolated from their typically developing peers and were educated in special schools with other children with disabilities. The social model which came in response to the medical model, defined disability as 'something imposed on top of impairments by the way persons with disabilities are unnecessarily isolated and excluded from full participation in society' (Oliver, 1996, p.22) [7]. Inclusive education, which developed out of the social model, endeavoured to address the educational structures that alienated persons with disabilities. The potential of the social model was marred, however, by its inability to change able-bodied persons' perception of 'normal' and the need to have persons with disabilities live up to it (Anastasiou and Kauffman, 2011) [8]. Teachers and pupils perceived persons with disabilities in need of normalising to cope with the rigour of mainstream education and the social model was not effective enough to erode that perception (Gable, 2014) [9]. In fact, the social model may have deepened the challenge for persons with disabilities. In arguing for society to change, the social model acknowledged that there are two groups operating in society – the able bodied and disabled and one determined the comfort of existence for the other, one held the power to state the extent of resources that will be provided and ultimately whether or not the other group will be accepted as a legitimate part of society (Gable, 2014). Inadvertently, the models of disability problematised disability as the other group, separate and apart from the dominant, normal group.

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D. H. McDougall is with the Graduate School of Education, University of Exeter, St. Luke's Campus, Exeter, United Kingdom (e-mail: dhm201@exeter.ac.uk).

IV. DISABLED PERSONS AS 'OTHER'

This ideology of separating persons with disability has been encapsulated in Bauman's theory of othering. Bauman described the anthropoemic nature of modern society to reject anything that does not adhere to its order and uniformity (Hughes, 2002) [10]. Self in modern society embodied conformity and homogeneity and anyone in violation of these values was othered (Jensen, 2011) [11]. Difference was seen to deviate from order and conformity and therefore needed to be "severed, corrected, exiled or normalised" (Hughes, 2002; p. 575). Persons with disabilities deviated from the conformity and homogeneity expected in normal society. Their imperfections represent movement away from the ideals of modern society (Hughes, 2007) and as a result they are 'othered' [12]. Their physical and mental aberrations are seen as threats to society and such disconformity and abnormality needed to be expunged or at the very least normalised (Hughes, 2002). Disability therefore crystallised such persons positioning as abnormal from mainstream society. In education terms, the theory of inclusion has sought to bring in from the fringes persons with disabilities into the framework of mainstream education while diminishing entrenched discriminatory attitudes that served to exclude them (UNESCO, 1994). Inclusive education, in practice, however, serves to assert standards of normal by those who hold the positions of power- that is the teachers, school administrators, policy makers, medical professionals and so on. Their self-positioning is strengthened in relation to the 'other' that is persons with disabilities. The presence of disabled persons in society reaffirms conceptualisations of normal as such persons represent living examples of what it is not.

V. LABELING AS A NORMALISING CONSTRUCT

One area in special education programmes where conceptualisations of 'normal' thrive is that of labelling. When a child is identified with a special need, he is given a label that is supposed to highlight his area of need (Lauchlan and Boyle, 2007) [13]. However, beyond the value of highlighting a child's area of need, labelling serves to separate out children with disabilities from the main group and position them as other within the mainstream education system (Jensen, 2011). While labels signify the special need that the child is deemed to possess, given the heterogeneity of special needs, labels are not effective enough to highlight the specific areas of difficulty for each child. The label therefore only serves as a means to place him in a category to highlight his difference and his inability to live up to normal behaviour (Norwich, 1999) [14]. Additionally, labelling which results out of assessment processes reflect the diagnostic yet subjective notions of the diagnostician. Diagnostic tests are not void of conceptualisations of normal and in fact can reflect prejudices regarding the persons they assess (Ho, 2004) [15]. Ho (2004) states how diagnostic tests are based on the assumptions that all children learn in the same way and represent a homogenous group and deviance from this assumption is counted as grounds for identification of a special need. Furthermore, some diagnostic tests do not take into consideration social, cultural and environmental factors that may impact a child's behaviour (Ho, 2004). In the United States, language differences between professionals and African American children have seen such children labelled with learning difficulties (Podell and Soodak, 1993) [16]. Children who do not fit what these professionals deem 'normal' may be diagnosed with a special need. Of course, subjectivity in diagnosis are associated more with non-visible disabilities such as

learning difficulties and Emotional and Behavioural Difficulties (EBD) as opposed to visible and objectively determinable disabilities such as Down's Syndrome where there is less room for personal judgements (Green et al., 2005) [17].

Labelling, however, does more than just create a separate group for children with disabilities. Labelling provides a glimpse into the power structures operating in the education world that use language for ideological rule. The labels given to children are not just markers for special needs purposes but a tool by which power holders restrict and control children with disabilities.

VI. POWER STRUCTURES WITHIN THE DISCOURSE OF DISABILITY

Labelling forms part of wider disability discourse that serves to entrench dominant ideology in favour of able bodied persons (Gable, 2014). Disability discourse seems asymmetrical as it reflects the perceptions of able bodied persons (Bruns, 1984) [18]. Imbalances in the discourse can be seen in what categories of special needs are included. Most notably absent from special needs discourse is the needs of Gifted and Talented children. This omission from special needs categorization represents the power of the dominant group to determine reality surrounding special needs provision. According to Gagné (2004), gifted and talented children are those whose ability is considered to be above average in at least one domain – creativity, intellectual, sensori-motor or socioaffective (p.121) [19]. They also express exceptional capabilities in areas such as academics, sport, music and drama. According to Dunn and Milgram (1993), gifted and talented is as much a special needs category as those children need additional support and guidance to develop their unique capabilities [20]. Schools must ensure that gifted and talented children are engaged in programmes that cater to their learning styles and needs (Dunn and Milgram, 1993). The omission of gifted and talented from special needs discourse reflects the power of the dominant group to decide which category of special need becomes othered. Special education becomes only a consideration of children who do not meet normal standards not those who exceed them.

On the other hand, is being othered such a pernicious practice in education? Without some recognition of the special nature of children with disabilities, their needs would be completely ignored much like the gifted and talented children. According to Jaspers et al. (2010), the 'other' need not be a repressed other. There is value in persons with disabilities holding the 'other' position [21]. In education terms, providing universality of care to prevent constructing separating lines between those with disabilities and those without is in itself a denial of care. There must be an acknowledgement of difference for any inclusion plan to be effective. Several authors have noted this tension in special education called the 'dilemma of difference' (Terzi, 2005) [22]. Do we acknowledge difference and bring along harmful practices such as labelling or deny difference and risk inappropriate educational provision? (Terzi, 2005). The dilemma of difference should highlight that difference is not bad. Indeed, the idea of a homogenous society as outlined in othering theories is preposterous as societies are founded on difference. The issue however comes when that difference is pathologised (Runswick-Cole, 2014) [23].

VII. OTHER MARGINALISED GROUPS

The pathologising of disability can be examined within the context of how other groups are 'othered' because of their

difference. Borne out of an ideology to separate the different, the dominant group applies constructs of normal and alienates those who do not measure up (Danermark and Getterstedt, 2004) [24]. The dominant group in wider society represents the White, male, able bodied and is held up as the benchmark through which other groups are assessed (Hughes, 2007). While the plight of Blacks in wider society is outside the scope of this paper, research and mainstream media have recounted the damaging effects of denigrating this group to subcategories by virtue of their difference. In the United States, the behavior of local police towards Blacks highlights their lived experience within an 'other' category. According to Weitzer (2005), in the United States, 43% of Blacks as opposed to 3% of Whites claim they have been stopped by police because of their race [25].

What is within the scope of this paper is the case of African Caribbean boys in the education system. In the United Kingdom, African Caribbean boys are more likely to be labelled as having behavioural difficulties than any other ethnic group (Rafalovich, 2005) [26]. Like many issues on race, care must be taken to not oversimplify reports and statistics. Nevertheless, research into lived experiences of African Caribbean boys indicate that conceptualisations of normal on the part of the teachers create disparities in educational experiences between African Caribbean boys and pupils from other ethnic groups. Teachers, in examining the behavior of African Caribbean boys, apply their conceptualisations of what normal behavior should be and when the boys falter in meeting this expectation, they are labelled with EBD (Rafalovich, 2005). However, advocates of the plight of the African Caribbean boys in UK and US schools have fused race with the gender issue emphasising the race dynamic involved. However, they have not acknowledged that African Caribbean girls, relative to their male counterparts, experience higher levels of success and face less discrimination from teachers (Rhamie and Hallam, 2002) or that African pupils of any gender have not been subjected to the kind of pathologising reported in the literature towards African Caribbean boys [27]. Nevertheless, the impact of race in normalising constructs cannot be ruled out. The literature includes women as another distinct pathologised group in society. Gender biases stem from hegemonised misogynistic views of womens' abilities and their ability to function on the same level as men (Danermark and Getterstedt, 2004). The male here is seen as the norm against which the woman is measured up to. The subordination of women in society can be seen in terms of violent acts committed against women (Crenshaw, 1991) [28].

VIII. DISABILITY SET APART FROM OTHER MARGINALISED GROUPS

In the literature disability has been counted among other marginalised groups as though to be disabled is the same as to be Black or female. While there is some measure of intersectionality between one marginalized identity and another (Crenshaw, 1991), persons with disabilities do possess some unique issues that set them apart from other marginalised groups and that is in the area of function. It is the case that persons with disabilities possess impairments that prevent them from participating fully in everyday life. The view that disability is nothing but a social construct induced by those wishing to see persons with disabilities normalised is problematic. The lived experiences of persons with disabilities transcend the perceptions of able bodied persons to acknowledge the difficulties encountered in day to day life (Shakespeare, 2008) [29]. The social model separates out disability from impairment and denotes society as preventing the full participation of persons with disabilities. However, even if there were no social barriers, some persons would still be disabled by virtue of their impairments. Corporeal limitations can make impairment and disability synonymous (Thomas, 2004) [30].

Persons with chronic illnesses, physical impairments, neurological diseases or genetic disorders may experience grave dis-abilities such as restriction in movement and other lack of function as a result of their condition (Thomas, 2004). Even in a barrier free society without any discrimination, these persons would still face limitations that may affect the quality of life they lead. This critical realist approach sees the body as an entity that imposes limitations on an individual and gives a voice to the practical realities of living daily with a disability (Thomas, 2004) which needs to be acknowledged honestly in the discourse.

VIV. CONCLUSION

Persons with disabilities have faced discriminatory attitudes from able bodied persons purporting to include them in mainstream education. These attitudes are borne out of conceptualisations of normal by which persons with disabilities are expected to live up to. Practices such as labelling and exclusion of gifted and talented from special needs discourse can give insight into such conceptualisations. The othering of persons with disabilities can be viewed within the context of other marginalised groups within society. However, the inherent nature of disability which is generally characterized by a lack of function deepens the attitudes of able bodied persons towards them.

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Danielle H. McDougall was born in SanFernando, Trinidad, West Indies and is currently pursuing a doctorate in education (EdD) in special needs and inclusive education at the University of Exeter, United Kingdom. She completed a masters in special needs and inclusive education at the University of Roehampton, United Kingdom in 2012. Her special interests are in researching areas regarding 'unseen' disabilities such as learning, cognitive, behavioural disabilities.

She is currently a full time student. Previously, she has worked as a Spanish teacher in a mainstream secondary school in Trinidad and Tobago. She has also worked in many primary schools in London, United Kingdom, working one on one with children with disabilities.

Ms. Danielle McDougall is part of Global Leadership Interlink, a faith based network committed to training professionals for principled leadership.