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Disabled Students in Higher Education: Discourses of Disability and the Negotiation of Identity

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Running head: Disabled students in higher education

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Abstract

University is a critical arena for young disabled people in the construction of an adult identity and in obtaining higher level qualifications which have a major impact on future labour market opportunities. In Scotland, statistics show that there has been a steady increase in the proportion of students who are disabled. However, adopting the identity of a disabled person at university is far from straightforward, in part because of the conflicting discourses surrounding disability which are encountered. This article draws on data from a project on the experiences and outcomes of disabled students in UK universities, focusing on a case study of a particular student undertaking an initial teacher training degree in a Scottish university. The article illustrates the way in which positive and negative discourses of disability, reflected in learning, teaching and assessment practices and work placement experiences, impact on the identity of the student. The article also illustrates the importance of the social context in which disability is experienced. Whilst the student chooses to adopt the identity of disabled person during her time at university, this identity is rejected when she moves into the workplace. This is because the benefits of being identified as a disabled person at university outweigh the negative aspects, whilst in the post-university environment the reverse is the case.

Introduction

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 article, 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 (see below), 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 article draws on data from a research project funded by the Teaching and Learning Research Programme (Fuller et al., 2009). 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 for that institution and the sector generally 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 and observations of the students in particular learning contexts, such as seminars, lectures and laboratory work. The sample of case study students was selected in order to reflect the social profile of students within that particular institution.

This article presents a case study of a student undertaking an initial teacher training programme at a Scottish university. The case study was based on five interviews with the student during the course of her four year programme, six interviews with lecturers and three observations of the student in different learning environments. In this article, the following questions are addressed:

- How does the student understand their disability and how does this understanding appear to have evolved during the course of their school and university education?
- At what point has the student chosen to disclose and why?
- What impact has the wider institutional and social context had on the decision to disclose a disability?
- Do ideas about 'fitness to teach' appear to have had an impact on the student's decision to disclose a disability?
- What has been the effect of disclosure on the individual's access to reasonable adjustments in the university and work placement?

The UK higher education environment

Over the past two decades, higher education in the UK has transformed from an elite to a mass system, with a significant reduction in per capita funding. At the same time, new public management has grown in influence, reflected in accountability regimes such as the Research Assessment Exercise and Teaching Quality Assessment. Managerialist techniques have also

been used to promote equality. For example, universities are now required to return information to the Higher Education Statistics Agency on the number of disabled students in specific categories and premium funding is awarded on the basis of the number of students claiming the Disabled Students' Allowance. From 2006, universities have also been required to produce disability equality schemes, establishing milestones and targets to chart institutional progress towards greater equality for disabled staff and students. Managerialist methods have thus been used to provide both sticks and carrots to the promotion of equality for disabled students. These require systems to be in place to distinguish between the disabled and non-disabled student populations, which are likely to have knock-on effects on students' construction of self.

Universities' duties to avoid discriminatory practices were given a strong push forward by the implementation of Part 4 of the Disability Discrimination Act (DDA), which came into effect in 2002. The legislation has far-reaching implications in terms of its requirement for reasonable adjustments to be made to the curriculum, pedagogy and assessment, but in order to claim their right to such an adjustment, an individual student must be able to demonstrate that he or she is disabled. Depending on the nature and cost of the adjustment which is required, students may be eligible for the Disabled Students' Allowance. Under the terms of the Act, a person is disabled if he or she has a physical or mental impairment which has a substantial and long-term adverse effect on their ability to perform normal day-to-day activities. A medical certificate is generally required to prove that a student has a particular impairment. Students are given the opportunity to disclose a disability when they first apply for admission to the institution or at a later point, since it is recognised that a student may become aware of an impairment, or may develop a condition for the first time, during their time at university. Drawing a binary divide between disabled and non-disabled students is thus incentivised at the level of the institution and the individual student. The nature of the categories employed is discussed below.

The profile of disabled students in higher education

As noted above, when students apply to study at UK universities, they are requested, but not required, to provide information on their disability status. The university application form includes nine categories of impairment of different order; some are medical or quasi-medical categories (e.g. blind/partially sighted, dyslexia), whilst others relate to the type of support needed by the student (e.g. personal care support). The last three categories (unseen disability, multiple disabilities or other disability) are very broad. At the point of application, students

simply self select the category which they think best describes their condition, although, as indicated earlier, they are required to provide medical evidence if they wish to claim additional financial support through the Disabled Students Allowance. Perhaps as a result of the financial incentive to disclose, the proportion of disabled students in UK higher education institutions over the past decade has almost doubled (see Table 1).

TABLE 1 ABOUT HERE

The composition of the group has also changed, with a considerable rise in the number of students disclosing dyslexia. In 1994/95, 15% of disabled students were known to be dyslexic; in 2002/03 the proportion had risen to 49%. Over the same period of time those in the category ‘unseen disability’ decreased considerably

(www.hesa.ac.uk/holisdocs/pubinfo/student) (see Table 2). The National Working Party on Dyslexia in Higher Education (1999) attributed these changes to (i) earlier identification in the school population, (ii) support through the Disabled Student Allowance (DSA) and (iii) the increase in mature students through wider access policies, who may not have had their dyslexia detected at an earlier stage.

TABLE 2 ABOUT HERE

Scottish Government statistics show that boys are twice as likely as girls to be identified as having dyslexia (Scottish Government, 2011) and, although not quite as marked, this over-representation of males is also evident in higher education. The incidence of dyslexia has increased in both male and female students as can be seen from Table 3.

TABLE 3 ABOUT HERE

Analysis of HESA statistics demonstrated that students with a diagnosis of dyslexia were not only significantly more likely to be male, but were also more likely to be middle class (Riddell et al., 2005a). This is in line with the association between dyslexia and social class and gender in school education (Riddell et al., 1994). It is evident, therefore, that dyslexic students in higher education are a relatively socially advantaged group on a number of dimensions.

There is considerable variation in terms of the proportion of disabled students in particular subject areas in relation to the nature of their impairment (see Table 4).

TABLE 4 about here

For example, 17.6% of students with a diagnosis of dyslexia study creative arts and design subjects and 11.8% of all students who disclose a mental health difficulty. Medicine, dentistry and veterinary science appear to have a low proportion of students with any type of impairment. Education does not appear to include any students with a mental health difficulty.

Disabled graduates and identity

Within social science, there is currently much interest in the ways in which individuals develop and negotiate their sense of self over the life course. In contrast with earlier accounts which saw identity as a stable expression of an individual's position within wider economic and social structures, theorists of late modernity (for example, Beck, 1992; Lash & Urry, 1993) have questioned the notion of an essential self, emphasising instead the self as a social construct, constantly defined and redefined in a range of social contexts. Students wishing to claim the Disabled Students Allowance (DSA) and receive reasonable adjustments in teaching, learning and assessment are required to disclose disability to the university and to have this officially endorsed. However, recent research on the experiences of disabled undergraduates (Riddell et al., 2005a; Fuller et al., 2009) indicates that, even when an individual discloses a disability to the university in order to receive reasonable adjustments, there may remain some degree of reluctance to acknowledge disability as a key part of that individual's identity. This is in line with findings of researchers such as Watson (2002), who has argued that individuals with an impairment may choose to identify as disabled for reasons associated with identity or administrative convenience, but may also choose to pass as normal in order to avoid discrimination and stigma. As disabled graduates move into the labour market, even though they may continue to report long-term illness or disability in anonymised surveys, there may be even greater jeopardy in disclosing disability in the workplace. Disability, then, may be used almost as a 'flag of convenience' to be jettisoned at a point when its disadvantages outweigh its advantages. This article considers the extent to which disability is disclosed or concealed during an individual's schools experience, at university and during work placement. Students' thoughts about disclosure to future employers are also considered. The impact this has on individual identity and the availability of reasonable adjustments are also explored.

Discourses of disability 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 Saljö, 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 & Prins, 2001) and the UK (Riddell et al., 2005b), 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 are geared to reducing the proportion of disability benefits claimants and have intensified in the aftermath of the economic crisis. 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 which has 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 pressurising 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 is 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 formalised 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. By way of contrast, 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.

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 5.

(Table 5 about here)

The case study which we present below is of a student with a diagnosis of dyslexia on a BED course at a time when the fitness standards were still operational, although these were abolished during the course of her four year period of study. The experiences of students with 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 study illustrates the individual's profound ambivalence in relation to the category, and the way in which the external environment is critical in terms of permitting or precluding disclosure.

Disabled students and the management of identity: Case study of a student teacher with a diagnosis of dyslexia

Jean¹ was a married mature student with a family who had decided to return to higher education to study a course which would allow her to find local employment. Her husband, 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.

Identification of dyslexia

¹ This is a fictitious name to ensure anonymity.

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 ...'

She was thus provided with support of some kind, but this was not formalised. 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 staff supporting disabled students 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 ...

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.

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.

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 student support 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.

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, her personal advisor was expected 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.

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?'

Lecturers within the department 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)

Others felt that the university lecturers themselves were sometimes deficient in their knowledge of disability issues and the values which they were modelling 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)

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].

Jean 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."

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 personal advisor in relation to disclosure and whether she really ought to be a teacher:

I spoke to her [advisor] 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.

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.

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 ...

... [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.

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'

Discussion and conclusion

We began this article 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. 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 to establish disability as a political category by promoting positive images of disabled people, drawing on discourses of difference rather than deficit and focusing on an individual's environment, rather than their impairment, as the direct cause of disability. Clearly, these competing discourses 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. The interplay of discourses also affects the way in which social institutions such as universities construct disabled people.

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 suggest that it will be some time before the implications of this decision are fully understood by the teaching profession.

The case study of Jean illustrates the contradictory position of different actors towards, in this case, a person with a hidden impairment. At school, Jean learnt that additional support for learning may be helpful in terms of developing necessary literacy skills, 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 disadvantages outweighed any benefits. As illustrated by the data in Table 5, 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.

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Table 1. Students in higher education with a known disability (first degree programmes)

Year		Number of students	Total known to have disability	Percentage
1994 – 95		323011	11162	3.5%
2002 – 03		351805	21285	6%

Table 2. Categories of disability used by HESA and percentages of undergraduates in each category in 1994/95 and 2002/3

Type of disability	1994/95	2002/03
Dyslexia	15%	49%
Blind/partially sighted	4%	3%
Deaf/hard of hearing	6%	4%
Wheelchair/mobility difficulties	6%	3%
Personal care support	0.1%	0.1%
Mental health difficulties	2%	3%
An unseen disability	53%	23%
Multiple disabilities	5%	4%
Other disability	10%	11%

Table 3. Male and female students self-identifying as dyslexic (first degree entrants 2002-2003, full-time)

Total number male students*	Total number of male students with dyslexia	%	Total number of female students	Total number of female students with dyslexia	%
146240 (9905)	5535	3.8 (56)	169910 (9705)	4390	2.6 (45)

Table 4: Percentage of students in subject areas by disability category (undergraduates only)

	No known disability	Dyslexia	Blind, partially sighted	Deaf, hard of hearing	Mobility difficulty	Mental health	Unseen	Mult. disabilities	Other disability
Medic/dentist	2.3	1.1	1.6	1.2	-	-	2	-	1.2
Allied to medicine	13.4	7.6	6.4	10	4.3	4.6	10.2	5.6	7
Biological sciences	5.3	6	4.5	4.2	4.7	5.8	6.9	5.5	5.8
Veterinary sciences	0.3	0.2	-	-	0	0	0.1	0	-
Agric. & related	0.8	2	-	0.7	0.9	-	1.4	-	0.9
Phys. sciences	4	5.5	4.4	4.2	2.6	3.6	5.2	4.8	4.6
Math.	1.2	0.7	1.3	1.1	-	-	1.5	-	1.1
Comp. science	5.6	6.3	7.6	6.1	7.9	5.1	5.2	7.3	5.8
Eng. & technol.	7.3	9.2	6.7	5.6	3.5	5	6.8	7.3	5.9
Architect., building and planning	2.4	3.1	1.6	1.8	1.7	-	2.2	1.6	2.2
Social, eco., political	7.3	8.5	10	8.4	12.1	7.5	7.5	11.1	9.7
Law	3.2	1.3	3.7	2.4	4.2	2.9	3.6	4	3.7
Business & admin	11.8	8.9	10.4	7.5	6.7	3.8	9.7	9.5	9.3
Librarianship and info sciences	1.4	1.4	1.2	1.2	1.7	-	1.9	2.3	1.7
Languages	5.8	2.2	5.7	5.6	6.1	9.1	5.9	3.7	5.6
Humanities	3.4	4.4	4	5.6	6.1	8.3	3.9	6	5.9
Creative arts and design	6.6	17.6	6.5	8.7	7.2	11.8	8.8	10.6	8.9
Education	4.6	3.5	3.5	4.2	2.7	-	4.8	2.5	3.4
Combined / invalid code	13.2	10.3	20.3	21.3	26.1	25.8	12.5	16.4	17.2

Source: Riddell et al, 2005 based on analysis of HESA statistics for academic year 1999/2000

Table 5: 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