

## **Discourses of Disability, the Idea of Fitness to Practise and the Negotiation of Identity**

**Contribution to symposium on *Lifelong Learning and Social Justice: macro, micro and meso perspectives***

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### **Introduction**

As films such as *Educating Rita* illustrate, the period spent in higher education is likely to be a critical time in the formation of individual and group identity. For some, attending university may provide the opportunity to develop a new life course trajectory, for example, rejecting aspects of a working class upbringing and embracing aspects of a middle class identity. For others, time at university may involve the exploration of identity as a free individual, before embarking on the family formation stage of life. Disabled students are likely to be involved in many different aspects of identity exploration and development whilst at university, and addressing their relationship to the construct of disability is only one aspect of a much wider process. In this paper, we use case studies of disabled students taking Education courses at an old Scottish university to explore the way in which their identity as disabled students is handled in different contexts and articulates with wider aspects of identity formation. For most students, there is a separation between life as a student and life as a worker, and it may be possible to include disability as part of one's identity at university, whilst subsequently abandoning it on moving into the workplace. For students with significant impairments which are visible to others, disability is likely to be a constant aspect of their identity, but those with invisible impairments, who account for the majority of disabled students, there may be a degree of choice as to whether disability is a permanent or transient feature of identity. Students in vocational areas of study such as Education, who undertake work placements alongside their academic studies, are a particularly interesting group to study, since the process of professional enculturation runs in parallel to other aspects of identity formation.

### **The research**

This paper draws on data from a research project funded by the UK Economic and Social Research Council as part of its Teaching and Learning Research Programme (RES-139-25-013). The study, conducted between 2004 and 2007, was longitudinal and investigated the experiences and outcomes of a cohort of disabled students in four universities over a period of four years. Profiles of the four institutions were compiled, drawing on key informant data, statistical information and official documents. A questionnaire was administered to disabled students in each institution, and case studies of students were subsequently undertaken. The case studies involved interviews with students and their lecturers at intervals during their university career. The sample of case study students was selected in order to reflect the social profile of students within that particular institution. This paper presents two case studies of students undertaking the Bachelor of Education (BEd) programme at a traditional Scottish university. The following questions are addressed:

- How is 'fitness to practise' understood formally and informally in relation to initial teacher training?

- How do students understand their impairment and how does this understanding appear to have evolved during the course of their school experience, university education and transition to the workplace?
- At what point do students choose to disclose an impairment at university and on work placement and why?
- Do ideas about 'fitness to teach' appear to have had an impact on the student's decision to disclose an impairment?
- What has been the effect of disclosure on the individual's access to resources, reasonable adjustments and identity in the university and on work placement?

### **Discourses of disability, the negotiation of identity and fitness standards in teaching**

The negotiation of individual identity clearly does not take place in a social vacuum, but occurs as a result of complex negotiations with significant others (Hjörne and Säljö, 2004). With regard to the case of disability in the developed world, there are contradictory forces at work, some of which push individuals into embracing a disabled identity and some of which continue to stigmatise disability. Stone (1984), for example, noted the rapid expansion of people identified as disabled in the US and suggested that in societies where goods are distributed on the basis of work rather than need, disability fulfils an essential role in justifying the allocation of some resources to individuals on the basis of need. This explains why the percentage of those counted as unemployed in countries such as the US has declined over time, whilst the proportion of those counted as requiring income support on the basis of disability has increased (Bloch and Prins, 2001) and the UK (Riddell et al, 2005), where 18% of benefits claimants are classified as unemployed, compared with 62% who are classified as sick or disabled. In the context of education, Tomlinson (1982) noted the tendency to expand the category of special educational needs to include those experiencing social disadvantage, thus enabling a discourse of individual deficit to override those of social disadvantage, a trend which is clearly exemplified in the new category of additional support needs which has been introduced in Scotland. The category of disability, Stone suggested, was not infinitely elastic, since those included were able to claim additional resources to meet their needs. At a certain point, the state was likely to decide that too many resources were being expended to meet quasi-infinite demands, and at this point efforts were likely to be made to retract the category's boundaries. This is clearly evident in active labour market policies in the US and Europe, which attempt to quell the flow of new disability benefits claimants. In education, a device which has been used to curb funding is to devolve budgets to schools, so that hard decisions about spending priorities are made at a local level and with limited funds. A further impetus associated with the expansion of the category of disability comes from the disability movement and the Disability Rights Commission, which have challenged the negative image of disabled people in society and have tried to encourage people with an impairment to group together under the common banner of disability in order to maximize their political impact (Oliver, 1990). The expansion and retraction of the category of disability is clearly likely to have a major impact on the identity of people, who at different times, will either fall within or outwith its boundaries.

As noted above, whilst there are some pressures in developed societies to expand the category of disability, contrary pressures exist which lead people to reject such a label. In particular, disability may be associated with the idea of a 'spoiled identity' (Goffman, 1990), thus pressurizing individuals to pass as non-disabled wherever possible. In the caring professions, this tradition is reflected in the imposition of

fitness to practise standards, which were introduced with the specific purpose of barring unsuitable people from working in professions with high levels of contact with the public. For example, the Nursing and Midwifery Council, which regulates the nursing profession in England, Wales and Scotland, maintains that nurses must be of 'good health and good character' and operates fitness testing at the point of registration. Entry to teaching, medicine and social work are similarly controlled by regulatory bodies, although the standards are framed differently in the various professional arenas and applied differently in different jurisdictions of the UK.

The General Teaching Council for Scotland was established in 1965 to regulate the teaching profession and fitness to practise standards were formalized in regulations introduced in 1993. Applicants for teacher training had to satisfy the medical practitioner for the particular institution that they were 'medically fit to teach'. Teaching in Scotland differs from the other caring professions in that, following a consultation in 2004, it was decided to remove the fitness to practise standards on the grounds that they were anachronistic and ineffective in identifying individuals who might pose a risk to children. The consultation is available at <http://www.scotland.gov.uk/consultations/education/medicallyfit.pdf>. The document notes that the medical standards were initially introduced to protect children from infectious diseases such as tuberculosis, but such conditions are now quite rare and would only be detected in the later stages. Conditions such as HIV would only be detectable if laboratory tests were carried out, which were not part of the medical examination, and individuals with blood born viruses might well be asymptomatic. Psychiatric problems, it was noted, might also pose a threat to children, but there was no degree of certainty in relation to identifying which candidates might be dangerous. The General Teaching Council for Scotland published a General Code of Practice in 2002 and competency standards for full registration, which were deemed to supersede the requirement for separate health and fitness checks, particularly in light of the extension of the Disability Discrimination Act to cover the activities of professional regulatory bodies. Despite the abolition of the fitness to practise standards, employers of teachers in Scotland require future employees to disclose whether they are disabled and, if deemed necessary by an occupational health practitioner, undergo a medical examination.

By way of contrast to the situation in Scotland, the Department for Education and Skills in England still insists that standards on physical and mental fitness to teach must be met by entrants to initial teacher training and qualified teachers. These standards are set out in Circular 4/99 *Physical and Mental Fitness to Teach of Teachers and of Entrants to Initial Teacher Training* (DfEE, 1999). The Circular explains the Secretary of State's powers to 'bar' a teacher on 'medical grounds' under 1993 Regulations, which have since been repealed. The Circular appears to contain two possibly contradictory messages, one suggesting that teaching may be an unsuitable career for disabled people, the other pointing to the benefits of including a higher proportion of disabled people in the teaching workforce. It states:

Teachers and those training to become teachers need a high standard of physical and mental health to enter or remain in the teaching profession, as teaching is a demanding career and teachers have to act in loco parentis for the pupils in their charge. The health, education, safety and welfare of pupils are important in deciding on an individual's fitness to teach (B1.1)

Shortly afterwards, a slightly different message is given:

Disabled staff can make an important contribution to the overall school curriculum, both as effective employees and in raising the aspirations of disabled pupils and educating non-disabled people about the reality of

disability. Many disabled people will be medically fit to teach, though employers may have to make reasonable adjustments under the DDA to enable disabled people to carry out their duties effectively. (B.2.1)

At the time of writing (June 2007) the Pensions and Medical Fitness School Work Force Group of the Department for Education and Skills was in the process of drafting amendments to the Circular to make it compliant with the DDA.

In 2007, the Disability Rights Commission (DRC) undertook a Formal General Investigation into Fitness to Practise standards in the teaching, nursing and social work and concluded that these discriminated against disabled people in the profession, leading them to conceal their impairments or to leave their chosen profession early, reflected in very low numbers of disabled people in these fields. The DRC also argued that the standards acted as a deterrent to disabled people who were considering entry to the profession, and that occupational health tests applied by prospective employers might also deter disabled people from applying for teaching jobs, rather than being used to identify the reasonable adjustments which might be helpful, as required by the Disability Discrimination Act.

This perception is confirmed by data from the General Teaching Council for Scotland, which shows that, whilst disabled students make up about 3% of all disabled students in Education, they account for a much smaller proportion of teachers on the Teacher Induction Scheme (the one year school-based programme which all Education graduates undertake after their initial training). The number and percentage of teachers on the induction scheme is shown in Table 1.

(Table 1 about here)

The case studies which we present below are of students who entered a BEd course at a time when the fitness standards were still operational, although these were abolished during the course of their four year period of study. One student had a hidden impairment (dyslexia) and the other had cerebral palsy which affected his mobility, but which often allowed him to pass as non-disabled. Studying the experiences of those with hidden, or almost hidden, impairments is particularly important, since they represent by far the largest group of disabled students, and, precisely because of the invisibility of their condition, have to face dilemmas in relation to disclosure at many points in their personal and professional lives. The case studies illustrate the individuals' profound ambivalence in relation to the category, and the way in which the external environment is critical in terms of permitting or precluding disclosure. They also illustrate the high degree of anxiety provoked by the pressure to prove that one is fit to practise as a teacher, even though the requirement for a formal medical examination was abandoned in 2004.

### **Case study 1: Jean**

Jean was a married mature student with three children who had decided to return to higher education to study a course which would allow her to find local employment. Her husband, a fire fighter, worked shifts and was therefore available to help out with childcare. She was from a working class background and her siblings had taken very different life courses:

*My dad was a woodcutter and saw miller and my mum was a stay at home mum, my sister worked in a shop – she is now a beauty therapist, she has been to college [and has got an HND] ... my other brother, he is doing fantastically ... he is the top company manager for Asia ... he speaks fluent Japanese, he is married to a Japanese woman, but he started working from the bottom up ... My other brother is a JCB digger and does motor cross*

*racing. (Interview 1, year 3, p. 23)*

### **Identification of disability**

Jean always struggled with her spelling, both at primary and secondary school. She was not diagnosed as dyslexic at this stage but was provided with remedial help. When she was at school there was, in her view, a great deal of stigma associated with receiving remedial help. One of her teachers found a way round this by asking her to take a message to somebody so that the other children did not know where she was going.

*It had been clear at primary school and between identifying my erratic spelling and at secondary school [in] English. My teacher was fantastic and sent me to remedial classes but under the cover of doing ... messages. Because when I was at school there was a lot of stigma attached to remedial classes so she would say 'could you go and do me a message ... they couldn't diagnose what I had ...' (Interview 1, p. 3)*

She was thus provided with support of some kind, but this was not formalized. Dyslexia was eventually identified when she went for her medical on entry to the institution. As noted above, in 2004 the General Teaching Council for Scotland dropped its requirement for a medical examination to determine fitness to practise. Jean was among the last cohort required to undergo the examination and in the course of a discussion about her general health she disclosed worries about her spelling. Rather than using this as a reason for barring Jean from entry to teacher training, the doctor suggested that she might have a dyslexic-type difficulty which could be managed with reasonable adjustments on the course and in the workplace. Indeed, the doctor herself experienced similar difficulties:

*...then in my medical she asked me 'Do you have [spelling problems]?' because I was so petrified with my application form that I had spelt something wrong, so I had everybody checking it and I was like 'I do ...but will that hold me back from getting in?' and she said 'No, it shouldn't at all'. And she was a doctor and it had never held her back.*

Following appointments with the Disability Office and an educational psychologist, dyslexia was formally diagnosed and the Disabled Students Allowance awarded. However, the process was lengthy and support in the form of a laptop and software packages was not available until the second year of the course.

### **Disability and identity**

Jean felt that there was a real stigma attached to having reading and writing difficulties:

*I come from a generation where it was looked on very badly and you were regarded as being stupid and dunce and things like that ...I didn't tell my mum for ages ... (Interview 1, p. 6)*

As a result, she was wary of discussing her diagnosis of dyslexia even with close family and friends. Her daughter had also been diagnosed with dyslexia and Jean commented on the difference in attitude towards dyslexia in her daughter:

*My oldest has been diagnosed with dyslexia ... it's been really good because [she is] younger than I was and she is really resolved not to see it as a*

*disability but she is really resolved to say that's OK, I just do things and be different, I have strengths in that and my friends has strengths in that .... You know she just felt it is normal life and she doesn't have the whole label hang up as I would. So it is really good to see her because I was aware she could be and me and my husband did a lot of chatting to her and preparing her ... so she is really comfortable which is nice. (Interview 2, p. 25)*

However, she herself found it impossible to see herself in terms of the discourse of difference, and continued to have an ambivalent relationship with the concept of disability:

*I don't like the word ... not able, because of the 'dis'. They changed ... Capability Scotland and things, and there's ability groups rather than disability. I don't like it and I still don't know ... I still won't class myself as disabled (Interview 1, year 3, p. 18)*

She went on to explain her image of a disabled person as a wheelchair user, even though she saw this as 'shocking' and 'awful' in revealing her own prejudices. However, being categorised as a disabled student did not sit easily with her overall sense of self:

*I still get emails from the Disability Office to register with [a disability group]. I kind of think 'I am not disabled' .... I mean there is one argument that you know labelling it might give you more resources and yeah, it has given me extra time which I am really pleased with ... but then I kind of think well, I don't know ... we all have strands and areas of development that can be worked on. (Interview 1, year 3, p. 19)*

### **Experiences of teaching, learning and assessment**

Jean's course involved a mixture of academic work in the university and placements in school. In the university, the Director of Studies was intended to inform all tutors about her requirements for reasonable adjustments, but this happened in a somewhat haphazard manner. Some lecturers were very sympathetic, adapting their teaching style and providing emotional support:

*And at the end of the workshop I was just upset [about the difficulties posed by dyslexia] ...and I spoke to her and was saying 'What can I do [about my dyslexia?]''. She was like 'See this as a positive thing, this is going to make you a better teacher for the children who have struggled, that you will be able to identify with their struggles ...' and then afterwards she did things, and I knew she was doing them because of me but she never ever made a fuss. Like simple things, if she put an overhead up in a lecture theatre, or even a workshop, I found it hard to keep my place and I can't actually follow it on a piece of paper ...she would either take another blank piece of paper, turn it over and lay it down and, either do paragraph by paragraph, or line by line if it was a really difficult font. And she would read it out as well so I would get it audibly and visually and that was really good. She used a lot of videos to say things, a lot of practical work... It was very much you know, hear one, see one, do one, teach one if that makes sense. (Interview 1, p. 7)*

Other lecturers had a rather more casual teaching style and did not appear to make any allowances for the difficulties experienced by some students:

*When the overheads are up I make a point of always sitting at the front so I*

*can see what is going and you know you can hear the lecturer and I am not distracted by people chatting about what they have done at the weekend or texting or whatever ... She [the lecturer] actually moved more into the group so visually I am not seeing her because she is obviously aware that there are people chatting about what they've done at the weekend ... so she is trying to catch their attention. So she moves into the group as overheads are swishing on and off, she is talking about something else which is so important that I am supposed to be taking [it] down and I am a bit like ... 'What do you want me to?' (Interview 1, p. 8)*

Lecturers within the School of Education had radically different understanding of and sympathy towards the needs of students with a diagnosis of dyslexia and the suitability of teaching as a career for disabled people more generally:

*There is a feeling amongst teacher trainers that there is a bottom line in terms of showing the children correct grammar, correct spelling, correct English, whatever. And if you are going to teach and you are writing worksheets for children where the grammar is wrong or the spelling is wrong or your notes on the board are full of errors, then somehow you are giving less than decent education to youngsters. So there is a line beyond which you really ought not to be a teacher. Now I share that. I am not saying that necessarily that is what happens with a dyslexic student. I have had some dyslexic students, in fact I have had already this year in my PGCE physics group, who have talked to me about struggling with various issues and I have talked to them. I have said 'OK, you do understand that the bottom line is that whatever you write on the board has got to be correct. In terms of lesson planning, it is your job to plan and if you are finding planning difficult or it takes extra time, you are going to have to allow extra time for it as a professional.' And the students are usually very good with that. I have not actually been in a situation where I have thought that student shouldn't be in the classroom. But I did worry that one day I am going to find someone for whom the challenge is such that it is transparent to the world. On the other hand, I am big enough to realise that some spelling errors on the board may be completely over-balanced by a cracking good personality and planner and engager with the children. I am realising that I have got some values that I am struggling with here. And I am aware of that. (Lecturer 3, Post observation interview year 2, p. 7)*

Others felt that the university lecturers themselves were sometimes deficient in their knowledge of disability issues and the values which they were modeling for their students:

*There are people teaching on the social justice and inclusion course who have no awareness of some of the issues around or preferences of people with particular disabilities. Being called disabled students or students with disabilities. Or deaf students or Deaf with a capital. None of that awareness of the nuances or what the implications might be. What the students hearing staff using those words might pick up from that. Just shocking that a course on social justice and inclusion is staffed by people who do not know. (Lecturer 4, Post-observation interview, year 3, p. 7)*

Despite the variability of practical and emotional support, Jean felt that her university experience had been largely positive and the adjustments made, in terms of extra time in exams and access to lecture notes in advance, were adequate. However, as illustrated below, her experience of school placement was much more difficult.

## Work placement

Jean had one main placement during second year, a five week period in a nursery, when she decided not to disclose her dyslexia because the placement was very short. However, she devised a note-taking system:

*We had to do team meetings and be part of the team ...normally I would have a kind of shorthand code that I would use in lectures ... but I am more aware of people watching so I would be more longhand and then I would have a complete blank ...so I tended to take them home at night and check ...so that was OK ... What I tended to do was I carried a post-it pad with me and where a child did anything that I had to observe or if I had to observe parents or staff even I would do little notes and keep it on a post-it pad and write up my observations at night. There was a kind of a comment about that, not in a big way but when I went for one of my interviews with my head teacher ... she was excellent ...she did say 'you know we don't always have time for notes and things' ... I don't know how anybody holds that much information because there were hundreds of kids at this nursery, fifty in the morning and fifty in the afternoon ...but the staff seem to know and they would recall very easily at meetings whereas I tended to recall from my [notes].*

She was also concerned about the way in which staff discussed specific learning difficulties:

*They would make a comment about when a parent had come in and said 'I am concerned my child may be dyslexic'. There was a little girl who was showing signs of dyspraxia, always walking on her tiptoes, and there were a few comments, not from the head teacher, not from the teacher but from the other staff. And it might not have been the main staff, it might even been the auxiliary, classroom assistant ...I felt a little bit like it was unprofessional and one part of me did feel like saying at the end 'Well you know, have faith in your kids, you know try and keep referring them because if they can achieve' ... but I didn't in the end. But yeah ... it was interesting to see people's attitudes." (Interview 2, p. 17)*

In year 3, the students were on placement for almost the whole of semester 1 and issues arose around disclosure. This created considerable problems for Jean and left her feeling unhappy about her relationship with the first teacher on her teaching practice. She was also upset about the manner in which she was challenged by her Director of Studies (DoS) in relation to disclosure and whether she really ought to be a teacher:

*I spoke to her [DoS] and she was a bit like 'Well you are going to have to explain to the school as it is, because when you do your probationer year it has to be disclosed'. So I was really shocked by that and felt very bruised that this was going to have to happen, and then she actually questioned whether I should be teaching in the first place. So I felt really, really bruised after that. She probably wasn't aware of, because I mean I still find I struggle with this, you know, it's the generation I come from ... So ... one of my good friends said to me 'Well I think you should just do it [name] and tell them and get the emotional stuff over and done with this year'. And I spoke to one of the tutors from last year [name] and she is lovely, and she gave me the same advice. (Interview 1, year 3, p. 6)*

She decided to discuss it with her first placement teacher but not until a week into the



placement when she hoped she would have proved herself to be sufficiently competent.

*I told my teacher at the end of my first week, beginning of my second, because I had got some major things done and I thought 'Well, she knows that I am a hard worker ...' and her expression was, I will never forget, her expression was 'Really!'. And I just said to her 'Yes, you know I cope' and stuff and then the next day I went in and she was very close to another teacher in the school, and I felt like I had been discussed, and there was kind of looks being made and things, and then that teacher, from then onwards treated me like a child, and was very, very picky. (Interview 1, year 3, p. 7)*

The teacher had some problems in compiling a report and the head teacher was asked to confirm that Jean's performance was adequate. As a result of this negative experience, Jean decided not to disclose to the second teacher with whom she was working in another part of the school.

*So that was hard, I cried a lot in those three weeks, and I was worried about going back to the same school, that it was going to have a knock on effect ... I didn't think the head knew and I did wonder about speaking to the head but there was a lot of animosity between the head and the teachers ... I felt like [the] primary one teacher and definitely the primary four/five teacher who are very close had discussed it ... (Interview 1, year 3, p. 7)*

*... [the] primary six/seven class, she was a lovely, very positive woman, and I didn't tell her because I had such a hard time first time around .... And I thought well, I am not even going to mention anything. So she just instilled confidence in me right from day one, and day one she said 'Well, I want you to take these two maths groups and go off and do this ...' I had five consecutive days of the class, a great challenge. (Interview 1, year 3, p. 7)*

She was awarded straight As for this placement by the university assessor and felt vindicated. However, the experience taught her that there were considerable dangers in disclosing an impairment, since this seemed to result in suspicion which was likely to undermine confidence.

Jean also discussed the practical difficulties she encountered, mainly in the area of spelling, and her coping strategies:

*Yes, I made mistakes spelling - marshmallows is one ... one of the wee girls said 'Mrs M you have spelt that wrong' and I said 'oh, really ...' I still struggle with el/le endings ... What I used to do was I sometimes have prompt cards and I would kind of pre-empt what would come up ... I mean when I go round and kids would say ... 'how do you write ...' I would say 'let's have a look ... tell you what, you go and check the dictionary'. So I tend to do those strategies. If I had my own class I would probably say 'Oh, you know I am not very good at spelling but it doesn't mean we shouldn't keep trying ....' (Interview 1, year 3, p. 11, 12)*

We now turn to a second case study, Andrew, a student with a diagnosis of cerebral palsy.

### **Case study 2: Andrew**

Andrew was a young man in his twenties who attended a state comprehensive

school in a relatively disadvantaged area before undertaking an HNC at a further education college. Subsequently he was admitted to a university at some distance from his home to undertake the BEd in primary education. He was the first member of his family to participate in higher education. Andrew lived at home, resulting in a long cross-country bus journey to and from the university. Part of the reason for this was to enable him to support his disabled and widowed mother.

### **Identification of disability**

Andrew had cerebral palsy and experienced some impairment of motor function which affected his mobility and co-ordination. His impairment was not immediately obvious, and he often chose to 'pass' as a non-disabled person. Even close friends were often unaware of his difficulties. Despite having a close group of friend, Andrew did not mention his impairment until well into his second year, and in the context of a general discussion about pregnancy and premature babies:

With his friends the issue of his impairment arose out of a discussion about pregnancy and premature babies

*I happened to mention that I was 3 months premature blah, blah, blah and my friend Hayley said 'has that left you with anything ...' she was just asking. And I said 'well, it has actually' and I just explained to her and she said 'you'd never know that, you don't really notice it' And I was explaining about my eye sometimes goes right in the corner. There were like 'oh I notice it now' but they hadn't ever noticed it before. It wasn't until I pointed stuff out to them ...'oh right', 'so that's what that was all about' or 'that's why sometimes you trip' or whatever. They have now got something to explain it all. Which is good. (Interview 2, p. 15)*

Andrew was well supported at school as they were aware of his disability. At college, he received excellent support from the student disability adviser once he had disclosed his impairment. His disability adviser helped him claim disabled students allowance and provided other support. His experience at university, however, was far more variable. His first meeting with a disability adviser led to him being told that his disability was not severe enough to warrant additional support, despite the fact that his medical records had been sent on from the college. In second year, however, he met a different disability adviser who quickly arranged for him to have additional IT support:

*Well last year as I say I only went once to find out about the disabled students' allowance [to check if anything] needed to change and I wasn't given the support I needed really ... well I said I think I might need a PDA because of my organisational skills. [and she said] 'no, I don't think you do, if you think you need one come back and see me' ...and I thought 'I am not giving them the satisfaction of going back ...when I went this time [2<sup>nd</sup> year] she was like 'I think you could do with a PDA' and she was absolutely fantastic. I mean the contrast in support I was given between the two different people was amazing and I was pleasantly surprised because I kind of had this preconceived notion that they must all be like that and they are not. I think, I don't know if that lady had had a bad day when I went to see her ..." (Interview 1, p. 10)*

As a result of this approach to the disability office, he was also able to arrange extra time in exams from year 2 onwards.

## Disability and Identity

Whilst recognizing that he had an impairment, Andrew was reluctant to make this the defining feature of his identity. He did not feel he had been discriminated against, did not see himself as disabled and rejected the idea of being treated differently because of his impairment. In an interview in third year he commented:

*I have never let it bother me, it's funny. I know that I am impaired to a certain extent and I am lucky that my impairment isn't a lot more severe. To me it just means that you might take longer to do things ... but at the end of the day it doesn't stop you doing things ... You just need to learn to adapt ... I have never really thought 'I can't do this and I can't do that. I just think 'I can do that and if I run into trouble I will cross that bridge when I come to it'. (Interview 1, year 3, p. 12)*

However, he recognised that there were certain things which were difficult or impossible:

*Definitely [difficult] – a lot of things. PE and things ... but again you just kind of say 'well I can do it to a certain extent' so I know my limits. You do it to your limit and stop and say 'I can't do any more'. (Interview 1, year 3, p. 12)*

As a result of his desire to be treated the same as others, Andrew discussed his impairment with very few people:

*So if you were to approach any of the lecturers ... they wouldn't know because I don't tell them. I mean my circle of friends know and they have seen it, it is particularly bad when ... well my legs are particularly bad at night time. When I am tired I start to fall over myself ... I don't tell anyone because it's the whole pride thing, it is because I don't want anyone to treat me differently." (Interview 1, p. 8)*

Part of the reason for saying little about his impairment was to avoid criticism or resentment from other students:

*I don't want people to say 'oh, look at him, he's getting extra time' because I do see it. People in the course look at another girl who is disabled and they say 'oh, look at her she's got a laptop', or 'look at her' you know, I don't want that. I don't want to be ostracised like that, so that's why I don't mention it." (Interview 1, p. 8)*

Andrew recognised that there were times when he needed to disclose, for example, to negotiate an alternative assignment on an Environmental Studies field trip:

*The river study was one particular thing ... They accommodated me really well. They just said 'you don't need to do that' but one of the assistants took me in the van and we went to a visitor centre and I evaluated the usefulness of the visitor centre. I was doing something, although it was different to the rest of them, I wasn't just sitting in the cabin with my feet up. (Post observation interview, p. 5)*

Even receiving extra time in exams caused Andrew some degree of social embarrassment:

*It is not something that I really like doing. I explained it to those who really*

*needed to know and as for the rest of them well – I just left them guessing. All they knew was that I was up at George Square. They didn't know the reason. That was fine. I just said ... I think I just said I had a wee bit extra time just to read over it more carefully. That was fine. (Interview 2, p. 5)*

## **Experiences of Teaching, Learning and Assessment**

The only adjustments which Andrew received during his time at university were assistance with IT equipment, extra time in exams and some flexibility over deadlines. As was the case with Jean, his lecturers demonstrated very different understandings of disability:

All three lecturers felt that there were specific issues in relation to disabled students doing teacher training. However, they differed in terms of the extent to which they felt that disabled students could become 'fit to practise' and in the way that they tackled making reasonable adjustments. Lecturer 1, for example, whilst being willing to make some adjustments, felt that some students were simply 'too disabled' to teach:

*In general I don't think we can make broad changes to the curriculum. The teaching courses are slightly different from the average academic course in that these people are all trained to be teachers. They can't be too disabled or the question would arise about what they are going to do in the classroom ... We [the department] have never met together and said 'in general [how do we respond] ... what we do is to respond to needs that we are informed about. (Lecturer 1, p.5)*

Lecturer 2 felt that the institution had not managed to increase awareness of disability amongst staff a result of competing priorities:

*I actually don't ever speak about these issues with my colleagues on a day to day basis ... If the institution had done a good job of raising our awareness, it may well be putting things on our agenda to talk about on a regular basis ... On our agendas are bums on seats, recruitments, financial income, new building plans – those sort of things occupy our time. (Lecturer 2, p. 9)*

The lack of awareness and informed debate about disability issues was also strongly emphasised by lecturer 3, who had a background in special needs education and was a recent recruit:

*I am inclined to say 'DDA what DDA'? People just don't seem to know about it .... I am constantly taken aback by the sorts of discussion that are had that I would have imagined taking place five years ago. (Lecturer 3, p. 12)*

Lecturers felt that the GTCS needed greater clarity about the concept of fitness to practise and its operationalisation:

*The whole question of who actually decides whether this disabled person is fit to come on the course is not clear. The GTC won't give you a straight answer, or they didn't to me. (Lecturer 1, p. 7)*

An alternative view was presented by Lecturer 3, who felt that children could benefit greatly from being taught by someone who themselves experienced difficulties:

*I am inclined to think children struggle a lot with reading and writing and*

*someone who has really had to struggle themselves is particularly well placed in some ways to actually understand why it is that the children and young people they are teaching are struggling in the way that they are .... There are ways to manage dyslexia ... I think if it is something that is addressed well by the individual and their environment then it can be a strength. I can see that it would be very demanding spending your working life addressing this disability. (Lecturer 3, p. 12)*

## **Work Placement**

Whilst placements in years 1 and 2 were relatively successful, Andrew experienced major problems in relation to his placement in year 3, although these were triggered by his mother's illness rather than his impairment. He felt that school was unsympathetic, thus heightening his anxiety, and in the end decided to take some time out and redo the placement:

*By the Friday I was completely scunnered. I don't mind constructive criticism but it had got to the point where I felt they were knifing me in the back every time he [teacher] said there was something wrong with my lesson, it was just like pure knife in my back ... My mum would phone me at lunch time and I would end up crying to her on the phone. That's not me, I am not that emotional ... I got home on the Friday and I phoned the school and said 'I am making an appointment with doctor' ... I said 'it is nothing to do with the school ... it's just me – I need to get myself sorted out ...' She seemed fine and then she kind of put the boot in a bit and said 'clearly that is your decision but I would advise you to work through it'. ... I said to her 'I am sorry my lessons haven't been up to scratch ... it is just because I am going through some things ... Then she really dug in and said 'well, yes from what I have seen you don't have what it takes to be a primary teacher'. I thought 'yes, kick me in the ribs when I am down.' (Interview 1, year 3, p. 6)*

Finally, the placement was completed over the summer in his old primary school, which meant he was less tired and much less stressed. On the basis of this experience, Andrew decided that he would disclose his impairment to a future employer in order to ensure that reasonable adjustments could be made, particularly with regard to flexible deadlines to avoid over-tiredness and stress.

## **Discussion and conclusion**

We began this paper by discussing the contradictory imperatives in late capitalist societies in relation to disability. On the one hand, as observed by Stone (1984) disability clearly serves as a category of administrative convenience, justifying the exclusion of a large section of the population from the labour market who are often disadvantaged by poverty and exclusion rather than by impairment. Running alongside this discourse are at least two others. The idea of disability as stigma, as described by Goffman, still persists, making disability a shameful marker of physical or mental imperfection and consequently an unattractive identity for many people to accept. Counteracting this are the efforts of the disability movement and the Disability Rights Commission, which have sought to establish disability as a political category by promoting positive images of disabled people, drawing on discourses of difference rather than deficit. Clearly, these competing discourses around disability have knock-on effects in terms of the identity of those who either choose to be categorized as disabled or are categorized in this way by others.

As a result of anti-discrimination legislation, universities at one level buy into an

understanding of disability as a political category and an important equality strand, and have responded to legislative requirements prohibiting discrimination and requiring positive action to facilitate the participation of disabled students. The views of individual lecturers, however, reveal that not everyone subscribes to this liberal stance, and particularly in vocational fields of study questions continue to be raised about whether disabled people can ever be deemed 'fit to practise' in areas such as education. Until very recently in Scotland, notions of an absolute standard of physical and mental fitness were underlined by the requirement of the professional regulatory body for a medical examination to rule out unfit individuals. The General Teaching Council for Scotland differs from professional regulatory bodies in other parts of the UK in its decision to scrap the fitness to practise standards. However, the attitudes of some university lecturers and school teachers discussed above indicate that it will be some time before the implications of this decision are fully understood by the teaching profession.

The case studies in this paper are of students with hidden, or almost hidden impairments, by far the largest group of disabled students in higher education. At school, Jean learnt that additional support may be helpful, but such needs were inherently shameful and must be hidden from other members of the class. At university, a doctor carrying out a medical examination intended to weed out the unfit from teaching suggested that she might benefit from a diagnosis of dyslexia in order to receive certain benefits and allowances. Following a psychological examination, Jean was rewarded for the new diagnosis, receiving the Disabled Students Allowance, allowing her to purchase a laptop computer and to benefit from extra time in examinations. The downside, however, came in the form of institutional pressure to disclose her diagnosis on her school placement, risking the disapproval of teaching staff and possible damage to her future employment prospects. Unsurprisingly, Jean experienced considerable conflict as a result of these conflicting pressures, and by the end of the study had decided to jettison the category of disability as a significant part of her identity, since in the workplace it appeared that the disbenefits outweighed any benefits. As illustrated by the data in Table 1, her judgement appeared to be shared by the vast majority of disabled students moving into their induction year, where less than a third of students who were identified as disabled at university chose, or were forced, to retain this aspect of identity on making the transition into their working life.

Andrew's experience was slightly different. Like Jean, he was acutely aware of the stigma associated with being identified as disabled and the possible resentment of other students towards someone who appeared to be getting additional help. As a result, Andrew generally tried to pass as non-disabled, disclosing his impairment only to a small group of trusted friends and lecturers. However, the experience of failing to disclose an impairment on placement made him realise that in some situations he might need the protection of the law in order to request a reasonable adjustment, which would inevitably involve formal disclosure. In general, the case studies of Andrew and Jean reveal the powerful pressures which prevent students from disclosing an impairment when they move into the workplace, and the realities of ongoing prejudice in both universities and schools. Although the notion of 'fitness to practise' has been discarded as anachronistic and discriminatory, it clearly continues to exist in people's minds, reinforcing the idea of disability as individual deficit and the disabled individual as unworthy of full social inclusion.

## References

- Beck, U (1992) *The Risk Society* London: Sage Publications.
- Bennett, N., Dunne, E. and Carre, C. (1999) 'Patterns of core and generic skills in higher education, *Higher Education*, 37, 1, 71-93.
- Bloch, F.S. and Prins, R. (eds) (2001) *Who Returns to Work and Why?* Transaction Publishers: New Brunswick and London
- DfEE (1999) Circular 4/99 *Physical and Mental Fitness to Teach of Teachers and of Entrants to Initial Teacher Training* London: DfEE
- General Teaching Council for Scotland (2004) *Medical Standards Consultation* <http://www.scotland.gov.uk/consultations/education/medicallyfit.pdf>
- Goffman, E. (1990) *Stigma* Harmondsworth: Penguin
- Hjörne, E. and Säljö, R. (2004) 'There is something about Julia: Symptoms, categories and the process of invoking ADHD in the Swedish school: A case study'. *Journal of Language Identify and Education*, 3, 1, 1-24.
- Lash, C. and Urry, J. (1993) *Economies of Signs and Space* London: Sage Publications.
- Oliver, M. (1990) *The Politics of Disablement* (Basingstoke, Macmillan).
- Riddell, S., Brown, S. and Duffield, J. (1994) Conflicts of policies and models: the case of specific learning difficulties, in: S. Riddell and S. Brown, (Eds.) *Special Educational Needs Policy in the 1990s: Warnock in the Market Place* (London, Routledge).
- Riddell, S., Baron, S. and Wilson, A. (2001) *The Learning Society and People with Learning Difficulties*, (Bristol, Policy Press).
- Riddell, S., Tinklin, T. and Wilson, A. (2005) *Disabled Students in Higher Education* (London, RoutledgeFalmer).
- Riddell, S., Banks, P. and Tinklin, T. (2005) *Disability and Employment in Scotland: A Review of the Evidence Base* Edinburgh: Scottish Executive
- Stone., D.A. (1984) *The Disabled State* (Basingstoke, Macmillan).
- Tomlinson, S. (1982) *A Sociology of Special Education* London: Routledge
- Watson, N. (2002) 'Well, I know this is going to sound very strange to you, but I don't see myself as a disabled person': identity and disability, *Disability & Society* 17, 5, 509-529.

**Table 1: Number and percentage of disabled and non-disabled teachers on the Teacher Induction Scheme in Scotland, 2002-2006**

Year	Disabled teachers	Non-disabled teachers
2002	12 (0.59%)	2,009 (99.4%)
2003	6 (0.3%)	1,808 (99.7%)
2004	16 (1.2%)	2,018 (98.8%)
2005	24 (0.89%)	2,670 (99.1%)
2006	31 (1.1%)	3,509 (98.9%)

Source: General Teaching Council for Scotland, 2007