

Infusing disability studies into professional practice: Perspectives and strategies

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Abstract

The authors support role changes for educational practitioners who work with children and youth with disabilities as they make important transitions.

Principles from critical pedagogy and disability studies are summarized to provide a new theoretical framework to support role changes. Rather than needs-based services that focus on helping those with disabilities cope with deficits, the authors support an empowering person-centered, strengths-based orientation that allow educational practitioners to perceive the their clients as competent and complex. Recommendations for transition consultants, school psychologists, and researchers are outlined to encourage more widespread implementation of the principles of critical pedagogy and disability studies.

Principles derived from critical pedagogy and disability studies provide the theoretical framework for the proposed shift in roles that change the basis upon which consulting services are provided. Rather than needs-based services that focus on helping individuals with disabilities cope with deficits, this paper supports an empowering person-centered, strength-based orientation tied to perceptions of the individual as competent and complex. The authors offer recommendations for transition researchers and practitioners that could result in more widespread implementation of the principles of critical pedagogy and disability studies. This topic is especially relevant to the authors given their personal and professional experiences. Both authors are professors of education. Both authors have disabilities. Both authors bring a

professional prospective of teaching and research in special education and personal perspectives in terms of receiving advice on behalf of their own unique needs (one for binaural hearing support and the other for mobility issues). Both authors have advocated on behalf of themselves and their special education constituents with a sense of the social history and context of how society deals with disability.

We have two purposes: a) to share the results of a synthesis of the literature and b) to explore the impact of infusing disability studies and critical pedagogy concepts into the realm of professional practice. The context of providing educational and psychological services has been dominated by a paradigm which lead to treating students and youth with challenging academic and behavioral behaviors within a deficit-based medical model rather than a client-centered, strengths based approach. Principles of disability studies and critical pedagogy as well as principles of self-determination are offered as alternative paradigms, along with applications for consulting psychologists, therapists, and social workers (Fleischer & Zames, 2001; Thousand, Diaz-Greenberg, Nevin, Cardelle-Elawar, Beckett, & Reese, 1999; Kliewer, 1998; Linton, 1998).

Method

The authors synthesized the core concepts from critical pedagogy (Freire, 1972), disability studies (Linton, 1998), critical psychology (Fox, 1997), and self-determination (Palmer & Wehmeyer, 2003) to help consultative professionals think differently about how they can transition from the traditional deficit-based treatment model to an emerging strengths-based person-centered supportive model.

Data Sources

A review of the literature comprises the data sources. An increasing number of

studies support the client centered support not only as effective but as advancing a social justice agenda in the educational and social service systems (Barrie & McDonald, 2002; Hapner & Imel, 2002; Artesani & Mallar, 1998; Colley & Jamieson, 1998; Cooney, 2002; Darder, 1995; Diaz-Greenberg, 1997; Field, 1996; Jackson & Panyan, 2002; Janney & Snell, 2000; Katsyannis, DeFur, & Conderman, 1998); Kliewer & Biklen, 2001; Kratochwill, & Pittman, 2002; Kluth, Nevin, Thousand, & Diaz-Greenberg, 2002; Love & Malian, 1997; Lovett, 1996; Malian, & Nevin, 2002; Palmer & Wehmeyer, 2003; Patel, 2003; Prilleltensky, & Nelson, 1997; 2004; Smith, 2000; Thoma, 1999).

Results

In several important respects, the synthesis from various social justice strands of different disciplines promotes a social justice agenda among collaborators with diverse professional backgrounds for the benefit of people with disabilities who need support rather than “treatment” from those who are paid to assist them in living the life of their choosing with full citizenship. The shift to a disability studies perspective may have the potential to make significant contributions for educational and psychological consultants to change the impact of professionalism on the outcomes for people with disabilities. The common approach frames the conversation as a dichotomy—needs-based services versus strengths-based services—where the individual is viewed from the perception of a deficit model, albeit moving toward a competency model.

First, we can acknowledge and search for our various professional and personal identities. Such a search could assist in a shift from the current deficit medical type orientation to a more liberatory strength-based, person-centered orientation. As shown in Figure 1, the eye with which consultants see individuals with disabilities can have scotomas (blind spots) that come from their traditions and can, therefore, blind them to

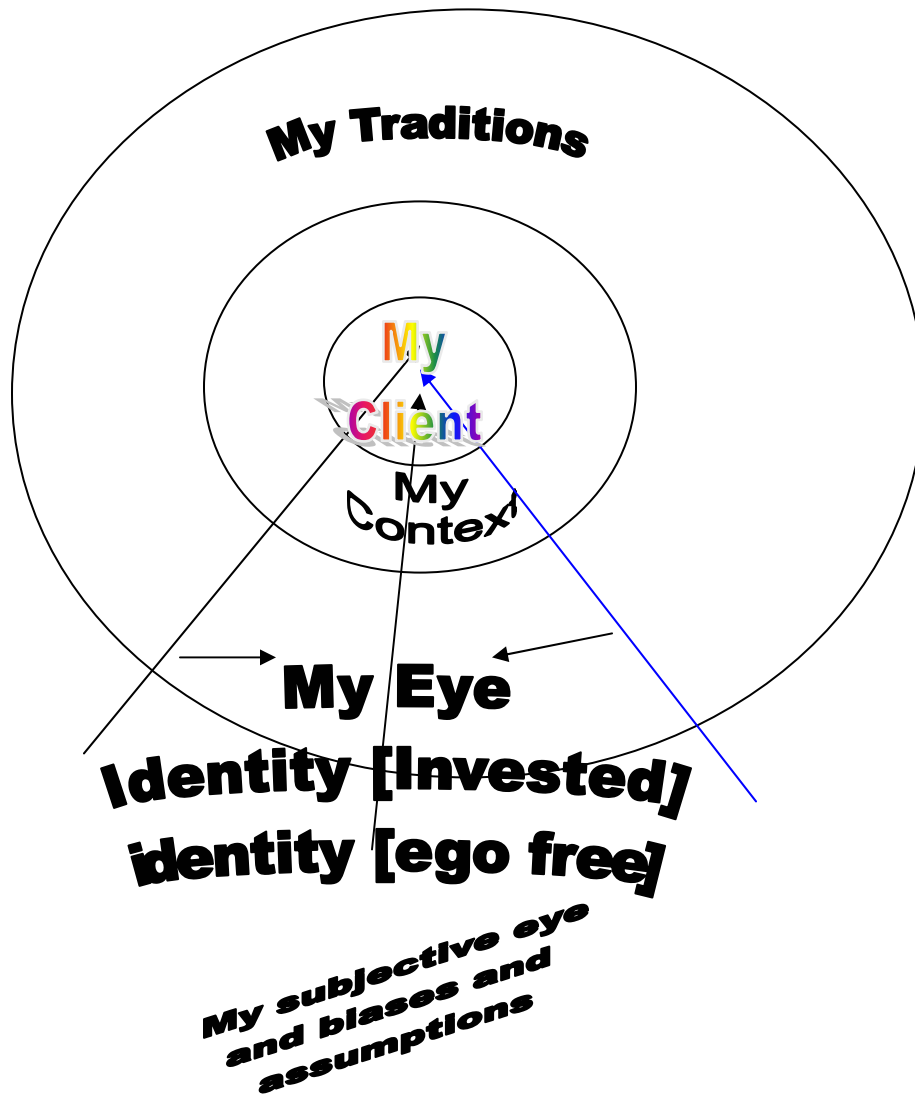
see the individuals' strengths, talents, and capabilities.

One source of influence that leads to blind spots is the tradition of disciplined inquiry (Eichelberger, 1989), a paradigm in which consultants have been schooled to view their clients. How might professionals work within these seemingly opposing traditions and perspectives to decrease the focus on problems and struggles and increase the focus on problems as a vehicle for growth and change? We can be vigilant of our language. We are aware of the influence of our own educational histories and especially our unique disciplined inquiry traditions. Logical positivism and reinforcement theory formed the basis of one author's (Nevin) early career in special education, whereas a critical theory and disability studies view formed the basis of the other author's (Smith) research career. In fact, Smith and Nevin are well versed in the research paradigms that provide the foundations of the knowledge derived from these apparently diametrically different perspectives. In our own practice of teaching special educators at the graduate and undergraduate levels, we understand that one of our identities can be represented with a capitalized I—Invested Professional Identity—especially with respect to ensuring that teacher candidates learn what we deem to be effective teaching practices. Our other identities, however, include the un-capitalized “i,” which means identity without ego (i.e., ego-free identity), and the physical eye with which we see. Each eye/I/i influences what is seen as well as how we choose to interact with the individual client.

A second strategy to confront or ameliorate blindspots is to use mental flexibility to identify scotomas or blind spots. Once blind spots are identified and corrected, consultants can be more flexible as they interact and communicate with consultees and

clients. Consultants and consultees can perceive the individual with disabilities either as 90% disabled and 10% capable or 90% capable and 10% disabled, a phenomenon Van Der Klift and Kunc (2002) referred to as disability spread.

FIGURE 1 How my eye, I, and i influence my interactions with clients.



A third strategy for removing blindspots is to question the assumptions underlying our practices. Identifying one’s own assumptions can lead to a realization of how one’s own perspective might be interfering with the perspective of the client. In

this strategy, the client and the consultant both write or speak about their respective perspectives of the client and consultant to identify possible mis-matches and to generate new questions to pose, as shown in Table 1.

Table 1. New Questions to Pose

I/Eye	Definition	Useful (New) Questions to Pose
Invested Professional Identity I	The eye through which I see The I that takes the lead	How does my role influence my assumptions about the person and potential? How can I follow?
Compassionate I	Helps and over-helps (help the individual “should” want)	What does the individual think, feel, and want?
“There but for the grace of God go I...” I	Pity	What is great about the individual’s life? What are the aspirations, joys, and dreams?
Curious I	Share inquiring mind	How can I be of service? How can I go on a path with you?
Reciprocal I	Collaborative	How can/will we collaborate? How are both our lives enriched by this relationship?
Empathetic I	Perspective changing	How does the individual perceive life?

A fourth strategy is to learn new traditions. Consultants and other professionals can change their views and traditions through their own eyes by learning new research paradigms, new therapies, and new interventions, thus potentially changing their professional identities. Literature and research on the effectiveness of liberatory education, student-led IEPs, self-determination curricula, positive behavioral support, and person-centered planning can inspire school professionals and their university educators to take more empowering perspectives, as shown in Table 2.

Table 2. Brief Summary of Key Research

Author (Date)	Pedagogical Tools related to Liberatory Education
Kluth, Nevin, Diaz-Greenberg, & Thousand (2002) Darder (1995) Diaz-Greenberg (1997)	Dialogue teaching-- students themselves help to generate the curriculum, designing their own instructional methods and reporting their progress within a framework of consciousness-raising group dynamics. Critical literacy-- students become self-advocates—for example, by watching videos or films of people with disabilities and/or life-situations similar to their own through a brief autobiography.
Field (1996) Malian & Nevin (2002) Palmer & Wehmeyer (2003) Thoma (1999) Whitney-Thomas & Moloney, (2001)	Student-Led IEPs and Self-Determination Curricula
Jackson & Panyan (2002)	Positive Behavioral Support
Falvey, Forest, Pearpoint, & Rosenberg (2002)	Person-Centered Planning

When consultants perceive the person who is at the center of planning as the chief expert, they do not offer their expertise but instead offer their skills to support the person. They become collaborators *with* the person. When the person is challenging and inarticulate in the way they communicate, the consultants can become detectives to figure out how to understand what the underlying communicative intent of that person is.

Accountability within the new paradigm includes evoking what the individual’s wants are and how the individual wants to feel when receiving services. Consultants with the perspective we describe are more likely to use their curious eye/I to discover the answers to questions such as, “What do you want from your consultant, therapist,

coach, or support person?” They might hear their clients voice such concepts as, “I want respect, authenticity, collaboration, information, options, brainstorming, and a great life!” Seeking the supports that create “great lives” releases educational and psychological consultants from the double bind of “empowering” someone they seemingly have power over toward creating a more collaborative model of shared power.

Discussion

The integration of these conceptual frameworks can set the context for raising different questions and seeing different avenues to explore with regards to consulting with and educating people with disabilities. For example, different accountability questions emerge. Accountability is transferred from institutions to individuals; that is, the consultant becomes accountable to the person being supported. Results are framed in terms of quality of life outcomes rather than institutional outcomes.

When the person with the disability (formerly known as “the client”) is a dynamic member of the transition or educational planning process, that person is considered the “expert” on his/her life’s issues. The support consultants are experts in problem solving that leads the person to ask for and receive more beneficial and self-determined outcomes for him/herself. Research from varied areas of expertise shows that when educators and helping professionals listen carefully and take into account the whole context of the person, communication becomes more authentic and the results become more coherent (e.g., Jones & Jones, 2001; Kliwer, 1998; Ladson-Billings, 1994; Lovett, 1996). More coherent results mean that the individual gains skills and supports to negotiate typical organizational barriers that arise because of the segregated nature of many support

systems and the gate-keeping functions that limit access to services such as vocational rehabilitation and post secondary education.

We propose a new goal to maximize all of our capabilities in ways that are ecologically and ethically coherent, where we as consultants ask new questions such as,

- Does what I am doing promote working with the entire person to support access to important resources, interactions with same age peers, and other behaviors that lead to self-determination for individuals with disabilities in transition?
- Does what I am doing take into account the social context of problems that arise and promote social justice in transition situations?
- Am I respecting the person in front of me as a complex and interesting human being that is part of a naturally diverse population (as opposed to “normal/not normal”)?

When in our roles as educational and psychological consultants, we answer “Yes!” to questions such as these. As consultants, we would then be really listening to those with disabilities, those like Norm Kunc (personal communication, July 17, 2003), who reminded us, *“I am part of the normal distribution! I am not broken!”*

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