Editorial

Thank you to everyone who has contributed articles to this edition of the Journal of Inclusive Practice in Further and Higher Education. Once again the quality of the pieces is to be commended and range from hate crime to existential considerations of disability. Submissions with such a high level of academic content will, I am sure, help to enhance the reputation of the journal as we progress. I apologise to all the submitters for the lengthy delay in publication but hope that the editorial board can be forgiven as we offer our time on a voluntary basis.

In this edition Pritchard’s article highlights a problem which seems to be unconscionably prevalent in society. Hate crimes against disabled people are well documented and there have been recent welcome moves by the legal professions to tackle these issues. Pritchard discusses the links between dwarfism, hate crime and vulnerability and offers suggestions for disability practitioners in education. I am left wondering if we do enough to stop bullying from occurring and how much we create an open atmosphere in our organisations so that students feel able to come forward for support.

In higher education in the UK, dyslexia and other specific learning difficulties, are by far the most statistically recorded group of disabled students and it is no surprise that we have published three articles on this subject. Green highlights the difficult area, both for students and staff, of how to handle disclosure in placement settings. Students are left with a dilemma about disclosing as they fear discrimination but if they do not disclose, any difficulties which arise cannot be ‘adjusted’ for. Assessment of specific learning difficulties (SpLD) is the topic of the two other articles submitted in this area. Smythe presents an extremely welcome international dimension to the journal. Alongside, the differences in educational systems he highlights the problems with culturally specific assessment tools but provides suggestions for ways ahead in his own country of South Africa. Thomas et al examine the notion of executive functioning (EF) and the role it could play in helping assessment and diagnosis of SpLDs. They also point out that because EF is a more global category of cognitive functioning and there are potential overlaps between SpLDs, it could be used in more inclusive discussions of support which might be provided to all students.

Cameron’s plea for us to reject the ways in which others construct meanings of the experiences of disabled people is apposite in the current UK context. In doing so we might find a way of living with the absurd but at the same time re-define others’ responses. In times of major policy changes it can feel like we are working with absurd decisions which define the approach we take to our work. Recent announcements by Government in the UK have suggested that the main funding source for the support of disabled students in HE will be removed. We can define this as a major threat or embrace it as an opportunity to drive forward inclusive practice. I just wish I did not feel like I was looking into the existential chasm as often as I do at the moment!

Lastly, I wanted to say thank you to Nicki Martin for submitting such a personal piece on the support she received during the loss of her son. The thoughts of myself and everyone involved with NADP are with you, as always.

Mike Wray
Co-Editor
Contents

3 The notion of vulnerability in relation to disability hate crimes and the experiences of dwarfs - implications for colleges and universities
Erin Pritchard

14 Keeping secrets: a case study of students’ disclosure of dyslexia and dyspraxia on application for a work placement
Alison Green

22 Examining intellectual prowess, not social difference: removing barriers from the doctoral viva for autistic candidates
N. Chown, L. Beardon, N. Martin & S. Ellis

36 Supporting students with specific learning difficulties in higher education: a preliminary comparative study of executive function skills
M. Thomas, N. Williams & A. Kirby

48 Establishing a blended assessment of dyslexia in South Africa
Dr Ian Smythe

58 Compassionate Balliol
Dr Nicola Martin

61 Disability, Normality and Absurdity
Colin Cameron

66 Editorial Guidelines
The notion of vulnerability in relation to disability hate crimes and the experiences of dwarfs - implications for colleges and universities

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Abstract

There is growing concern within the UK around violence against disabled people and this is relevant to staff working with disabled students in colleges and universities. The aim of this paper is to demonstrate how dwarfs are often targets of violence, due to their perceived vulnerability, and how the perpetrators usually go unpunished. Data is taken from doctoral research using semi-structured interviews with dwarfs from across the UK. The paper defines notions of violence, hate crime and vulnerability and explores these ideas in relation to the experience of dwarfs interviewed as research participants, and the response of the police. Overall this paper suggests that crimes towards dwarfs are affected by their vulnerability and not necessarily by hate. Disability practitioners need to understand the lived experience of students without over generalising in relation to a specific impairment label.

Keywords: Dwarfs, Disability Hate Crime, Vulnerability, Police, Environment

Introduction

Dwarfism results in a person being no taller than 4ft 10” and having a medical condition (Adelson, 2005). Depending on the type of dwarfism a person’s body is either disproportionate or proportionate. Dwarfs whose bodies are disproportionate have a torso of average size but short arms and legs, this is apparent in conditions such as, Achondroplasia. Dwarfs who are proportionate appear only to be small in stature, their arms, legs, trunk and head are in the same proportion as an average size person, only small and they can also have underlying medical conditions.

The correct term to use to refer to someone with dwarfism is often contested and the preferred name for someone with dwarfism ranges from, dwarf, person with restricted growth, person of short stature and little person. In my doctoral research, results showed that some participants liked the term dwarf and disliked little person, others preferred restricted growth but did not like dwarf and so on. The majority of participants preferred the term dwarf or did not mind the term. The term dwarf is also the most common term used both medically and socially when referring to someone with dwarfism. Despite this some people contest the use of word dwarf due to its relation to mythology. Similarly, the term little person can be used to refer to a Leprechaun or a child (Adelson, 2005). The term little person, which was coined by the association, ‘Little People of America’ is very popular in the USA but less so in the UK where the term dwarf is still widely used. In regards to little person, restricted growth and short stature, I considered these terms to refer to someone who is just short and not a person who has any of the medical conditions known collectively as dwarfism. In relation to the word midget, it has never been used as a medical term, but originates from the Freak show era and considered offensive by most dwarfs. Kruse (2002) points out that the word midget to refer to someone with dwarfism is similar to using the word nigger in reference to people of African descent.
While the study presented here is very clear that everyone is an individual and the narratives presented by its participants cannot be over generalised, it is true to say that there is growing concern within the UK around violence against disabled people. Quarmby (2011a) present a striking number of hate crimes against disabled people living in UK. In 2005, for the first time, disability hate crime was recognised by the criminal justice system under the Criminal Justice Act (CJA) 2003. Violence towards disabled people is classed as a disability hate crime, which is any criminal offence perceived by the victim or any other person, as being motivated by prejudice or hate (Piggott, 2011). Although there is no official legal definition, disability hate crimes are defined by the Crown Prosecution Service as (CPS 2007, p.7 in Roulstone et al., 2011a, p.353):

*Any incident which is perceived to be based upon prejudice towards or hatred of the victim because of their disability or so perceived by the victim or any other person.*

In this definition, the notion of vulnerability is not taken into account. Scope (2008) suggests that when a person with a physical or visual impairment is targeted by a criminal, such as street robber, it is because they are seen as unable to fight back. The term ‘hate crime’ is arguably a barrier to the understanding and recognition of hate crime. ‘Hate’ is a powerful and emotive word and many people find it difficult to relate it to disabled people (Scope, 2008). The law is based on ideas and practices that presume ‘ablebodieness’ (Piggott, 2011), therefore may fail to take into account how issues of disablement and a person’s impairment can make them a more vulnerable target. The term ‘hate’ itself is very emotive and hate may well not be the motivation for the often low key frequently repeated forms of bullying and intimidation that disabled people experience (Roulstone et al., 2011, p.354).

There are a number of factors which limit prosecutions, including disabled people not reporting crimes and inaccessible police stations and court rooms (Scope, 2003, Edwards, 2013). A key factor in limiting prosecutions is the legal construction of disability hate crime and notions of hate in opposition to notions of targeted vulnerability. As the law constructs hate crime as distinct from crimes targeted at those perceived to be vulnerable (Roulstone et al., 2011b) the term ‘hate crime’ itself may be a barrier to understanding and recognising a crime committed towards a disabled person, if the crime has not been provoked by hate (Scope, 2008). The motivation to commit a crime may well deliberately take the form of targeting disabled people because of their perceived vulnerability (Roulstone et al., 2011b). If someone is targeted because they are seen as vulnerable then it may be difficult to prosecute, as a hate crime, if there is no sign of the crime being provoked by hatred. Bullying may be regarded as somewhere on a continuum which starts with mild teasing and ends with hate crime.

Some groups within society are arguably more susceptible to victimization as a result of their perceived vulnerability, social marginalization, or invisibility (Grattet & Jenness, 2001). Dwarfism is clearly a visible difference as the condition results in a person being no taller than 4ft 10” and potentially a visible target. People who are of average stature are unlikely to be physically threatened by a dwarf because in most cases they will tower over them. People with visible impairments are potential victims of hate crimes because they are visible, vulnerable and potentially easy targets (Roulstone et al., 2011b, p.351). Dwarfism also has strong cultural connections, often being depicted in the mass media as figures of fun. Vulnerability arising directly from small stature can interact with perception of dwarfs as funny and result in targeted unwanted attention. People with visible impairments have
described being subject to harassment and intimidation by members of the public in public spaces (Piggott, 2011).

Treating minorities the same way as other crime victims are treated does little to challenge underlying biases and stereotypes which may be held by criminal justice officials (Grattet and Jenness, 2001). A possible difference between some disabled people and other minority groups, who are also targets of hate crimes, is that the impact of some impairments can lead to vulnerability (being less likely to be able to fight back or defend themselves). Disabled people are much more likely to be targets for violence than other members of society (Waxman, 1991). For example, in their report Scope (2008) indicates that disabled people are twice more likely to be burgled than non-disabled people.

Crimes towards disabled people may not necessarily be provoked by hate, but rather through their perceived vulnerability. Calderbank (2000) questions whether or not abuse experienced by disabled people results from individual vulnerability, or as a consequence of social perceptions of vulnerability and pitiability. Arguably social attitudes towards visibly disabled people are more likely to be affected by their perceived vulnerability. Roulstone et al. (2011b) question whether disabled people are actually targeted because of their perceived vulnerability rather than the perpetrator being motivated by hatred. This paper provides some illustrative examples, demonstrating how dwarfs are targets of crime due to their small stature. Staff with an interest in campus safety would do well to be aware that the visibility of shortness makes dwarfs an easy target. Perpetrators are usually motivated by perceived vulnerability (rather than hate). Whatever their motivation, the realisation that dwarfs may experience this sort of oppression as students is uncomfortable.

The salutary example of Fiona Pilkington and her family, including her daughter Frankie who had severe learning difficulties merits discussion. They were the victims of constant abuse from local youths, which lasted several years and included property damage and abusive taunts. There is evidence that the situation was never taken seriously by the police, despite the number of reports made by Fiona which amounted to over thirty to which police and social services failed to respond. Fiona eventually killed herself and her daughter Frankie. In the case of Fiona Pilkington the police failed to view what was happening to her as disability hate crime, dubbing it antisocial behaviour instead (Quarmby 2011 b). When disabled people are victims of crimes, their actual or perceived disability related vulnerability should be considered as a potential catalyst for the crime. It would be useful to for staff (including counsellors) to reflect on this extreme example in relation to the potential for students with visible impairments to be subject to extremely damaging social interactions.

College and university estates are environments in which there is the potential for such negative interactions therefore it is important to consider policy, practice and procedures which contribute to feelings of safety and belonging. Colleges and universities are subject to the requirements of the Equality Act (2010) and their own policies around campus relations, bullying, intimidation and inclusion. Therefore, any actions which may be perceived as ranging from insensitivity to hate crime, are a cause for concern and the broader life experiences of students who are dwarfs, beyond higher education, are of interest. Research into disability related bullying in colleges and universities is limited. University and college staff need to be aware of the potential vulnerability of students who are dwarfs or have other visible impairments which may lead to the perception of their vulnerability on the part of potential bullies.
Research findings in this study have indicated that police showed very little or no response to the incidents reported. Arguably police and the criminal justice system need to take into account issues of vulnerability in order to afford dwarfs the protection to which they are entitled under the Equality Act (2010). It may also be pertinent to inform campus security staff of the potential for dwarfs, other students, visitors and staff with visible impairments, to experience the sort of oppression and discrimination described here. University and college staff committed to inclusive practice need to recognise the potential impact of othering behaviour which can, at a minimum, make students feel uncomfortable and excluded.

Methodology

The data used in this paper is taken from my PhD research with 22 dwarfs from across the UK. I used qualitative methods, including semi-structured interviews. The age of participants ranged from 19 to 68 years, with an average age of 31 years. Participants were recruited via organisations for dwarfs based in the UK. These organisations regularly hold events for dwarfs in various locations across the UK. I attended a range of such events for the purpose of participant recruitment. Snowballing was also used as, perhaps inevitably, participants knew other dwarfs with stories to tell. Interviews were either face to face or via telephone. One was a paired interview, the others were individual. All were carried out in a space and time convenient for the participants, mostly in the home, which provided a quiet environment which was unlikely to attract the unwanted attention of others. Visual methods were incorporated, which included showing pictures of several different spaces such as a high street and supermarket, as well as maps of the participant’s local area. Visual stimuli provided opportunities to discuss situations and places which participants may avoid as a result of spatial or social problems they may encounter.

Interviews were recorded with the consent of the participants and later transcribed. The data was then coded to draw out the main themes and sub themes. I used a thematic analysis approach to identify relevant themes through reading and re-reading each transcript (Fereday & Muir-Cochrane, 2006). Focusing on one research question at a time, I highlighted relevant information in each transcript to generate themes which would then help to answer each research question. Thematic analysis is the search for themes that emerge as being important to the research (Fereday & Muir-Cochrane, 2006). For the purpose of confidentiality all participants have been given pseudonyms. Prior to carrying out any fieldwork ethical approval was given by Newcastle University.

Disability hate crimes committed towards dwarfs

Disability hate crimes can take many forms, including physical attack, the threat of attack, verbal abuse and harassment (Scope, 2008). I want to show how experiences of verbal abuse and harassment are not necessarily motivated by hate, but through a dwarf’s perceived vulnerability. Most participants in the study spoke about how verbal abuse towards their short stature from other members of the public was a common occurrence. All disability hate crimes begin with verbal abuse (Clark, 2011). Often the verbal abuse participants received was linked to representations of dwarfs within popular culture.

These representations do not represent hatred towards dwarfs but rather often represent dwarfs as something comedic, such as mini-me in the Austin Powers movies or Disney’s seven dwarfs. Signs of hate crime can include: words or symbols associated with hate or demeaning jokes about a particular group (Sherry, 2003). Jokes towards participants ranged from being asked where the other seven dwarfs were to having the circus tune whistled at them,
indicating that the perpetrators found their dwarfism to be amusing and easy to ridicule. According to Shakespeare (1999) the comic stereotype of the dwarf is part of their cultural representation which shows them as the ‘other’. What is most striking though is some of the incidents a few participants mentioned, which involved threatening behaviour and can be considered hate crimes were not taken seriously by the Police. As Kayleigh points out she has been treated negatively by other members of the public as she feels they are unthreatened by her size:

*I have noticed as well that being physically smaller than other people means I am at much more risk and more vulnerable. I have had people come up and touch me inappropriately on the street and stuff like that and simply because they are larger than me and not threatened (Kayleigh, face to face interview).*

Kayleigh felt that because people do not feel threatened by dwarfs, it gives them the opportunity to treat them badly, forgetting all social rules, such as not touching people inappropriately. Several participants, including Kayleigh, spoke about how people had touched them for good luck, associating dwarfism with Leprechauns. It may not be a hate crime, but what touching Kayleigh inappropriately shows is that people see her as something associated with mysticism and are not threatened by her due to her size. Regarding dwarfs as amusing, and feeling unthreatened by their short stature, can lead to social rules about appropriate interactions being ignored:

*I have also had people taking pictures and one went to the extreme and I was crying inside the tube [London Underground]. This was a very bad experience. I was inside the tube and he just started taking pictures of me and I was alone in the tube so I moved and wanted to be behind a person so that he couldn’t take anymore photos of me but he just started screaming, ‘get in here, get in here, I want to take a lot of photos of you.’ I think he was a kind of sick person and there was nobody to help me. After a little time a few boys tried to come in front of me, I think they were trying to cover me up but he, this person he was a black person and he came quite close to them and asking them to move and I was really scared as I thought that somebody might get hurt so what I said was, ‘you know what if you want to take pictures, just take pictures’. I was just so upset and so scared. He then just started taking pictures again; it was just such unbelievable behaviour. It was the last stop that I wanted to get off at and he got off as well and he just started calling his friends and saying that he had more pictures for their collection...I felt helpless and there was nobody to help me out. Somebody told me later that I should have ringed the alarm but the alarm is too high for me to do it... I think the height makes a difference because if a tall person says it I feel so small and I can’t talk back. I feel like such a little person and I can’t fight back because he is too tall for me. I feel quite scared (Myraar, telephone interview).*

Myraar illustrates a very real example of poor design which impacted on her personal safety as she was unable to reach an alarm when she needed to. The situation was compounded by the fact that she received little help from the public in a situation in which she required support. Myraar told me about her stature being viewed as a source of amusement for a perpetrator who photographed her against her will saying he wanted ‘more photos for his collection’. Ignorance, rather than hatred precipitated his actions but for Myraar the outcome was the same.
The perpetrator wanting photos of Myraar because of her dwarfism is reminiscent of the Victorian freak shows. Photographs of ‘freaks’ (including dwarfs) portray otherness and were popular during the Victorian era (Garland-Thomson, 1997). Myraar was victimised by someone who thought of dwarfism as funny rather than by hatred of dwarfs. His action probably reflects something of a fascination of seeing a dwarf and wanting to share the encounter with his friends. Taking a photograph is not about hatred of dwarfs, but is about seeing them as the amusingly ‘freakish’ other. Of course, the photographer was much bigger than Myraar and therefore, had control of her. He exercised his control by treating her as public property. Myraar felt that because of her small stature she could not fight back and this scared her. It also shows that the perpetrator was not threatened by Myraar and could freely act in an inappropriate way towards her. Other participants provided similar illustrations and described feeling that people were not threatened by them because of their small stature.

Lack of response from the Police

Kayleigh attributes being perceived as vulnerable and unthreatening to being the victim of a crime, but also mentions how the Police failed to respond to the incident:

> Well, I know I was a victim of robbery because of my height. A year and a half ago I had somebody somewhere in my neighbourhood who had seen where I lived because I am very visible and he literally knocked on my front door and said, ‘I am a neighbour and I want twenty quid’. He stood over me with his German Shepherd which comes up to my nose. I gave him twenty quid and reported it to the Police and said it is never going to happen again. That was purely because he was larger than me and I am the same size as his dog. He knew where I lived and he tricked me into opening the front door because I had also vaguely seen him around and so I thought he had something to tell me like the shingle had fallen off the front of my house. I have seen him walk past but because I am so visible he knew what house I lived in and so you are vulnerable. It didn’t get counted as a crime because I gave him the twenty quid and the law didn’t recognise it as being a crime because of that. It didn’t take it into account my disability and my height and when you are telling this to somebody over the phone and reporting the crime and they can’t see you (Kayleigh, face to face interview).

It is apparent that the person, who extracted money from Kayleigh, used her small stature to his advantage. Taking his German Shepherd with him, a dog which was the same height as Kayleigh, increased her vulnerability. The victim of the crime felt that the police failed to recognise the disablist dimension of the incident. No action was taken against the perpetrator, despite the fact that he demanded money with menaces. If Kayleigh had not complied she risked putting herself in danger as she clearly could not fight back. The man may not have felt hatred towards Kayleigh but clearly saw an opportunity to exploit a person who was less likely to fight back. It may be more nuanced and accurate to regard the crime as being influenced by the person’s (disability related) vulnerability rather than as a disability hate crime. Whatever motivated the criminal the victim still had a horrible experience and the fact that no action was taken, means that there is nothing to stop the man from targeting Kayleigh again. Disabled people who report a hate crime are often ignored, and its perpetrators often go unpunished (Scope, 2008). This is despite the fact that if the victim believes an incident to have been motivated by their disability (as Kayleigh did) then the police are obliged to record and investigate it as such (Chakraborti & Garland, 2009).
Incidents of disabled people being targeted by groups of youths have been recorded and boredom and thrill seeking have been identified as motivators (Quarmby, 2011b). The majority of dwarfs interviewed described deliberately avoiding places where they knew there were groups of teenagers, as they were often targets of verbal abuse.

It was about seven in the evening and I went out with my old dog to the park. It was the park we had been in everyday it was a park where office workers would go for lunch but in the evening young people would go there to drink. There were six teenagers in the corner and they started shouting things and started getting more offensive, like ‘that dog is bigger than you, why don’t you ride it as a horse?’ I turned around and started to walk away. I started to feel a bit vulnerable because they were starting to walk over and one of them said, ‘I am going to follow you home, I think you need a good fuck and I want to shag you.’ It was a summer’s evening and it was light and something clicked in me, I was worried, it knocked my confidence. I walked to the local shop and I told them what had happened, I was shaking. I rang the Police and told them everything and he just said, ‘what do you want me to do about it?’ That was the Police response. There are a number of underage drinkers in a park, that’s an offence, secondly I was shouted at and thirdly it was of a sexual nature. He then said, ‘I don’t know if we’ve got anybody who could come out.’... I wouldn’t go to the park because that’s where I had that incident (Jade, face to face interview).

Jade was a vulnerable target in a sense that she was alone, of small stature and she was being tormented by a group of teenagers who not only outnumbered her but were all bigger than her. Again it is likely that the teenagers were not motivated by hatred but saw Jade as an easy target for their own amusement. The lack of response from the police shows that they may have not recognised Jade’s vulnerability, therefore failed to protect her, further increasing her vulnerability. Jade found the police unwilling to help her despite the fact that she told them about several criminal elements to the incident including underage drinking and sexual harassment. Again, like Kayleigh, Jade reported the incident over the phone and felt that she was not taken seriously.

Craig (2002) suggests that people who experience hate crimes may avoid the area where the incident took place in order to enhance their safety. Jade will not return to the park where she was victimised, and for a period of time moved away from the town where the incident took place. Her right to access public spaces as she chooses has been compromised. Disabled people should not have their freedom of movement restricted, particularly by the actions of those that wish them harm, and the criminal justice system would do well to be cognisant of this (Scope, 2008). Jade should be able to taking her dog for a walk in the park without fearing the actions of underage drinkers.

Joan and Steve, a married couple, who both have dwarfism, also talk about an incident involving a group of teenagers who targeted them at their home because of their stature:

**Joan:** We had eggs at the window and when we had snow we had a terrible, it sounds pathetic but it was frightening, they really threw snowballs hard at the porch and the whole house was...that was frightening

**Erin:** Was it just your house?

**Steve:** Yes.
Joan: Yes only our house, we were targeted.

Erin: And that is because of your height?

Joan: Yes.

Steve: Yes, definitely.

Joan: And the Police knew who they were but they couldn’t do anything until they actually saw them doing it.

Steve: Which they never did (face to face interview).

Targeting of visibly disabled people by those who are bored, loutish or dispossessed occurs every day (Shakespeare, 2010). Local teenagers victimised Joan and Steve on several occasions with their unwanted attempts at humour. Sometimes they would knock on the front door and when Joan or Steve answered they would then mock their height. Joan and Steve both felt that their vulnerability, rather than hatred towards them resulted in their becoming an easy target which provided the teenagers with something to do in the form of harassing them by laughing at their dwarfism. Steve and Joan were told that police have to witness perpetrators actually committing the crime in order to intervene therefore there was nothing they could to help. The couple have now joined their local neighbourhood watch in order to try and prevent any re-occurrences and possibly get some peer support from neighbours.

The visibility of the impairment can lead to targeting (Piggott, 2011). Dwarfism is a rare genetic condition which is highly visible and brings with it the fascination of novelty, due to its rarity, Joan and Steve, and Kayleigh they were the only people targeted within their neighbourhood. Kayleigh knew she was highly visible in her neighbourhood and this allowed the perpetrator to find out where she lived. This high visibility and lack of response from the Police increases their vulnerability.

Disability hate crimes in relation to colleges and universities

These examples could form a very useful part of any Disability Equality Action Training (which, by definition, must be delivered by a disabled person) aimed at students and others. At the very least, should such an incident, similar to the examples given, occur on campus, disciplinary action should follow, but pursuing prosecution would clearly not be disproportionate, if the victim felt able to consent. Student pranks could potentially result in similar incidents, especially in situations where little is done to promote disability equality and disability pride.

Fresher’s week of course is a time for drunken behaviour in which inhibitions may well be lost, therefore, dwarfs may be particularly vulnerable to the unwanted attention of others at this time. For students who have just left home and are feeling insecure, unwanted attention in the form of ‘funny comments’ which are really not so funny at all, will do nothing to foster a sense of belonging. Students’ Union and Residential Services staff may benefit from greater understanding of the potential for the sort of oppressive behaviour described here.

The potential implications for student life are obvious and point to the requirement for campus staff to be sensitively aware of the possibility of similar incidents at college and university. Security staff are not always included in disability focussed staff development and
this example may well illustrate the importance of making sure that they are. In relation to avoidance of particular spaces disabled students should be able to move around their own campus freely without unwanted negative attention.

Discussion

Cases of hatred towards disabled people have been largely ignored by the criminal justice system (Quarmby, 2011a). The examples given in this paper add to these failures. Evidence indicates that crimes towards disabled people are usually provoked more by the perceived vulnerability of the victim than by hatred towards them. It is very apparent that all of incidents reported were not taken seriously by the police or the police were unable to take any further action. Some victims felt unable to return to spaces where incidents took place. If the location was the home of the victim responses included joining Neighbourhood Watch. Campus safety is important to student welfare and it may be that some students with visible impairments feel vulnerable because of negative past experiences such as those described here. This is an issue for personnel at all levels and merits discussion within Disability Equality Action Training, which should be offered to all staff rather than just to those who are in obvious direct contact with students.

None the events described were motivated by hatred and in every instance perceived vulnerability was a factor. All of the perpetrators were strangers, therefore previous incidents were not the reasons victims were targeted. Indeed, many hate crimes are committed by people who are complete strangers to their victims (Sherry, 2003). Vulnerability connected to a dwarf’s short stature appears to have been disregarded by the police in the examples given here. College and university is a time of personal development and for forging new friendships and it is incumbent upon institutions to promote social inclusion. Unwanted attention and mocking behaviour may make people feel vulnerable and may well arise out of ignorance. Disability Equality Action Training and anti bullying policies and practices may go some way to addressing this concern. Any form of hate crime needs to be taken extremely seriously. Failure to recognise disability hate crime, when it occurs, is the biggest barrier to being able to tackle it, and students may need to be supported if they are unfortunate enough to become victims.

Olsvik (2006) suggests that there is a particular power aspect involved, in the sense that the abuser is usually stronger than the victim. The perpetrators knowing that they were stronger than the victim was apparent in all incidents that the participants spoke about. In some cases there was more than one perpetrator and this clearly increases the power imbalance between victim and perpetrator. Issues of vulnerability and perceived vulnerability need to be understood. The process of targeting is more closely allied to perceived vulnerability than to hatred (Roulstone et al., 2011). Increasing campus safety and promoting a sense of belonging may go some way to decreasing the actual or perceived vulnerability which can accompany visible impairment.

Conclusion

This paper has explored the experiences of disability hate crime and notions of vulnerability, in relation to the experiences of dwarfs. It has also taken into account the lack of response by the police which in most cases resulted in perpetrators getting away with their crimes. The research suggested that the police ignored notions of vulnerability rather than hate towards the victim and usually failed to proceed in dealing with the crimes. With a more nuanced understanding of the notion of disability hate crime, college and university staff would be better positioned to assist any students who fell victim to it, in whatever form.
The findings reported here were taken from a research project which did not focus exclusively on disability hate crime. Accounts given by participants suggested that further research is necessary to unpack issues of disability hate crime in relation to dwarfism specifically and visible impairment more generally. Personnel commissioning Disability Equality Action Training need to take into account that this has to be delivered by disabled people, based on the principle ‘nothing about us without us’. I have personal experience of being a university student and of being a dwarf. Please contact me if you need me to help you to make your campus safer and more inclusive.

References


Keeping secrets: a case study of students’ disclosure of dyslexia and dyspraxia on application for a work placement

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Abstract

Available evidence suggests that undergraduates with dyslexia or dyspraxia fail to disclose these conditions when applying for a work placement (Pennington, 2010). In order to update the limited research in this area and to investigate anecdotal reports from students returning from work placements, staff from the Additional Learning Support unit at Bournemouth University carried out a contemporary study. This qualitative research with 27 students identifies fear of employment opportunities being compromised by negative perceptions of neurodiversity held by placement providers. Lack of disclosure means that reasonable adjustments are not made in the work place. Feedback from employers in our study indicates that details of neurodiversity are not asked for at various stages of the application process. Arguably, this is because placement providers misunderstand equality legislation. They wrongly assume they will be seen as discriminatory if they raise notions of neurodiversity. This cohort of employers knew very little about dyslexia or dyspraxia and had limited understanding of reasonable adjustments. This case study illustrates how and why a continuous cycle of non-disclosure exists which affects the placement experience for both students and employers. In turn, this impinges on subsequent decisions made when applying for graduate employment; it precludes opportunities for placement providers to utilise positive traits possessed by these applicants; it results in students failing to use their assistive technology in the work place and it may perpetuate negative assumptions about dyslexia and dyspraxia.

Business enterprises and universities in the UK are morally and legally bound (Equality Act 2010) to embrace diversity and equality of opportunity. However, despite the regularity of high-profile anti-discriminatory campaigns, it appears that ‘deeply entrenched assumptions and concerns about the employability of disabled people’ remain (Morris & Turnbull, 2007, p. 35). In 2012, less than half of working age disabled people in the UK (46.3%) were employed which comprises a difference of two million in comparison with their non-disabled counterparts. Of the former, only 14.9% are educated to degree level or above (Department of Work & Pensions (DWP), 2014).

These statistics, however, do not present a sufficiently comprehensive account. For example, the most commonly reported impairments are those that affect mobility or conditions where lifting and carrying abilities are degraded. Further, whilst employers are required to offer adjustments and accommodations, they can only do so if the employee has chosen to disclose a disability. The inference is, therefore, that the numbers of those who will experience problems in the workplace is far higher than currently suggested. In particular, those with invisible or hidden differences related to neurodiversity, such as dyslexia or dyspraxia, are often excluded from consideration.

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An added problem is that little research has been undertaken on the problems faced in employment by the neurodiverse. Academic discourse has tended to concentrate on the extant debate between social and medical models of disability, thus reflecting the inequalities most predominate in the DWP account (DWP, 2014). Previous studies have largely concentrated on overcoming barriers for the physically disabled and ignored invisible differences such as dyslexia (Griffiths 2012, Morris & Turnbull 2007). This paper begins with the premise that without disclosure and explanation of learning differences, employers will fail to appreciate the positive attributes that neurodiverse employees can bring to business and enterprise.

Dyslexia can be associated with the possession of insightful problem-solving skills and the ability to think multi-dimensionally (Sanderson-Mann et al, 2012). Unfortunately, the commonly held perception within society at large and, ironically, on the part of many with dyslexia and dyspraxia, is that these learning differences imply negative manifestations which are neither understood nor appropriately met within the workplace. As Todd (2013) argues, ‘a neurodiverse profile can pose a radical challenge to … concepts of measurement, competency frameworks and appraisal systems.’ Little wonder then that so many fail to disclose evidence of neurodiversity on application for employment.

Within UK higher education institutions, dyslexia is the most commonly self-declared disability (Evans, 2013). The benefits of disclosure at this stage are clear: following a diagnosis from an educational psychologist, a student with dyslexia can obtain Disabled Students’ Allowances (DSA) to fund additional academic support throughout their degree from a specialist tutor. Within their academic schools, adjustments for learning differences can be made such as the allocation of extra time in examinations, the application of marking guidelines to negate difficulties with spelling or grammar and the use of assistive technology. Such adjustments could be developed within employment by, for example, encouraging time management strategies through the setting of clear priorities, using a proof-reader and utilising the technology that the student brings with them. Nonetheless, whilst disclosure and ensuing accommodations are common in HE, ‘both take on a new set of complexities and considerations in the workplace’ (Madaus et al, 2002).

Most undergraduate programmes at the university undertaking this research include a one year placement or, in the case of nursing, on-going practice. The university has a large well-resourced Additional Learning Support (ALS) unit. Annual averages of 1600 students, most of whom are in receipt of DSA are supported by around forty staff including advisors, specialist teachers and study mentors. There is, therefore, plentiful and varied anecdotal evidence available to support the hypothesis that a majority of students do not disclose a learning difference on application for placement. The rationale given for this choice reflects that given within the literature on employment; fear of being considered stupid or developing a marginalised identity (Evans, 2013); fear of attracting unwanted stigma that hinders a constructive relationship with their mentor (Morris & Turnbull, 2007); and a concern for job security (Madeus et al., 2002). On the other hand, a rare early study (Kakela & Witte, 2000 cited in Madeus et al., 2002, p366) argued that a mere 29% of students who had perceived benefits in disclosing a learning difference, did so in order to use their assistive technology or to have more detailed instructions for tasks allocated by the employer.
With the overarching aim of enhancing employability, members of the ALS team undertook a project to encourage disclosure of learning differences on application for a work placement. Although we support students with a wide range of potentially disabling conditions, it was decided to initially focus on dyslexia and dyspraxia; these being the most common of hidden differences. Accordingly, we were awarded funding from a source of widening participation money which would finance an improved placement experience for the main stakeholders - students, employers and placement advisors - through a variety of evidence-based resources. It was deemed essential to give equal priority to the needs of employers because, as Todd (2013) maintains, even where they are eager to offer greater understanding, ‘their experience is limited as to what to do and why the required adjustments are appropriate’. This suggests a vicious circle whereby a lack of disclosure by students leads to a continuous dearth of knowledge on the part of those providing placements. Further, Griffiths (2012) has argued that ‘legislation does not define what is ‘reasonable’ and with regard to placements, it is unclear where the university’s responsibilities end and the placement setting’s begin’ (Griffiths, 2012, p.3).

Formal consent for our research methodology was given by the Social Sciences and Humanities Research Ethics Panel at Bournemouth University. As the project concentrated on dyslexia and dyspraxia, the students we intended to approach were not considered vulnerable. Further, with regard to identifying a sample of both students and employers, all our respondents were self-selecting. Students who were subsequently invited to participate in the making of a promotional video signed a consent form allowing them to be identified and for the resulting film to be disseminated.

We initially intended to survey 117 students who had returned from a work placement to complete their final year of study. However, only 27 students with dyslexia and/or dyspraxia expressed an interest in participating in the research. We quickly learned that whilst our students were eager to discuss their learning differences in order to access tutor support for academic purposes, few were inclined to reveal their progress or otherwise outside of the university environment. In fact, whilst the subject under research is ‘disclosure’, terminology which in itself is suspect owing to the inference of something hidden, this theme of keeping a secret ran throughout the project. Accordingly, we changed our approach to a method which would elicit more qualitative data. In-depth interviews were conducted with the 27 students, some of which were filmed for the purposes of creating informative and promotional videos for future dissemination. Our proposals for these methods of primary research and the distribution & broadcasting of findings were validated by the university’s social sciences ethics committee. Students signed release documents allowing us use of their contributions.

Firstly, the students were asked at what stage of the application process they disclosed a learning difference. Choices offered comprised the initial application form, CV and covering letter and continued to the assessment centre and subsequent interview. All of these students were allocated extra time in university examinations. Therefore, in order to be accorded a similar adjustment in timed tests at the assessment centre, we might have expected that many candidates would have offered evidence of dyslexia and dyspraxia early in the process. However, only six of our participants had disclosed by the time they took their tests, whilst a further 19 entered their placement without having revealed or discussed their learning difference. When asked why they had chosen not to disclose, all the students
gave explanations which illustrated their expectations of employers’ perception of dyslexia and dyspraxia:

- Because people will think I’m not very smart
- I did not want it to jeopardise achieving the placement I wanted
- I thought it would harm my chances if I disclosed
- I had a fear of it lessening my chances as a candidate
- I was embarrassed and worried they would not further my application

These responses also typify what Blankfield (2001, p.25) argues is the ‘double invisibility of dyslexia’: not only is the original condition hidden, so is the anxiety that emanates from consideration of disclosure.

Once established on placement, some students had considered disclosing their learning difference, particularly in light of difficulties they were experiencing:

- I was struggling to produce work to a high standard and I got told off

Sadly, even where the demands of the placement were proving troublesome to both the students and their mentors, none of those who had previously chosen to conceal their dyslexia and dyspraxia felt inclined to explain why some tasks were proving difficult unless they were confronted:

- I thought if I disclosed my condition that this would affect my work and the cases that I was given. I felt that the partners would view me and my ability to undertake the job in a different light
- I was worried about my credibility so I just struggled on
- I think my managers would have been more nervous to give me responsibility as it frequently involved corresponding with internal and external partners of the business
- I would not want to look like I was making excuses or being lazy
- I think my boss would have regretted employing me

The concept of prejudice was frequently referred to by our students who have based their expectations of workplace responses to learning differences on past experiences:

- Just because you are dyslexic doesn’t mean you’re stupid, even if you get told this for sixteen years

Herein lays a huge problem for staff supporting those with learning differences. Whilst we might spend three years empowering our students through the acquisition of independent learning strategies that enable a level playing field for academic success, the majority appear to internalise the societal discrimination they fear. On leaving the relative comfort of university, students who have embraced their dyslexia or dyspraxia, and exploited the positive talents and traits that these conditions embody, still feel unable to share the good news with employers.

Of course, it does not necessarily follow that a majority of employers hold prejudices against learning differences. However, as other writers have mentioned (Todd, 2013, Griffiths, 2012), quite what a placement provider knows about dyslexia or what adjustments they
might usefully make is unclear. During the interviews, it became apparent that those who had disclosed at some point were met with mixed responses when asked about the accommodations that had been made for them:

- No adjustments were made but I think it was good to make my manager aware
- No adjustments were made but other employees helped to overcome it
- None were made but they were a bit more understanding
- My placement company failed to help me at all

Conversely, three students had a positive experience:

- I was given more time to take in information and things were explained to me more one to one
- They bought me books to look at and let me do things at my own pace
- Proofreading of reports that were published for the newsletters and websites

Finally, we asked our students whether, based on their placement experiences, they would disclose their learning differences when applying for graduate employment. Some participants were adamant that they would not reveal their dyslexia or dyspraxia and gave reasons which were similar to those given on placement application:

- I feel it would affect my chances of getting the job over other interviewees
- I fear that knowing this information beforehand would hamper my chances
- In an already competitive world I believe it would go against me

However, the reality of working life had clearly influenced the views of some of our participants. Within the university, students learn strategies to guide them through academic assessments. They take these strategies and their subject knowledge into the work placement and with reasonable adjustments can manage new demands. Those who had not disclosed were no better off than previously but those students who had revealed their learning differences and whose employers had allowed accommodations painted a much more positive picture:

- I envision that the things I am good at outweigh the things I am not so good at. When my employer is aware of this, they should be able to see me in the best possible way
- This will make sure the company is aware of why I might make mistakes and they will know what they need to look out for and where I will need help
- I’m honest and I don’t want them saying at a later stage ‘why didn’t you tell us?’
- If they asked me, I don’t see why not. I wouldn’t want to work for a company if they discriminated against me or anyone else

Although we found students who had a positive experience on their work placement, and a slight upward turn in the numbers of those who said they would disclose their learning difference when applying for graduate employment, 57% of respondents still maintained they would never reveal their dyslexia or dyspraxia perceiving it as a hindrance to their employability. This concurs with Pennington’s (2010, p56) suggestion that a decision to reveal a learning difference was ‘dependent on the perception of how the employer would
respond to the disclosure’. With these answers in mind, we then moved to the second phase of the primary research to survey the employers.

Questionnaires were intended to be delivered as structured interviews by the Placement Development Advisors (PDAs) who work within the academic schools at the university. It was estimated that between 100 and 120 respondents could be reached. Following the distribution of our pilot questionnaire, a Fellow of the Institute of Directors, advised that most employers would not have sufficient knowledge of learning differences to enable them to answer adequately. This generated a complete reconstruction of the questions whereby the problematic and positive attributes associated with dyslexia and dyspraxia were clearly outlined as traits that may be recognisable. Further, rather than ask what type of reasonable adjustments the placement providers might be able to make, we listed the accommodations that could be deemed acceptable.

Unfortunately, our desire to introduce greater clarity backfired. Informal feedback from the PDAs suggested that a majority of the employers with whom they dealt appeared overawed. We received 29 completed questionnaires which, whilst not enabling us to draw conclusions that can be argued as representative, do allow us to present a case study. Further, the lack of willingness to participate reflects that found previously with our students and with others (Madaus et al., 2002). Nonetheless, it is important to recognise that this current research has made inroads into consideration of the perspectives and understandings of employers. Firstly, the employers were asked whether candidates for a placement were invited to disclose a learning difference at any stage of the application process. 24% agreed that this happened at a face to face interview whilst only four people offered this facility beforehand.

Of greater interest were some of the optional comments received in accounting for a lack of enquiry. Some of those approached were unclear of procedure:

- Unsure of company practices across the business
- I don’t know – possibly dealt with by the HR department.

Others, however, illustrated a completely different view of equality legislation:

- Seen to be discriminating so wouldn’t ask
- Wouldn’t ask – could be discriminatory

The paradox here is that while some employers feel unable to ask about anything that is not a manifest disability, neither can they implement adjustments for hidden differences which are covered by legislation. This perpetuates the cycle of non-disclosure by further condoning the keeping of secrets. Moreover, negative stereotypes of those with dyslexia and dyspraxia are maintained in the workplace and wider society. For example, when offered a list of positive attributes that these students can bring to their placement, very few were known by our respondents although 38% recognised the possession of innovative problem-solving skills. Conversely, the figures were much higher when asked about traits which ‘might impact the employability skills’ of neurodiverse students: 55% of employers claimed awareness of placement students forgetting instructions, 45% believed they had difficulties in sustaining focus and 72% ‘knew’ that badly written material was associated with dyslexia and dyspraxia.
Given that few of our employers gave placement students a clear opportunity to disclose dyslexia or dyspraxia, and that most of our cohort had chosen to keep their learning difference a secret, it must be inferred that the employers’ ‘knowledge’ of negative traits did not originate in first-hand experience. This is by no means a condemnation of placement providers. On the contrary, when offered a list of reasonable adjustments that their company could make, responses were extremely positive. For example, 69% agreed they could offer assistance with task prioritisation, 76% were able to instigate proofreading of important documents and 83% would be proactive in asking questions to check understanding. Arguably, these accommodations were seen as both reasonable and minimal but without them many of our dyslexic and dyspraxic students struggled to fulfil their assigned tasks to the satisfaction of both themselves and their employers.

The ALS team encourage students with neurodiverse conditions to perceive themselves as possessing learning differences rather than needs, difficulties or, worse, disabilities. Within the team, we are precise with our terminology. This not a question of semantics: it is a means of reminding everyone that our students are ‘disabled’ by an uninformed society. Our approach further helps to raise the self-esteem of these students, many of whom mirrored the judgements of others and regarded themselves in a poor light prior to psychological assessment. Students with dyslexia and dyspraxia understand that elements of these conditions are seen to be problematic for others and shy away from disclosure on application for placement. Many have an unhappy experience which informs decisions when applying for graduate employment. Wilton (2006, p.36) argues that we must ‘recognise the capacity of the work environment to enable or disable workers’. However, such a capacity is not necessarily the result of negative decision-making: our research indicates that employers would be happy to apply reasonable adjustments requested by students who disclose dyslexia and dyspraxia resulting in mutually beneficial enhanced employability skills. In the next phase of this project, we implement the training resources that represent the tangible outcomes of this research.

References


Examining intellectual prowess, not social difference: removing barriers from the doctoral viva for autistic candidates

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Abstract

The doctoral viva voce (‘viva’) has been variously described in the literature as mysterious, unpredictable and potentially frightening for students. Here we present a set of reasonable adjustments designed to remove social barriers from existing viva process for the benefit of autistic doctoral viva candidates. Our objective is to ensure that autistic students, who experience atypical differences in social interaction, social communication, and social imagination, are examined on academic prowess, not social differences. Recommendations are based on our many years of work with autistic adults in higher education and elsewhere and relevant literature. It is our view that these proposals could also benefit non-autistic doctoral candidates. Key proposals are to allow candidates the choice of a ‘virtual viva’ via electronic mail; to prepare a ‘needs assessment’ pre viva; and to ensure that relevant university personnel understand autism sufficiently to appreciate issues specific to the individual and their viva. Academic rigour and integrity would not be compromised but the playing field might be flattened.

Introduction

The Doctorate of Philosophy (PhD) is ‘an important award, recognised internationally to signify high level intellectual endeavours in a specialised field of study’ (Johnston, 1997, p. 333, our italics). The same is so for professional doctorates such as the Education Doctorate (EdD). In the UK the viva voce or oral examination (hereafter referred to as a ‘viva’) is the penultimate (depending on corrections) or final hurdle at which a candidate defends their thesis (QAA, 2011a). The viva has been described as a ‘gate-keeping function and ... a marker of standards’ (QAA, 2011a, p. 23). Although national guidelines exist, viva processes vary within and across institutions, rendering processes mysterious, unpredictable and potentially frightening for students (Watts, 2012). Park (2003) piloted viva best practice at Lancaster. Following ‘the unofficial endorsement of the National Postgraduate Committee’ (Groves, 2003, cited in Park, 2003, p. 8) Park’s framework was adopted by the university in 2005 (Murray & Pearce, 2005), and still operates at Lancaster (Child, 2013) but we have found no evidence of its adoption elsewhere.

Aiming for equivalency, QAA identify an objective of their doctoral characteristics guide as ensuring those candidates ‘face similar intellectual challenges’ (QAA, 2011a, p. 23, our italics). Our recommendations, designed to remove social barriers in order to focus on the intellectual, were informed by experiences of§ a small number of autistic PhD doctors. ‘Autism-friendly viva’s’ is a limiting descriptor as our recommendations may potentially also benefit non-autistic students (Walters, 2010). This research is sensitive to the potential

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§ We undertook semi-structured email interviews. The initial question is at Appendix A.
vulnerability of persons with autism, however academically able. Informed consent was gained for email contact which is often preferred by autistic individuals. Participants are anonymous, and strict confidentiality has been maintained.

**Background on autism**

Van Bergeijk, Klin & Volkmar (2008, p. 1359) stated that 'In the 1990’s a surge of children were diagnosed with autism... and are now approaching college age'. In 2015, numbers of students with an autism diagnosis are increasing annually; and many of these students have now graduated. Figures relating to students without formal diagnosis do not however exist. Autism including Asperger Syndrome (AS) involves developmental delays in social interaction, social communication, and social imagination (Wing, 1981, 1997) often causing difficulty in social settings. Although intellectual ability remains unaffected (high functioning autism and AS are associated with at least average intellectual ability). Some scholars suggest links between autism and fluid reasoning (Hayashi et al., 2008) and creativity (Fitzgerald, 2008). Trafford (2003) refers to the ‘social/intellectual transactions between examiners and candidates’ (p. 114-115) and ‘unfolding social processes’ (p. 115) that take place within the viva, which Martin (2010) identifies as especially stressful for students with autism and AS. These students are likely to be disadvantaged in the social setting of the viva which will potentially induce stress and a high anxiety state, something many autistic people experience frequently (Gillott, Furniss & Walter, 2001; Kim et al., 2000; Martin, 2010). White et al., (2009) suggest that autistic candidates are unlikely to be able to make sense of all the social transactions and processes in the viva. A tendency for single-track** thinking will, also potentially make the viva experience substantially worse than for a non-autistic student. An inherently stressful, potentially frightening experience for anyone may well be excessively traumatic for an autistic student.

**The sanctity of the viva**

There is ongoing discussion on efficacy, and indeed validity, of current viva traditions (Morley et al., 2003, Tinkler & Jackson, 2000, Watts, 2012). It is not our intention to contribute further to this debate. Potter (2006) identified three critical viva functions: (1) to check that the thesis is actually the work of the candidate, (2) to assess the ability of a candidate to be articulate under stress in the defence of their work, and (3) to clarify aspects of the candidates thesis. We argue that functions (1) and (3), although essential could be achieved in other ways. Function (2) could hardly be more autism-unfriendly. We ask, would a doctoral degree be devalued if a candidate was required to defend their thesis robustly in a non-stressful manner such as via an exchange of emails with examiners in a controlled environment? Watts (2012 )suggests that, being ‘articulate under stress (is) seen as an important function of being a professional researcher’ (p. 372). However a doctorate is supposed to be an assessment of academic ability and originality at the highest level rather than a test of resilience under pressure.

**The need for an autism-friendly doctoral viva**

Given the status of the doctorate it is expected that the viva will be demanding. Defending doctoral level work to examiners in a formal setting is inherently stressful. However, Delamont et al., 2004 argue that the viva does not have to be terrifying and we argue potentially more frightening for autistic candidates who face additional challenges around

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**In referring to single-track thinking we have in mind the monotropism theory of autism (Murray, Lesser & Lawson, 2005, p. 142) discussed briefly in the section of this article on autism theory.**
Social interaction. Our recommendations aim to ensure that autistic candidates are not placed at a substantial disadvantage. Rather than proposing positive discrimination we consider here, amelioration of disadvantage.

**Autism theory in the context of the doctoral viva**

Theory of mind (ToM) refers to the ability to attribute mental states to self and others (Frith & Happé, 1999). ToM theorists research the development of understanding of mental states of the self and of others and suggest that autistic people are often delayed in this understanding, resulting in challenges around social interaction and social communication. If questions in the viva are posed in ways which required understanding from the examiner’s perspective considerable disadvantage may result.

Executive functioning (EF) involves ‘several abilities for preparing and engaging in complex organised behaviour’ (Macintosh & Dissanayake, 2004, p. 426). EF encompasses formation of abstract concepts, planning, focusing, sustaining and shifting attention, and utilising working memory (Macintosh and Dissanayake, 2004). Liss et al., 2001, Fisher & Happé, 2005, Verte et al., 2006 have demonstrated that some, EF processes are likely to be affected in autism (e.g. commonly difficulty with planning but not necessarily inability to inhibit impulsive behaviour). Answers to viva questions may not be as organised as a non-autistic candidate’s. For example, appearing ‘never ending’, as one answer links to another.

Weak central coherence (WCC) is described by Attwood, 2007, (p. 241) as ‘being remarkably good at attending to detail but (having) a weakness in perceiving and understanding the overall picture, or gist’. Strengths in manipulating detail and difficulties in forming an holistic picture may result. Happé & Frith (2006) characterise this as a preference for local processing regarding WCC (with the concomitant strengths) as a difference in information processing style, rather than an impairment. They suggest that people vary along a continuum of central coherence with persons with autism lying at the weak end (Happé & Frith, 2006).

Monotropism theorists argues for a state of heightened (hyper) awareness inside, and lessened (hypo) awareness outside an attentional tunnel, which may explain aspects of autistic cognitive style as well as unusual (hyper- and hypo-) sensory sensitivities (Murray, Lesser & Lawson, 2005, p. 142). Central coherence issues and/or monotropism could result in addressing too thoroughly specific details rather than providing the expected holistic response. Examiners could be given more jurisdictions, by prior agreement, to stop a candidate when they have answered the question to the required extent, thus avoiding unnecessary stress for someone who does not know when to stop talking.

‘An earlier hypothesis concerning the psychological cause(s) of language impairment in autism suggested that there is a fundamental deficit in the ability to process transient, sequential stimuli (i.e. stimuli with a temporal dimension) such as speech or manual signing’ (Boucher, 2003, p. 250). Boucher (2003) claimed that autism involves varying levels of difficulty in understanding conversation exchanges in real time ‘which contributes to the linguistic aspects of their pragmatic impairment’ (Boucher, 2003, p. 250). The expectation of fluid linguistic reciprocity within academic debate in a viva could well impact on autistic candidates hugely if time required to process layers of language is not built in. Understanding body language and non-verbal communication including inference and the
stress of the constant focus of the examiners’ eyes, may also present challenges which could add to potential for disadvantage and miscommunication between parties.

**Equalities Legislation**

'All institutions require and all students deserve academic procedures that are fair .... procedures should be transparent and consistent' (Park, 2003, p. 1). We contend that it is morally unacceptable for any academic institutions, or other bodies, to treat any student unfairly at any stage in the process of gaining any qualification, whether it is a cycling proficiency certificate or a doctoral degree. Tinkler & Jackson (2000) add that 'most institutions stipulate, often in appeals procedures, that the viva examination should be 'fair' and/or 'unbiased'" (p. 179). We are debating fairness here through an autism friendly lens.

An intellectually capable autistic candidate may be viewed as being ‘socially inept’ (not our pejorative term), even in situations that a non-autistic person would find straightforward. Taking longer to understand a question and compose a response, thinking differently, thus interpreting questions unusually, then responding in unexpected, albeit logical way, may be interpreted as social ineptitude. The mantra ‘do as you would be done by’ does not reflect the requirement for academic practice to accommodate autistic differences, therefore. ‘Reasonable adjustments’ are appropriate:

where a provision, criterion or practice of A’s puts a disabled person at a substantial disadvantage [to non-disabled people] in relation to a relevant matter in comparison with persons who are not disabled, [A must] take such steps as it is reasonable to have to take to avoid the disadvantage (Equality Act 2010, UK, 2010, s. 20).

The Act states that universities 'must not victimise a [disabled] person... in the services it provides or offers to provide' (s. 92(5)). Hence, all elements of the doctoral process, viva included should be delivered in a manner that does not ‘victimise’ autistic candidates.

**Option of a virtual viva (in a controlled environment)**

Autistic ToM (and other people) makes any social setting (informal or formal, ‘friendly’ or inquisitorial) complicated. Difficulties will be heightened in a vitally important formal examination. Executive functioning may explain autistic differences around responding in ‘real time’ conversation including requiring longer to process words and compose suitable responses. Ordinary autistic social anxiety can occur in any situation but will inevitably be compounded by the stress of a high stakes encounter crucial to graduation but mysterious (even to non-autistic persons), unpredictable, and potentially frightening (Watts, 2012). Watts (2012), citing Potter, writes that the viva 'is intended to examine the student at their best' (p. 371). An extremely important and complex social encounter will not bring out the best in a person with autism and we suggest here other ways of checking whether a thesis is the candidate’s own work and question the justification for requiring anyone to be ‘articulate under stress’ (Morley et al., 2003, p. 65) rather than simply to defend their work robustly.

**Electronic Communication**

Parsons et al. (2000) have considered some of the advantages of virtual reality environments for people with AS, and a preference for email and on line communication has been noted. A
viva undertaken via email†† has the potential to achieve the viva functions identified by Potter (2006) whilst examining the (autistic) student at their best (Watts, 2012), or, at least, without the added anxiety associated with face-to-face social interaction (Howley, unknown). Murray (1997) highlights affinity between monotropic attention and computer usage. Advantages of communication by computer are perfectibility (autistic people are often perfectionists) and social and emotional distancing (Bolte, 2004, Murray, 1997, Swettenham, 1996). Benford and Standen (2009, p. 4) contend that ‘the impact of the Internet on high-functioning autistic adults has been likened to that of sign language on the deaf community’; demonstrating both the extent of communication challenges autism may involve and the value of computer-based solutions. In her doctoral thesis, Benford (2008) highlights aspects of computer-mediated communication which she considers, could ‘bypass the social communication difficulties of autism’ (p. 126), including: absence of nonverbal social context cues; single channel (monotropic) and slower paced communication; a more regular, predictable environment; and the avoidance of face-to-face contact. Autistic respondents to Benford’s survey described the chief advantage of email communication as the avoidance of having to respond in real-time, ‘In online communication it is acceptable to pause... conversation..., giving me time to think about what to say next,... I can delete text that I have typed if I change my mind about wanting to say it’ (‘David’, cited in Benford, 2008, p. 264). Benford and Standen (2009) consider that email communication ‘may have a wider role... in breaking down ... social communication barriers which individuals with [high-functioning autism] face on an ongoing basis’ (Benford and Standen, 2011, p. 365).

Fairness and academic standards would clearly have to underpin any decision to implement virtual vivas as a reasonable adjustment. The examination must be undertaken in an environment controlled by the university to ensure candidates were not being coached or otherwise assisted in responding;

**Need for an independent Chair or advocate**

The assumption that one of the examiners in a viva will act as a Chair to ensure fairness and protocol is usual. Park (2003) and the QAA recommend for an independent Chair alongside the internal and external examiners:

Higher education providers that are research degree awarding bodies may appoint an independent, non-examining chair, who may not contribute to the assessment judgement. Such an appointment and clear guidance on the extent of the chair’s role and responsibilities, including details about the circumstances in which the chair will be used, encourages consistency between different vivas (QAA, 2011b, p. 27).

Having a sound understanding of autism and knowledge of the requirements of the individual candidate could enable the independent chair to consider areas where the candidate may be placed at a significant disadvantage, and be alert to signs of heightened anxiety. Tinkler and Jackson (2000) pointed to practice which ‘encourages the appointed examiners to invite attending supervisors to contribute to the discussion in such a way as to act as the ‘candidate’ s friend’ (p. 175). The supervisor, who will know the candidate well,

†† We have considered Skype but rejected it as not being autism-friendly as it requires the immediate responses associated with face-to-face interaction, albeit it is not face-to-face if the cameras are deactivated.
may therefore fulfil an advocate function, more effectively than the independent chair could‡‡. An advocate of the candidate’s own choosing may be most helpful in terms of reducing anxiety through familiarity and control§§. The Chair should certainly have a good understanding of autism and its potential implications for the candidate in order to identify potential for significant disadvantage and unreasonable level of stress, including identification of the signs of imminent meltdown or shutdown (so that they can step in to prevent further deterioration in wellbeing). We recommend an opportunity for the candidate to meet everyone attending the viva well beforehand to build familiarity and discuss arrangements. A viva specific ‘needs assessment’ could underpin an autism awareness session focused on the specific individual (rather than being general autism awareness training). The candidate should know, and have confidence in the person delivering the training who would, in an ideal world, be present in the viva (possibly as the independent chair). One of our participants reported that ‘The external examiner who led the panel, had a wealth of knowledge in autism and was very careful to ensure I was comfortable throughout. I had a couple of emotional outbursts … and they allowed me to recover before continuing.’

Ideally all examiners would be well-versed in the requirements enshrined in equalities legislation and good autism practice. Realistically, developing a small cohort of independent viva Chairs for autistic candidates may even be practicable.

**Careful selection of a viva panel**

Earlier than usual, selection of examiners would provide time to ensure that all parties have sympathetic understanding of autism, in general and time for suitable preparation. An independent Chair thoroughly versed in autism could oversee the selection process in collaboration with relevant university staff. Anyone without a reasonable understanding of autism should undergo autism awareness training prior to the viva.

**Protocol for the traditional and virtual viva**

*Recommendation 1.* Oral or oral substitute the viva should be regarded as an oral or oral substitute examination of a research degree to allow for the possibility of a virtual viva.

*Recommendation 2.* An autistic needs assessment prepared by an advocate in collaboration with the candidate, is required to ensure that the viva arrangements are appropriate to the individual, and could be used as the basis for briefing the Chair and examiners.

*Recommendation 3.* An independent Chair acting as an observer and manager of the (face to face or virtual) meeting, should ensure that procedures are followed, and issues which arise during the viva are addressed appropriately. (A named person would sit with the student during a virtual viva, as a reassuring presence and to ensure protocol is followed).

‡‡ We assume that in referring to an attending supervisor as a ‘friend’, Tinkler & Jackson (2000) are simply expressing a view that there is a need for someone to attend who understands the candidate’s autism.

§§ This is not an attempt to advantage an autistic candidate via positive discrimination but to ensure a level playing field with non-autistic candidates given the many differences between them.
**Recommendation 4.** The viva team’s understanding of autism and its potential implications for the candidate should be facilitated by a briefing session informed by the autistic needs assessment.

**Recommendation 5.** The venue, waiting area and timing should address sensory sensitivities, anxiety and comfort and be familiar to the candidate. Early morning may be problematic as the candidate may well have had an anxious sleepless night. One respondent commented ‘I was given the opportunity to choose the approximate time of my viva – mid morning – so I did not have to wait around all day’, however, she also pointed out that ‘I was called in to the viva later than the given time, allowing me to get more anxious’. Another said ‘Immediately before the viva I was asked to wait in a public area … which was awful. There were too many people there who knew me ... and the number of people who came up to me to chat was extremely stressful’.

**Recommendation 6.** Candidate interrogation should follow a predictable structure. An outline and initial questions should be made available to the candidate a week before the viva to reduce the stress of having to understand the nature of questions as well as compose their responses. Follow-up questions will be unrestricted in order for the examiners to fulfil their role. Immediately prior to the start of the viva the Chair should explain the ‘rules of engagement’ clearly. Several respondents noted that positive comments about the thesis helped put them at ease. They also said that confirming a positive outcome at the end was a relief. The examiner may be briefed to use phrases like, ‘I’m going to stop you there and ask you a slightly different question on the same theme’ if the candidate is going off the point. Questions like, ‘Can you say a little more about that’ might be ambiguous (and could elicit a yes or no response) therefore a degree of prompting may be necessary. These strategies could be demonstrated in a practice session. The candidate is likely to respond well to direct questioning about the topic as an in depth interest which is really important to them. One respondent noted that his examiners asked so few questions on his special interest that he ‘spent hours and days afterwards turning it all over in (my) mind. Ambiguous questioning may fluster and practicing specific strategies to seek clarification (practiced in advance) may be helpful, such as asking, ‘Please will you repeat/rephrase the question’. Short clear questions with supplementary ones as required, work best.

**Recommendation 7:** A written pre-brief and familiarisation which outlines, for example approximate timing and arrangements for breaks: will reduce anxiety resulting from uncertainty. One candidate described his viva experience as follows:

‘In the main – terrifying. It was the absolute fear of both the unknown and the concerns about looking like a total idiot in front of the panel, all of whom I knew, two of whom I had/have a great deal of respect for. I was very frustrated at the almost total lack of what to expect, and this took up a huge amount of intellectual and emotional energy for months prior to the event itself.

It is useful to acknowledge that everyone is nervous when taking their viva and this is not specific to students with AS. Otherwise the candidate may internalise their anxiety as a personal failing, and become anxious about being anxious. In addition to a written pre-brief, meeting in advance, visiting the room, knowing what they can take in (for example water),
advice to eat, drink and go to the toilet pre viva (without being patronising) can be helpful. One participant said:

I arrived in [place name omitted] the day before my viva to meet with my DOS [Director of Studies] in his office. After a “calm me down” chat, we walked over to the room allocated for my viva so that I knew exactly where it was, what it looked like, how big it was etc. This really helped. However, the same respondent wrote that she would like to have been given an opportunity ‘to set up my “area” in the room before walking in.

**Recommendation 8.** Post-viva feedback and creation of a safety-net needs to occur as soon as possible and be very specific and sensitive. Many autistic candidates are perfectionists and have low self-esteem, despite being high achievers, therefore they need to leave the feedback session knowing exactly what they have done well, and what they need to do in order to complete. It is vital to spell out that it is usual to have to make some amendments (a topic which should have come up during viva preparation). All feedback should be followed up in writing quickly, by the agreed date as the candidate will be waiting anxiously and may over interpret delay. Assistance should be available for follow-up action which should be clarified in writing, and discussed carefully, to avoid unnecessary rewriting. One former student proposed ‘some kind of “post viva support group or forum” to share experiences and just get it out of the system’. Another would have liked to meet his examiners ‘at a later date (perhaps after modifications) with no formal constraints to discuss aspects of the thesis that I wanted to chat about that hadn’t come up in the viva’.

If the candidate fails their Doctorate, a ‘safety net’ is essential. An MPhil instead of a PhD, may be perceived as failure and very careful discussion, on more than one occasion, around the merits of this award, will be necessary. The advocate and/or supervisor should be involved and the candidate may wish to record the discussion as they are likely to be too stressed to remember it.

**Protocol for the virtual viva**

Virtual vivas should mirror best practice associated with face-to-face vivas. The likelihood is that a virtual viva involving an autistic candidate will take considerably longer so at least half a day should be set aside, with flexibility to run over. The downside of lengthy virtual viva’s are arguable less than those associated with face to face vivas.

**Recommendation 9.** The supervisor role in maintaining a supportive watching brief can be mirrored in an electronic viva’s by copying in on all questions and responses but not allowing the supervisor to intervene.

**Recommendation 10.** A mock virtual viva is recommended to aid candidate preparation and therefore reduce anxiety.

**Recommendation 11.** A brief student summary could be presented via email at the start of a virtual viva in order to reassure the candidate that they have been able to communicate key points from the outset.
Recommendation 12. Raising concerns with the Chair during a virtual viva could be facilitated by allowing the candidate to email the chair confidentially in a way which would mirror the opportunity to talk to them privately in a face to face viva.

Recommendation 13. Meeting the panel beforehand informally would be essential for face to face vivas in order to reduce the stress that can be involved in meeting new people for the first time. Skype may fulfil a similar function if necessary.

Recommendation 14. A mechanism for the candidate to indicate high anxiety, such as a form of words or an alert card could be instigated alongside protocols to build in a break if this situation arises.

Recommendation 15. Regular breaks may be necessary and arrangements, which would include chaperoning, must be agreed in advance.

Recommendation 16. Prior to the viva, social conventions such as eye contact may need to be discussed. The viva is not a test of the ability to look at other people in a socially conventionally way and it may be useful to articulate an agreement that this does not matter.

Recommendation 17. Non-disclosure does not equate to no reasonable adjustments. If a candidate prefers to talk about ‘access requirements’ rather than a diagnostic label, this should not be problematized.

Discussion

People on the autism spectrum who are functioning academically at doctoral level can still be challenged by differences in social interaction, social communication, social imagination, and other people’s attitudes towards them. We have presented recommendations for changes to vivas designed to level the playing field (rather than positively discriminate), without adversely affecting the academic rigour or integrity of the process. Universities are expected to provide opportunities attuned to disabled students and the viva experience should avoid trauma by reflecting rather than problematising social difference associated with autism. Our recommendations are designed to enable the viva to examine intellectual rather than social prowess. Key proposals are to allow the choice of a ‘virtual viva’ undertaken via electronic mail, to develop an autistic ‘needs assessment’ prior to a viva, and to ensure that everyone involved in a viva understand autism well enough to appreciate the specific issues faced by each individual candidate. If the viva ‘is intended to examine the student at their best’ (Potter (2006) cited in Watts (2012) p. 371) then it must not be a test of being ‘articulate under stress’ (Potter (2006) cited in Watts (2012)). Reducing mystery and unpredictability around the viva should render the experience less frightening, and more rewarding good autism practice may well be adopted for other students without polluting the traditions of doctoral examination.
We conclude with an example of a simple effective ‘protocol’ agreed between a successful autistic doctoral candidate (x), her Director of Studies, and examiners.

1. The panel will convene at 9.30am
2. The viva will commence at 10.30am ***
3. The viva will be completed by 12.30pm *in all likelihood*
4. x will be able to use a desk to sit behind
5. will have access to her thesis and any notes she wishes to bring with her
6. x will be allowed to take a break of a reasonable duration at any time if her anxieties become overwhelming
7. The panel will start questioning in a (perhaps) traditional manner of asking her to outline her work, rationale for doing it, and her overall experiences
8. The panel will subsequently ask questions relating to the thesis in a chronological manner, i.e. starting at the beginning of the thesis and working through
9. The panel will ask questions in a direct, linguistically clear manner and that x will not be ‘marked down’ if she requires clarification; additionally, that the panel will respectfully inform x if she has answered a question to their satisfaction, or ask for additional detail if required.

In the interests of promoting equality (and social justice), further research could ‘pilot’ virtual vivas for autistic (and other) candidates and identify and iron out difficulties with the proposed protocol. The alternative is to continue to discriminate and potentially waste the considerable talent of highly original, deeply motivated people. Actually, that isn't really a viable alternative is it?

References


*** The viva commenced five minutes late which made the candidate considerably more anxious than she would otherwise have been. This experience demonstrates the importance of understanding the needs of autistic candidates which can be highly counter-intuitive for persons who do not have an understanding of autism.


The 3rd International Conference on Disability, Virtual Reality and Associated Technologies, ICDVRAT (23-25).


APPENDIX A – SEMI-STRUCTURED INTERVIEW INITIAL QUESTION SET

How would you describe your overall viva experience?

How would you describe your experience before the viva?

How would you describe your experience after the viva?

What were the good aspects of your viva, if any?

What were the unsatisfactory aspects of your viva, if any?

Do you think that your examiners understood autism sufficiently to make the viva autism-friendly? YES/NO

If you have said ‘no’ to question 6, what do you think they failed to understand?

Would you have preferred a ‘virtual’ (email) viva if this had been an option for you? YES/NO

What reason or reasons do you have for your response to question 8?

Supporting students with specific learning difficulties in higher education: a preliminary comparative study of executive function skills

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Abstract

With increasing numbers of students with specific learning difficulties (SpLDs) arriving at university, it is important to understand how to provide effective support. Individual profiles of impairment for those with a diagnosis of one or more SpLDs were compared to those with no diagnosis using a questionnaire specifically developed to assess patterns of behaviour related to executive functioning skills in students. These data suggest that students with a diagnosis of an SpLD and some without a diagnosis reported significantly more difficulties across all executive function domains measured. Additionally, the level of impairment between the diagnostic groups differed (a) depending on the domain being considered and (b) by having more than one diagnosis. The questionnaire developed for the study could be used by support services and tutors to identify individual strengths and weaknesses and ensure that students are supported during their academic studies regardless of whether they have a formal diagnosis.

Key words: Specific learning difficulties; executive function; developmental coordination disorder; dyslexia; student support.

Background

Executive function (EF) is the term used to describe a complex cognitive construct which allows us to act as efficiently as possible. The executive system is thought to help block out extraneous ‘noise’ so that we may attend to a task or complete several tasks at one time (multi-tasking) and allows us to adapt to new situations (Burgess et al., 2000). These processes have been mainly associated with the prefrontal cortex (PFC) – the frontal portion of the brain - and can be split into actions that require conscious control (e.g. learning a new skill), those that are automatic (e.g. memory recall) or a combination of both (e.g. riding a bicycle). Several components of executive functioning have been described including planning, problem-solving, working memory, sustained attention, impulse control and decision-making (Burgess et al., 2000 Damasio 1995, Grafman and Litvan 1999). Executive function is vital for everyday living and research has shown that impairments or deficits in the system will greatly impact on a person’s ability to conduct day to day tasks and maintain social relationships (Goel et al., 1997, Green et al., 2000).

A study of mainstream primary and secondary school children in Australia showed that within a typically developing (TD) population different domains of executive functioning took different developmental trajectories (Anderson et al., 2001). Improvement was observed on

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tasks which required selective attention ability, working memory and problem solving whereas planning and/or strategic behaviour may have been cemented in earlier life. In a review of histological and imaging studies of the adolescent brain, Blakemore & Choudhury (2006) indicate that a peak in PFC activity occurs during early adolescence and that this period of activity has implications for the educational and social development of the child.

In recent years a number of researchers have identified an association between specific learning difficulties (SpLDs) and executive functioning skills. Executive functioning deficits (EFDs) have been commonly described in studies as a persistent and prominent feature of Attention Deficit Hyperactivity Disorder (ADHD) (Barkley 1997, Biederman et al., 2007, Diamantopolou et al., 2007, Miller & Hinshaw 2010, Sergeant, 2000) and Autism Spectrum Disorders (ASD) for example (Verté et al., 2005). The EFDs associated with Developmental Coordination Disorder (DCD) have also been recognised by Kirby et al. (2008). In their study, students reported significantly more executive functioning difficulties than their typically developing peers (Kirby et al., 2008).

Previous research into the EF deficits associated with dyslexia has focused primarily on single components such as working memory (such as Wolf et al.’s work with adolescents and adults in 2010). Few studies have looked more generally at the various other components of executive functioning skills and how they may present. However, one study that did was conducted by Reiter, Tucha and Lange (2005), who examined a group of primary school aged children with dyslexia. Their research highlighted differences in performance using a number of executive functioning tasks. When compared to their typically developing (TD) peers, children with dyslexia showed deficits in verbal and figural working memory, verbal and figural fluency functions, planning ability and flexibility but did not differ significantly from the TD group for impulsivity (Reiter et al., 2005).

To further complicate the issue research has demonstrated that specific learning difficulties overlap with one-another. Kaplan et al. (1998) for example, found that, in a group of children with a diagnosis of DCD, ADHD and dyslexia, 25% of those with one SpLD had all three conditions (Kaplan et al., 1998). These findings have been corroborated by others (Kadesjo & Gillberg 1998, Martin et al., 2009). These studies highlight that although children or adults might have a diagnosis of DCD, for example, other overlapping conditions have not been considered.

In terms of patterns of EF and SpLDs, recent work by Gooch, Snowling and Hulme (2011) have also demonstrated varying patterns of EF, time perception and phonological skills in children with one or more SpLDs (in this instance dyslexia and ADHD) when compared to a TD group. The children in the study who had a diagnosis of dyslexia reported greater impairment on measures of phonological skills and time management (in this case duration discrimination) than the TD group. Interestingly, where overlap occurred (i.e. the dyslexia and ADHD group) these difficulties were further compounded by deficits in executive function and time perception.

Increasing numbers of students presenting with a variety of impairments are arriving at university each year. Data from the Higher Education Statistics Agency (HESA) indicates a sharp rise in the number of first year domiciled undergraduate students declaring a disability in the past 10 years (4.9% in 2001/2 to 9.3% in 2011/2). Of the students known to have a
disability in 2011-2012, 47.4% reported having a specific learning difficulty. Students with dyslexia represent the largest group and have increased proportionately in the past few years. As described earlier, there is considerable overlap between SpLDs and therefore it is likely that students who present with more than one difficulty will experience further, or at least different, challenges in comparison to someone with only one difficulty. It is of note that few studies have looked a range of EF domains in emerging adulthood particularly in those with SpLDs.

Executive function skills are vital to new students arriving at university who are being presented with a novel environment in which they need to quickly adapt. In addition, the scaffolding and support structures that may have been previously provided - by parents, schools or colleges for example - are reduced. The transition to being an independent learner will lean heavily on one’s own ability to organise and work independently to overcome these new challenges. However, the individual with specific learning difficulties may not have fully developed the executive functioning skills needed to cope with this rapid change. Parker & Boutelle (2009) argue that it is for this reason that many individuals with specific learning difficulties seek support or training for the first time when they arrive at university. It is a potential ‘tipping point’ and may result in a previously seemingly competent student ‘falling out’ of university.

To better understand the patterns of learning and skills of an individual student, adequate and appropriate measures of EF that can then be practically applied by support services in universities need to be developed. However, the concept of a global measure for EF has been disputed because the variability in presentation of a variety of skills and difficulties are unique to the individual and therefore cannot be grasped by a single measure (Burgess 1997). To overcome this, the questionnaire used in the current study was specifically developed to be appropriate for, and specific to, an adult student population by asking questions regarding executive functioning behaviours which they would be able to identify with and make informed decisions about. The questionnaire followed the rationale put forward by Brown (2009) in his work on EF skills in ADHD. Rather than using cognitive assessments (e.g. in Wodka et al.’s 2008 study) it was decided at the outset of this pilot study that a number of different components of executive functioning would be examined by self reported difficulties. The purpose of this was to gain a pragmatic view of the impact of EFDs in students so that universities (and in particular student support services) would firstly be able to gain a more accurate picture of the potential difficulties and subsequently know how to effectively support individual students. Moreover, this questionnaire may prove a useful tool for student services to adopt when they come in to contact with students who seek support.

In order to support students there is a need to understand how and where their difficulties may present and how to support students with different diagnoses more generally. This pilot study aims to investigate and compare patterns of reported executive function in five groups of students: a) typically developing students (i.e. those with no reported diagnosis of a SpLD), b) those with a diagnosis of DCD, c) those with a diagnosis of dyslexia, d) those with a diagnosis of dyslexia and DCD and e) those with no formal diagnosis but who reported difficulties with their studies.
Method

Participants
Students currently attending university (with or without a SpLD diagnosis) were invited to take part through contact with student support services and posters placed in universities in England and Wales. The study was also advertised on social networking sites (e.g. Facebook) and on the research centre’s website. In total 407 students were recruited to the study. Of the 399 who responded to the gender question, 196 were male and 203 female. The mean age of the student group was 26 years (s.d. = 9.41). One hundred and twenty three students reported having a formal diagnosis of one or more SpLDs. Students who reported no formal diagnosis were further split into those who, when questioned, reported that they were experiencing some difficulties with their studies (no diagnosis but difficulties) and those who did not report any difficulties with their studies (typically developing). A breakdown of the student population recruited to the study is reported in Table 1. For the purpose of the study only the typically developing (n=206), those with a single diagnosis of dyslexia (n=63) or DCD (n=31), a combined diagnosis of dyslexia and DCD (dyslexia and DCD; n=20) and those with no diagnosis but difficulties (n=54) were further examined.

Measures
A criterion based questionnaire was developed to incorporate the six areas of executive functioning skills relating to daily living and life as a student. Development of the questionnaire was undertaken after consultation with four researchers, two psychologists with over five years of experience in the field, an educational psychologist and a doctor who both have over 15 years of experience working with children and adults with SpLDs. In addition, structured interviews were undertaken with students with dyslexia and/or DCD to inform authors about their everyday activities, performance and participation in university. Clinical practice reflections gained from students who had grown up with dyslexia and/or DCD and had been interviewed at the clinic were also used in the construction phase. The questionnaire was piloted for content and readability and amendments were made in wording where appropriate. The questionnaire was split into the following two sections:

Demographic data
This section of the questionnaire collected data such as gender and age and also asked students if they had a formal diagnosis of DCD, dyslexia, ADHD, Aspergers Syndrome and/or language impairment.

Executive Functioning skills
This 77-item scale covered six domains of executive function namely: a) planning (e.g. ‘I always write essay plans before starting an assignment’), b) organisation (e.g. ‘I am good at organising lecture notes’), c) inhibition/impulse control (e.g. ‘I am easily distracted by other people or noise around me when writing assignments’), d) working memory (e.g. ‘When writing an assignment I often lose my flow of thought’), e) metacognition (e.g. ‘I find it hard to use feedback/comments from previous assignments to improve work’) and f) time management (e.g. ‘I am good at estimating how long it will take to complete different assignments’). Each item was scored on a 5-point Likert scale ranging from ‘not at all like me’ to ‘very much like me’. Lower scores indicate greater difficulty for each domain.
**Procedure**

The questionnaire was made available online using SurveyMonkey™. An information sheet explaining the nature of the study was provided before the participant’s consent was requested. Paper copies of the information sheet, consent form and questionnaire were also available on request. The study was approved by the university Research Ethics Committee.

**Data analysis**

Chi-squared cross-tabulation and one-way analysis of variance were used to compare the demographic nature of the groups. Analyses of variance (ANOVA) were used to compare these groups across the six domains of EF. All data were analysed using the Statistical Package for Social Sciences (SPSS) version 21.

**Results**

**Demographic data**

Although the study recruited similar numbers of males and females there was an overall significant effect of gender ($\chi^2 = 28.15$, $p<0.001$) with significantly more males in the no diagnosis (typically developing) group and significantly more females in the no diagnosis but difficulties group. There was no difference between the diagnostic groups in terms of age.

**Executive Function**

Figure 1 describes the profile of reported EFDs for the students in the typically developing, no formal diagnosis but reported difficulties, dyslexia, DCD and dyslexia and DCD groups across the six domains. There was an overall group effect for all measures in relation to the typically developing student group who reported significantly fewer difficulties than the dyslexia, DCD, DCD and dyslexia, and no diagnosis but difficulties groups (Table 2). Significant findings for the other groups are outlined below.

**Planning**

The students with a diagnosis of dyslexia reported significantly fewer difficulties than the DCD group ($p<0.05$).

**Organisation.**

The no diagnosis but difficulties group also reported significantly fewer difficulties with organisation than the DCD ($p<0.001$) and dyslexia and DCD ($p<0.001$) groups but not when compared to the dyslexia group. Students with a diagnosis of dyslexia reported significantly fewer difficulties than those with DCD ($p<0.05$) and dyslexia and DCD ($p<0.001$).

**Inhibition/impulse control.**

The no diagnosis but difficulties group also reported significantly fewer difficulties with inhibition/impulse control than the DCD ($p<0.001$) and dyslexia and DCD ($p<0.01$) groups but not when compared to the dyslexia group. Students with a diagnosis of dyslexia reported significantly fewer problems associated with inhibition/impulse control and than those with DCD ($p<0.01$) or dyslexia and DCD ($p<0.01$).

**Working memory.**

The no diagnosis but difficulties group also reported significantly fewer difficulties with working memory than the dyslexia ($p<0.001$), DCD ($p<0.001$) and dyslexia and DCD ($p<0.001$) groups.
**Metacognition.**

The no diagnosis but difficulties group also reported significantly fewer metacognitive difficulties than the DCD \((p<0.01)\) and DCD and dyslexia groups \((p<0.05)\) but not when compared to the dyslexia group. Students with a diagnosis of dyslexia reported significantly fewer metacognition associated difficulties than those with DCD \((p<0.001)\) and dyslexia and DCD groups \((p<0.01)\).

**Time management.**

The no diagnosis but difficulties group also reported significantly fewer time management difficulties than the DCD \((p<0.001)\) and DCD and dyslexia groups \((p<0.001)\) but not when compared to the dyslexia group. Students with a diagnosis of dyslexia reported significantly fewer time management difficulties than those with DCD \((p<0.001)\) and dyslexia and DCD groups \((p<0.01)\).

**Discussion**

Although several studies have examined the executive function deficits (EFDs) associated with particular specific learning difficulties (SpLDs), these have either concentrated on single components such as working memory (Wolf et al., 2010) or have investigated a wider range of EFDs in children (Gooch et al., 2011, Reiter et al., 2005). Few, if any, have investigated EFDs in terms of separate components in young adults in higher education.

The current study’s aim was to investigate executive functioning in a group of students with a formal diagnosis of an SpLD compared to a group of students without a diagnosis. The no diagnosis group was further divided into those who reported having difficulties with their studies and those who did not (typically developing - TD). Six EF domains were assessed - planning, organisation, inhibition/impulse control, working memory, metacognition and time management.

A series of group comparisons uncovered several differences between the EF scores of the sub-groups of students. Firstly (as expected), the TD students reported significantly fewer difficulties for each of the executive functioning components examined; planning, organisation, inhibition/impulse control, working memory, metacognition and time management than the other groups. These findings are in agreement with the working memory data reported by Wolf et al. (2010) and Reiter et al. (2005) and the planning data reported by Reiter et al. (2005). Unlike Reiter et al. (2005), however, this study also found significant differences in other components of executive functioning such as inhibition/impulse control. A possible explanation for this is that some of the students with DCD and dyslexia may also have undiagnosed ADHD, which often overlaps with other SpLDs. Secondly, when examining the relationship between the diagnosis sub-groups more closely it was found that the dyslexia group reported significantly fewer difficulties for a number of components of executive functioning; namely organisation, inhibition/impulse control, metacognition and time management than either the DCD or DCD and dyslexia groups. The dyslexia group also reported significantly fewer difficulties than the DCD group for planning. Difficulties with working memory, however, were reported equally across the diagnosis groups. These are interesting findings for three reasons: a) the combined effect of the overlapping ‘dyslexia and DCD’ diagnosis seems to have a cumulative effect on EF difficulties (compared to a dyslexia only diagnosis), b) students with DCD are considerably worse off in terms of executive functioning skills than those with dyslexia and c) the EF measures used
here appear to be able to separate out differences between the groups and may support evidence for different underlying mechanisms for the EF components. In accordance with Kirby et al. (2008), this research highlights the importance of considering the profile of individual students with an SpLD diagnosis not merely considering their needs attributed to their diagnostic label.

Of interest also is the group of students who do not have a diagnosis of an SpLD but reported having difficulties with their studies. This group recorded significantly more difficulties across all six EF domains measured than the TD group. On closer inspection, it would appear that this group are following a similar profile to the group of individuals with dyslexia, but this would require further investigation. It is clear though, that this group may be at risk of not achieving their academic potential as they are not aware that support is available to them. This highlights the need to potentially screen all students for executive functioning skills to consider which ones are at risk of having challenges and not only those who come to university with a label and are motivated to seek support.

It is important to note that the students with a diagnosis of an SpLD recruited to the study did not follow the expected gender ratio pattern reported in the literature, that is that SpLDs are more often recognised in males than females (Green & Baird 2005, Lingam et al., 2009 on the prevalence of DCD in children for example). In addition, there were significantly more females in the no diagnosis but difficulties group which raises the question of whether difficulties experienced by girls are being missed in earlier education and presenting with greater difficulties in every-day living and learning later on in life. Alternatively, this may be a factor of sampling and that more females are willing to engage in research of this sort (Sax, Gilmartin & Bryant, 2003).

Given that the research took place in a natural setting (to encourage participation), one limitation levelled at this study could be that formal cognitive assessments and clarification over self reported diagnosis was not possible. It could be argued, given the literature on overlap, that some of the students included in each diagnostic group may also have another undiagnosed SpLD. Moreover, as the questionnaire was developed for the purpose of this study and is, therefore, not yet standardised further research into the validity and reliability of the questionnaire is required. A future study would aim to examine the concurrent validity with standardised assessments such as the Behavior Rating Inventory of Executive Function - Adult Version (BRIEF-A) (Roth, Isquith & Gioia, 2005) for example. Further development of this questionnaire tool could be useful for student support and advice services to use in the future.

**Conclusion**

The move from compulsory to non-compulsory education is considered one of life’s major transition periods, together with the move from primary to secondary education and from education to employment (Kirby et al., 2008). In higher education the responsibility for learning shifts away from the teacher or institution and toward the individual student. In addition, this is typically the stage at which a young adult leaves home for the first time. Adjusting to a more independent style of learning together with taking care of essential day-to-day responsibilities (such as shopping, laundry, paying bills etc.) and adjusting to the social aspect of student life can prove challenging for typically developing adults. For students with specific learning difficulties the combined effect of these factors can become a
tipping point. Anecdotally, student support services report the first major influx of first year undergraduate students to their offices towards the end of the autumn term when the first set of written assignments are due for submission.

Findings from the study emphasises the need to acknowledge that students who may present themselves at student support services with a single diagnosis may actually have other undiagnosed SpLDs also. Since overlap is common and consistent in SpLDs it may be the case that some of the students studied, and across universities more generally, may also have undiagnosed ADHD as well, thus providing an explanation for the difficulties found across all domains of executive functioning in this study (Barkley, 1997). This is acknowledged as a limitation of the study but was beyond its scope. However, the study has demonstrated that those with a SpLD have significantly poorer pattern of EF skills than their typically developing peers. It is imperative therefore, that students receive the right type and amount of support for their specific patterns of difficulties. In order to do this, support services may need to become more aware of the overlap between specific learning difficulties and the commonality of EF challenges. At present it seems that there is and has been a greater focus on the assessment of dyslexia and less focus on the other SpLDs that commonly overlap with it. In order to gain a more accurate profile of the student and thus their needs, it may be beneficial to undertake wider screening in any one who presents with a specific learning difficulty.

However, while a label or diagnosis is the route to gaining access to support at present in the UK, it is perhaps more fundamentally important for support services to listen to the ‘voice’ of the student to assess their needs and actual functioning of that particular person along with cognitive measures and diagnostic labels to determine the level of support given. In addition, it is clear that there are a number of students without a diagnosis that are struggling with their studies and would not therefore get the support they may need. A tool such as this one could be used as a quick, cost effective means for support services and tutors to ensure that all students are best supported during their academic studies.

References


Table 1. The frequency of the student population for the different diagnostic categories.

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<th>Diagnosis Category</th>
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<td>Single Diagnosis:</td>
<td></td>
</tr>
<tr>
<td>Dyslexia</td>
<td>63</td>
</tr>
<tr>
<td>DCD</td>
<td>31</td>
</tr>
<tr>
<td>Two or more diagnoses:</td>
<td></td>
</tr>
<tr>
<td>Dyslexia and DCD</td>
<td>20</td>
</tr>
<tr>
<td>Dyslexia, DCD and other</td>
<td>5</td>
</tr>
<tr>
<td>Dyslexia and other</td>
<td>2</td>
</tr>
<tr>
<td>DCD and other</td>
<td>2</td>
</tr>
<tr>
<td>Typically Developing</td>
<td>206</td>
</tr>
<tr>
<td>No diagnosis but difficulties</td>
<td>54</td>
</tr>
<tr>
<td>Other</td>
<td>18</td>
</tr>
</tbody>
</table>
Table 2: The executive function domains for the different student groups (lower scores = greater FE difficulties)

<table>
<thead>
<tr>
<th>EF Domain</th>
<th>TD (%)</th>
<th>Dyslexia (%)</th>
<th>DCD (%)</th>
<th>DCD &amp; dyslexia (%)</th>
<th>No diagnosis but difficulties (%)</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Planning</td>
<td>75.24</td>
<td>63.26</td>
<td>56.76</td>
<td>61.44</td>
<td>63.23</td>
<td>F(4, 349) = 19.05, p&lt;0.001</td>
</tr>
<tr>
<td>Organisation</td>
<td>68.10</td>
<td>58.39</td>
<td>52.23</td>
<td>48.38</td>
<td>62.56</td>
<td>F(4, 349) = 24.60, p&lt;0.001</td>
</tr>
<tr>
<td>Inhibition/impulse control</td>
<td>68.91</td>
<td>60.16</td>
<td>52.33</td>
<td>51.59</td>
<td>60.94</td>
<td>F(4, 349) = 24.56, p&lt;0.001</td>
</tr>
<tr>
<td>Working memory</td>
<td>68.63</td>
<td>47.09</td>
<td>42.78</td>
<td>39.83</td>
<td>59.42</td>
<td>F(4, 349) = 43.19, p&lt;0.001</td>
</tr>
<tr>
<td>Metacognition</td>
<td>68.24</td>
<td>61.90</td>
<td>50.15</td>
<td>51.64</td>
<td>59.40</td>
<td>F(4, 349) = 21.10, p&lt;0.001</td>
</tr>
<tr>
<td>Time management</td>
<td>72.71</td>
<td>64.83</td>
<td>54.09</td>
<td>53.98</td>
<td>67.12</td>
<td>F(4, 349) = 18.82, p&lt;0.001</td>
</tr>
</tbody>
</table>

Figure 1. The six executive function domains for the different diagnostic groups (scores are expressed as percentage; lower scores = greater EF difficulties)
Establishing a blended assessment of dyslexia in South Africa

By Dr Ian Smythe
Independent Consultant

Abstract
In the UK there are clear guidelines for the assessment of dyslexic students in higher education, with professional bodies, professional qualifications and test batteries that can perform the task using appropriate norms. However, in South Africa, the conditions are very different, and the lack of maturity in the ‘dyslexia industry’, including a lack of a cohesive governing body, a lack of locally normed tests, and no standard guidelines, is giving rise to concerns about allocation of disability support funding in the area of dyslexia. In an attempt to overcome concerns about inconsistencies and irregularities in service delivery, a technology-aided solution is put forward that encapsulates several tried and tested systems from the past 40 years of computer-supported dyslexia assessments. Though the focus here is on a case study of further education colleges in South Africa, the outcomes are relevant for many culturally diverse Higher and Further Education environments around the world, including the UK, and highlight the future of blended assessment for diverse contexts.

Background of needs in South Africa
The South African government recently announced a target of 11 million jobs to be created by 2030 to rapidly expand its current business activities. This will need to be underpinned by an annual enrolment rate of 1.25 million in vocational colleges, along with a significant increase in university graduates to lead research, development and management. To achieve their targets, not only will enrolment rates need to increase, but also graduation rates of, for example, FET colleges will need to rise to 75% from current levels as low as 35% in some areas (Spaull, 2013). While standards are improving, it is not happening at a rate that will fulfil this government vision. One of the principle barriers to improvement in that most analyses identify the level of failure, but do not provide sufficient data intelligence to identify causes of failure, and how the system could be changed for effective improvement. Without this intelligence, it is not possible to dissociate the diverse factors. This has a knock on effect of making it highly problematic to identify the difficulties of an individual in a manner that will allow the label of dyslexia to be applied, which in turn would release funding for appropriate support.

Disability allowance in Further Education in South Africa
Whilst the funding is small, the education system does at least recognise student needs, and has created funding that can be used to support those in education, subject to the appropriate conditions being met. Central to those conditions is an assessment of needs. Under the disability support guidelines (NSFAS, 2013), dyslexic students are eligible for funding. Student can claim for hardware such as digital recorders, and software including text-to-speech, speech-to-text and concept mapping tools. Funding is also available for diagnostic assessment. To access this funding, an application form needs to be completed by a medical practitioner or rehabilitation practitioner who confirms the diagnosis, including the fact that it is long term, recurring and limiting and recommendations, providing supporting information (e.g. history) where appropriate. The difficulty in proving beyond

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reasonable doubt the diagnosis due to a series of issues which including reliability of assessors and access to local norms which arguably is more problematic in South Africa than most other places (Smythe, 2014a, 2014b). There is a lack of guidance as to who can provide that assessment, the qualifications of the professional that will be accepted, the tests that need to be used, and any control process. Consequently there is uncertainty about the validity and reliability of the outcomes.

**Understanding dyslexia assessment**

Inconsistencies in dyslexia assessments will always occur (Smythe, 2014a). But when there are high stakes implications for the outcome of those assessments, consistency and fairness are important. In an environment when dyslexia identification and support may be considered as an emerging industry, it is important to create guidelines and practices that minimise inconsistencies and abuses of the system that may arise in an unregulated environment. The danger is that without a ‘neutral’ adjudicator, the allocation of dyslexia support funding may be inappropriate through misguided approaches and future funding cut for those who need it most. The socio-economic environment and language diversity mean that those protocols used in largely monolingual context (e.g. The UK) cannot be applied in South Africa.

South Africa has eleven national languages, yet the only tests available are in English, and rarely locally normed. Furthermore, how does one compensate for the known impact of socio-economic status (SES) when 8% of the FET students study by candlelight and 6% average less than one meal per day? Thus factors usually used in European and US research on SES, e.g. parental education, parental job status and household income are inappropriate in these settings (Poh and Smythe, 2014).

**Defining the fulfilment criteria**

There are two aspects to the identification and support of the dyslexic individual. The first is the fulfilment of the criteria as set out in the guidelines, which is usual with respect to demonstrate (beyond reasonable doubt) that the person is dyslexic. The second is about the needs of the dyslexic individual. Whilst the two are interwoven, as the individual gets older, so the support needs expand beyond the immediate concerns of the definition.

An example of a definition, based on that recommended by the Health Council of the Netherlands (Gersons-Wolfensberger DCM and Ruijssenaar WAJJM,1997), British Psychological Society (1999) amongst others is:

*Dyslexia is a difficulty in the acquisition of fluent and accurate reading, writing and spelling that is neurological in origin.*

This definition provides a clear indication of the symptoms that need to be present, and the measurements required, though not the criteria. Proof of conformity to that class (i.e. dyslexic) can be achieved by demonstrating what is in the definition. Fluency and accuracy is relatively easy to demonstrate, whilst the difficulty in acquisition is usually based on a history of not missing key components of the learning process. For this reason, the recommendation for South Africa is to adopt this or a similar definition, and the emphasis is on the provision of an assessment that can be proved in accordance with these defining characteristics.
Process development

A number of systems have been developed which have attempted to use computers to help assessment and overcome inconsistencies in the process. As early as 1971, software was developed to evaluate the skills of an assessor using an expert system (Lehrer, 1973). In that project, teachers were trained in the assessment process, and then uploaded their assessment results to compare their recommendations to those of the computer, which was programmed to provide the same answers that a panel of ‘expert’ human assessors would give. Whilst several other systems have been tried, the only system that had noted sustainability was developed by the California Community Colleges and implemented in 1994 in collaboration with all the principle stakeholders (California Community Colleges (2002)).

In order to deliver the expected outcomes (i.e. a report with recommendations) the system (computer or human based) needs to have three key sections:

A) Data collection
B) Data analysis and synthesis
C) Recommendation

Each of these maybe considered to have an element of blended assessment which for South Africa would help relieve some of the more significant issues.

Data collection

Data collection refers to the collection of information, through questionnaire and responses to assessments. This can combine the skills of the assessor with information gathered by the computer, to create a blended assessment process. As highlighted below, three processes are involved:

1. Initial screening
2. Measuring academic achievement
3. Measuring cognitive strengths and weaknesses

Initial screening

In the original Californian system (California Community Colleges, 2002), the set-up was designed to be a response to people coming through the door. This initial interview took place prior to the rest of the service, which involved human assessor and paper-based tests, results of which were inputted by hand into the system. However, with an increased requirement to proactively respond to needs of all students and a greater potential to use computers for low cost initial data collection, there is considerable potential to record academic achievement and assess cognitive strengths and weaknesses through online tools. Therefore, this interview may only happen after all the computer-based data collection had happened, and results analysed to identify who needs that interview. Thus, a (human) assessor would be available to not only collect additional information, but also to make decisions on borderline (or ambiguous) cases.

In a world that conforms to a social model, this should be criterion led, so that everybody who fails the first level criteria is supported. However, for pragmatic reasons, the cut-off criteria for those who see the human side of disability provision need to be based on the capacity of the support services. Thus in a college of 5000 individuals, until the real needs
are understood and an appropriate support system in place, the office may not be able to support more than 100 individuals, even though 10% may need support.

**Measuring academic achievement**

Unfortunately the pieces of paper presented as proof of qualifications in South Africa do not always reflect the true skills of the individual. Recent work in FE institutions clearly demonstrates that individuals have literacy skills that are insufficient to allow them to pass the courses they chose to follow. Yet the course admission was based on the qualifications claimed. For this reason, basic general academic skills, and specifically reading, writing, spelling and maths should be tested. This extends well beyond the discussions of disability, reinforcing the idea that this type of screening should be for all individuals, not just those who claim to have specific difficulties. This would not only help the institutions (including decreasing failure rates) but also help the individual by identifying early the support necessary.

Whilst computers cannot accurately perform all these tasks (e.g. a true measure of reading skills using speech-to-text is not reliable enough for high stakes testing), many of the tasks can be performed either using direct measures (e.g. spelling) or correlates (e.g. correlates of reading). Where required, a human assessment can be used (based on a triage process) to create a blended assessment process.

**Measuring cognitive strengths and weaknesses**

There are many protocols available for the identification of the dyslexic individual (e.g. SASC, 2013, Warmington, Stoathard & Snowling, 2012, Hatcher, Snowling & Griffiths, 2002), and whilst measures of literacy may reveal academic skill levels, it is also necessary to identify the underlying causes in order to ensure that support is appropriate. Research suggests that assumptions made in the assessment of dyslexic individuals in other contexts (e.g. the UK) cannot be made in South Africa and it is problematic to differentiate external causes (e.g. poor teaching) from internal causes (e.g. dyslexia) (Smythe, 2014b). In order to highlight one of the issues, and demonstrate the need for processes to be developed for the local community, in collaboration with all stakeholders, the non-word spelling test is highlighted.

Non-word spelling is one of the most widely recognised tests used for the assessment of the dyslexic individual (Rack et al., 1992). Using an online testing system, data was collected in South Africa to identify the potential and issues in using this test in this diverse environment. Responses were collect from FET students with respect to a small set of items, with an in-depth analysis being performed on one particular non-word: ‘mip’ (Smythe, 2014b). The word had been recorded by an English voice-over professional and had correct spellings for 88% of children aged 12 in Ireland, suggesting that the sound file could not account for errors. However, as shown in Table 1, the percentage for the correct spelling of the target varied from 51% (Afrikaans) to 8% (Ndebele). (N.B. The figures reported for ‘English - South Africa’ include a large number of individuals who report they are English first language but are not. Hence results are similar to those of local languages.) This leads to the question of whether the dominant spelling of a non-word in a given language should be that which is the most frequent. For example, if 37% of Tswana students spell the target word as ‘map’ (and only 15% as ‘mip’), was that the ‘correct’ answer? The result shown here have huge implications not only for the identification of dyslexia in South Africa (and in particular the use of a normed non-word spelling test), but also for the identification of the dyslexic
multilingual individual anywhere. Note that given the size of this cohort, it could be possible to create a norm. But that this is usually not an option in most assessment environments. Note that whilst assessment of the underlying cognitive skills such as phonics may appear to some as patronising for adults in the UK (see for example SpLD forum thread September 2014), in the complex linguistic, cultural and learning environment of South Africa, this is an important part of the process. Identification of underlying difficulties may be a consequence of poor teaching, to which only monitoring of intervention will identify if this is an (external) teaching issue, or a (internal) cognitive issue such as dyslexia.

Table 1: Common responses by South Africa students to a non-word, shown by language.

<table>
<thead>
<tr>
<th>Language</th>
<th>Afrikaans</th>
<th>Ndebele</th>
<th>Northem Sotho</th>
<th>Sotho</th>
<th>Swati</th>
<th>Tsonga</th>
<th>Tswana</th>
<th>Venda</th>
<th>Xhosa</th>
<th>Zulu</th>
<th>English</th>
<th>African</th>
<th>S Africa</th>
<th>Overall</th>
<th>Ireland</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample size</td>
<td>84</td>
<td>214</td>
<td>792</td>
<td>734</td>
<td>153</td>
<td>356</td>
<td>1226</td>
<td>228</td>
<td>437</td>
<td>839</td>
<td>3192</td>
<td>8255</td>
<td>1611</td>
<td></td>
<td></td>
</tr>
<tr>
<td>map</td>
<td>16.67</td>
<td>23.36</td>
<td>28.79</td>
<td>33.24</td>
<td>28.76</td>
<td>24.16</td>
<td>36.87</td>
<td>27.19</td>
<td>31.35</td>
<td>31.11</td>
<td>30.76</td>
<td>31.01</td>
<td>0.62</td>
<td></td>
<td></td>
</tr>
<tr>
<td>meap</td>
<td>1.19</td>
<td>4.67</td>
<td>3.03</td>
<td>5.18</td>
<td>6.54</td>
<td>3.37</td>
<td>5.55</td>
<td>5.26</td>
<td>7.09</td>
<td>5.60</td>
<td>6.11</td>
<td>5.43</td>
<td>0.62</td>
<td></td>
<td></td>
</tr>
<tr>
<td>mep</td>
<td>3.57</td>
<td>1.87</td>
<td>2.53</td>
<td>3.95</td>
<td>3.92</td>
<td>3.37</td>
<td>3.51</td>
<td>4.82</td>
<td>6.86</td>
<td>6.56</td>
<td>5.17</td>
<td>4.58</td>
<td>0.37</td>
<td></td>
<td></td>
</tr>
<tr>
<td>mck</td>
<td>0.00</td>
<td>7.94</td>
<td>3.28</td>
<td>3.68</td>
<td>6.54</td>
<td>3.03</td>
<td>2.94</td>
<td>4.82</td>
<td>3.20</td>
<td>3.58</td>
<td>3.60</td>
<td>3.63</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>mlk</td>
<td>0.00</td>
<td>5.61</td>
<td>3.16</td>
<td>2.04</td>
<td>5.23</td>
<td>3.93</td>
<td>1.14</td>
<td>4.82</td>
<td>3.89</td>
<td>4.05</td>
<td>2.10</td>
<td>2.65</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>me</td>
<td>1.19</td>
<td>3.27</td>
<td>3.28</td>
<td>1.63</td>
<td>3.92</td>
<td>3.09</td>
<td>1.22</td>
<td>4.82</td>
<td>2.97</td>
<td>2.50</td>
<td>1.91</td>
<td>2.23</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>mic</td>
<td>1.19</td>
<td>0.47</td>
<td>1.77</td>
<td>1.63</td>
<td>0.00</td>
<td>1.12</td>
<td>1.55</td>
<td>0.44</td>
<td>1.37</td>
<td>1.31</td>
<td>1.10</td>
<td>1.26</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>nip</td>
<td>0.00</td>
<td>1.87</td>
<td>0.38</td>
<td>0.54</td>
<td>0.65</td>
<td>0.00</td>
<td>0.65</td>
<td>0.00</td>
<td>0.69</td>
<td>0.60</td>
<td>0.75</td>
<td>0.63</td>
<td>0.93</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This highlights the importance of large data sets, possible through online data collection, which can help identify and resolve such issues, as well as the need for consensus on widely accepted criteria. Note that although the students were of diverse ages, there is no significant age-related trend.

Data Analysis: Computer-based analysis of strengths and weaknesses

It has been suggested that dyslexia assessments often appear to have an element of intuition (Smythe, 2014a), rather than being objective, whereby the ‘activity of the intuition consists in making spontaneous judgments which are not the result of conscious trains of reasoning’ (Turing, cited in Hodges, 1997). This leads to inconsistencies which are magnified when formal processes are not in place. Hence for South Africa, a blended assessment approach incorporating a computer-based validation of the human and computer based assessments to maximise consistency, would be a welcome addition to the advisors toolkit. Much of the early work on using computers in the dyslexia assessment process used expert systems (i.e. rule based systems that were designed to provide the same response as a human evaluator) for training evaluators rather than assessing dyslexic individuals. Since the early 1970’s there have been attempts to use computers for dyslexia-related training and assessment and in particular ‘to develop interactive computer programs that would simulate the diagnostic and clinical teaching processes and to implement those procedures within the curriculum of the learning disabilities program’ (Lerner & Schuyler, 1973). The early systems compared the results with expectations using an expert system, which is best described as is a computer system that attempts to emulate the decision-making process of a human expert or team of experts (Wikipedia, 2014). Despite an apparent favourable review, the results did
not seem to lead to more action. In the mid-80s, Hofmeister and his team were reviewing the potential of computer-based expert systems for the diagnosis and treatment of learning disabilities (Hofmeister & Ferrara, 1986). The only system that appeared to have sustainability was the California Community Colleges system, designed to ‘reduce or eliminate the inequities, inconsistencies and biases that characterized previous eligibility models.’ It was originally developed in the mid 1990’s, and although it is still used in some places, the discrepancy model that it uses is no longer considered to be a valid approach to diagnosis. However, it did add to our knowledge of process development in this field.

Recently, more sophisticated methods such as artificial neural networks (ANN’s) have been used as research tools not only for dyslexia (Jain et al., 2009, Kohli and Prasad, 2010, Upandhyay et al., 2013, Wu et al., 2006) but also for other SpLDs such as SLI (Bharathi & Shanthi, 2011), ADHD (Delavarian, Towhidkhan, Dibajnia and Gharibzadeh, 2012) and autism (Cohen et al., 1993). These techniques have greater opportunity to unlock the complexities of dyslexia diagnosis as they look at non-linear multi-dimensional problems, and may be used to evaluate inconsistencies. Interestingly, most researchers assume that their ANN models for dyslexia are inadequate, rather than assume inconsistencies in the human assessments against which success is measured. However, Wu et al. (2006) noted ‘that certain students manually diagnosed as LD (learning disabilities) are always classified as non-LD, no matter what technique is used.’

Using lessons learned from other systems, including the California Community Colleges, the principle proposed for South Africa would be for every student to engage with a computer-based system starting with some form of simple triage. If computer-based testing of literacy and cognitive strengths and weaknesses was available, that would be the next phase. Otherwise, traditional human/paper-based testing would be used utilising outcomes from the triage, whereby standard scores of tests agreed by the stakeholder groups would be uploaded to the centralised system. N.B. In South Africa few commercial tests are available with appropriate local norms.

Outcomes and recommendations would be guided by an expert system developed for this purpose. A minimum of two models will be used in the development of an expert system, based on a combination of stakeholder engagement techniques, such as the Delphi method (e.g. Cuhls, 2003), Analytic Hierarchy Process (a mathematical bases multi-assessor ranking system. See for example Haas and Meixner, 2009, Saaty, 1987) and Analytic Network Process (a weighted ranking system – see for example Saaty, 1999). A data-driven approach would include the use of ANN’s.

The system could either accept results and provide recommendations, or accept both assessments and recommendations, and check them against the expert system. If the recommendations of the human assessor using this blended assessment evaluation method are consistent with one or both (computer-based) models, they are approved. If they are inconsistent with both (e.g. in borderline cases), there will be a request for further information or justifications as to why that recommendation is made. The inconsistencies may be used for improving the system.
Recommendations

Recommendations should be linked to the needs identified in the assessment process. Recommendations of this expert system may include not only study skills courses, assistive technology, learning support and reasonable adjustments for examination for example, but also further courses to supplement any literacy skill deficits which may lead to failing a course.

Over the next few years it is expected that some of the easy to implement support, such as online self-tutoring study skills course, will be made available to all students, to delivery some support to those who appear to need help but do not meet the full (dyslexia) criteria. However, the capabilities of the computer are still limited, and it is assumed that blended support will accompany blending assessment and learning.

Implications for Further and Higher Education institutions in the UK

With ever greater demands on limit funding, disability services need to explore ways to ensure legal compliance (e.g. the Equality and Diversity Act 2010) whilst not overburdening their limited resources. Blended assessment provides one possible solution, where the computer provides some of the data, at least through a triage stage, and the assessor augments the initial computer-based assessment by focussing on the areas that the computer cannot do. Analysis and recommendations can be semi-automated, with the last word and arbitration being in the hands of the human assessor. This approach will maximise the number of students supported by reducing the administrative (data collection) role of the support services, but without compromising the support given.

Furthermore, by pooling the results from multilingual individuals, it may be possible to use the data to create more robust guidelines (as, highlighted above, it would be inappropriate to suggest norms would be possible) to ensure appropriate support is given to all multilingual dyslexic individuals.

Conclusions

In conclusion, in order to ensure sustainable outcomes, such a system must fulfil each of the following needs:

1. To identify the dyslexic individual in a consistent manner that would allow allocation of additional resources using objective data that informs assessment and support (needs analysis).
2. Be widely accepted by all stakeholders, and available throughout the country with a minimum of bias due to service support, language and cultural variations.
3. Be cost and time efficient, and consistent with other systems and resources.
4. Provide ongoing engagement with professional working in the process.
5. Be regularly updated and adapted to meet the changing demands.

It would seem that the practitioners in South Africa are keen to engage with such as semi-automated system. Funding is not a significant issue. What is needed is a mechanism to bring stakeholders together and agree the process. Trials of a blended computer-moderate assessment system will be starting in 2015 in at least one FET college in South Africa. But the results from that are already being anticipated by many others, not just in Johannesburg.
References


My brilliant and astonishing state school northern son (John) spent the last year of his life as a post graduate history student at Balliol College, University of Oxford. In many ways it was a good year, thanks to John’s determination and the staff and students at the university who were totally committed to making it so, despite horrible unforeseen circumstances. The media is quick to denigrate Oxford for its elitism. I feel moved, as a parent to tell another story which reflects on the compassion and sensitivity my son received as a valued Balliol student.

Despite gaining a First, and then a distinction at Masters’ level, at Queens University Belfast (another fine Russell Group institution), John was amazed to get into Oxford. He was filled with imposter syndrome when he arrived in September 2011, but had achieved a sense of belonging by the time we visited in October. Freshers’ week helped, as did activities which threw nervous students together in academic departments and halls of residence and helped them to realise that they all felt nervous and astonished about gaining a place. John did not need a visit from his family a few weeks into term as he had quickly established a network of lovely friends and was busy studying, socialising and settling in to a new identity as a successful and worthwhile person with much to offer to academia and the world. It was a joy to see him walking into Balliol as if he owned the place.

By November 2011, without warning, John was diagnosed with advanced metastasised cancer and his dreams of an Oxford education were potentially shattered. Staff at the university however took the view that John was a Balliol man and he could remain at Balliol as long as possible. Compassion oozed out of the university from all quarters. My main contact was with the Disability Service, specifically Pete Quinn (Head of Service) and Helen Young (Disability Adviser). They didn’t make a fuss, were very careful about John’s confidentiality and must have been instrumental in the smoothly efficient and totally compassionate approach adopted by the whole institution.

John continued to live in halls and attend classes for most of the year while undergoing chemotherapy. He was supported by academic, medical, disability and student services staff and others who seemed to work together somehow behind the scenes in a joined up and understated way. Helen emailed him regularly without being intrusive. John expressed surprise when the college nurse just turned up when he was sick from chemotherapy or an encouraging letter arrived out of the blue from his academic adviser. His sense of belonging continued even after he interrupted his studies, with a view to returning once the horrible cancer ordeal was over. He was able to return and attend occasional lectures, formal hall and garden parties and to stay in his halls of residence and visit his lovely friends, some of whom even kept him company during long chemotherapy sessions, and at the hospice. Frequent contact with the Chaplain gave John comfort and confidence. His dad remembers

999 Corresponding author. Former Head of Disability and Wellbeing Services
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London South Bank University, Department of Education. Email: Martinn4@lsbu.ac.uk
driving fast from the Churchill Hospital to Balliol for John to attend Doug’s lunch which is an important and informal get together for students (of all faiths and none) with the Chaplain (Doug). When John was away from Oxford he received letters, cards, emails and visitors and it was very clear to him that he was still welcome and not forgotten.

John died on 12-12-12 just over a year after his diagnosis, and after a huge amount of gruelling chemotherapy. University staff and students had maintained contact with him throughout his illness and visited him in the hospital and the hospice. His friends even came after he lost consciousness and brought with them messages they had collected for the family.

The night John died the flag flew at half-mast over Balliol (I know this because Pete Quinn took the trouble to text me). The Chaplain held a small service in the chapel for John’s friends. We celebrated John’s life in Balliol Chapel in February. The Chaplain was clear that he viewed John’s memorial service at Balliol as something which was also an important aspect of pastoral care for other students, and needless to say the chapel, the overspill room and Balliol Hall were all packed. Someone had even arranged for the sun to shine. It seemed appropriate that John’s body should remain in Oxford and on Christmas eve we buried him in Wolvercote cemetery. Compassion towards us as a family did not end with John’s death and we are still receiving messages of support from university staff and students.

John’s brief experience at Oxford was not what we expected and we would far rather have been able to celebrate his Civil Partnership in Balliol Chapel. It was, however, astonishing and uplifting. I have worked in higher education for many years and felt privileged to hold the positions of Head of Disability and Well-being Services at the LSE and at Sheffield Hallam, roles in which I have been able to do something useful for students. Oxford set the bar high and LSE exhibited incredible compassion too towards me, as their employee and a parent and towards my son who was baptised by the LSE chaplain in the hospice a week before he died. Queens also stepped up by facilitating John’s attendance at his Master’s graduation long after the cut-off date and through regular visits from friends and faculty and a wonderful contribution to the memorial service. John’s last coherent conversation was with Catherine Clinton, a respected Professor of American History from Queens, who flew over from Belfast to see him in the hospice. Queens have planted a tree in John’s name and the History department has created a memorial prize.

The compassion, reassurance and validation John received came from all quarters, as has the support for his family since his death. Staff in the Porter’s Lodge, those who provided the catering and technical support for his memorial, the people who helped us to choose John’s memorial bench are amongst the many who deserve acknowledgement. Pete and Helen looked after me with great care when I gave a lecture for Oxford DERN at the university soon after John died. It is impossible to think of anyone who was anything other than astonishing.

In Holywell Manor, John’s hall of residence, his name has been painted on a notice which identifies which room he had been allocated for this academic year. He will have seen this when he was there in November. Thank you for that remarkable act of kindness which will have given him hope.
John’s memorial bench is in Balliol garden. He has a memorial fund at Balliol.
www.balliol.ox.ac.uk/alumni-and.../the-john-beecher-memorial-fund

As a sector we need to think about the way in which we support terminally ill students and this is an area of research I am considering. I am convinced we can all learn from Oxford’s example.
I’d like to start by highlighting a few illustrative disabling encounters. Then I’d like to consider whether any insights into what goes on within these encounters can be gained from existential philosophy.

There’s a branch of the Accessorize fashion shop near where Emmeline lives, but she doesn’t often go there, though she likes the chain. That’s because the assistant in this particular shop invariably greets her “Hello, Trouble!” Emmeline is 36 and has a doctorate from University College London. Last time she went to the shop, a few months ago, the assistant kept her waiting for ages while she served a number of other customers. Finally she turned and said to Emmeline “Just teasing - I wouldn’t really forget about you!” For some reason the assistant seems to think they are playing a game. It’s completely baffling.

Alice had just about finished her weekly shop when she remembered she had not got her cherry tomatoes. She hurried to the back of the shop to the fruit and veg section and was approached by a middle-aged woman who asked “What’s wrong with your legs?” She felt a little nonplussed at the woman’s directness, but nevertheless found herself explaining her impairment. She was left afterwards feeling unsure about what made it okay for this to happen.

I recall the time – twenty years ago now, when I was thirty – when I’d escorted the official from the Sports and Arts Foundation to the venue of his next meeting. He was visiting Newcastle and didn’t know his way around. I’d finished my last meeting and was going that way anyway, so offered to show him. As we reached his destination I made to leave, saying “There you go, mate.” He reached into his pocket, drew out a pound, and replied “Here you are, son. Buy yourself some chocolate.”

Encounters like these – which take place everywhere all the time and are part of disabled people’s everyday experience of life but have, perhaps, been little commented on - involve confrontation with the absurdity of life. You’re in a state of unreflective consciousness, caught up in the stream of what you’re doing, what you’re thinking, what’s going on, when some non-disabled person imposes themselves and brings back home to you the fact that there’s an enormous gulf between the self-you-think-you-are and the self-they-think-you-are. You’re busy relating to yourself as a complex individual. They see you as someone whose primary significant characteristic is that you’ve got something ‘wrong’ with you. From a situation a moment ago where you were a being-in-the-world you are reminded of your fundamental separateness from the world, of your aloneness in a cold universe.

You are taken aback at what’s been said and at the assumptions being made about you. It’s disconcerting, annoying, upsetting, and can be temporarily confusing as you try to figure out where they’re coming from and how to respond. It’s difficult, because often while the words themselves haven’t actually been intended to be offensive, the layers of meaning that

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underlie them carry a weight of oppression. Yet it is during encounters like these, in the flow and flux of life, that you have to choose who you are and who you want to become.

Titchkosky and Michalko (2014:101) have described disability as ‘a life that is lived in the midst of the meanings given to it’. Disabling encounters involve the imposition of a dominant understanding, a view which regards impairment as unfortunate, regrettable difference; and involve expectations that you will give your assent and act out your part accordingly as the grown-up child, the object of fascination, the compliant cripple. Reeve (2014) uses the term psycho-emotional disablism to describe the reasons why many disabled people internalise the values which oppress them and identify their own embodiment as the cause of the unwelcome intrusions and banal comments they receive. It is very easy when you tend to experience these things as individuals – when you’re on your own - to imagine that they happen because of who you are as an individual. It is tempting to try and distance yourself from your impairment, to try and act as if this is something of minor significance to your life experience or something you’ve transcended.

What I’d like to explore in this paper is this question: can existential ideas offer any insight into what goes on in such encounters or on how they might be responded to? As Kotarba (2009:140) describes it, existentialism is a sensibility, a way of life, a passion for living, an orientation to the flux and emergence of actual lived experience. It involves alertness to being in the here and now, and rests on a number of assertions. Among these are that human beings are not fixed selves; that we are what we choose to become; and that we have responsibility for who we become. In opposition to essentialist approaches, which argue that we arrive pretty much ready-made with a specific set of dispositions when we are thrown into the world (so that the rest of our lives involve a development of what was there at the beginning), existentialists argue that we are not determined by where we have been - but that we become ourselves through the decisions and choices we make as we go through life. We are constantly making sense of ourselves and figuring out who we are. Our identity and characteristics are a consequence – and not causes – of the choices we make. As Sartre (2007:22) says, ‘Man is nothing else but what he makes of himself’.

Of course, this choosing ourselves doesn’t take place outside the social contexts in which we find ourselves. Facticity places limitations on our freedom. We are always in a given world, with other people, and in situations which govern our experience. The problems and choices we are faced with need to be made sense of in their cultural, social and political settings. In Merleau-Ponty’s terms (in Kotarba, 1984), our becoming must be grounded in the real (social) world if we have any intention of coping with the given world.

Another major theme of existential philosophy involves our awareness of death, of the fact that one day soon we must die. It is this knowledge that makes life – brief and conflict-ridden – so inexpressibly important. It is all we’ve got. It is also this knowledge that makes anxiety a fundamental human characteristic: we are filled with conflict between potential and limitation. Heidegger (2005) explains, however, that this anticipation of death is not to be resented and avoided; rather, anxiety in the face of death brings an unshakeable joy – an awareness of the crazy, paradoxical nature of what we’ve got just by being here. Existentialists say that we each have a responsibility to take hold of ourselves and make ourselves count. What others say we are, or should think or do is, in the face of death, revealed as irrelevant.
Existentialists regard modern society as characterised by alienating structures that enforce conformity and prevent people from relating authentically towards themselves, from thinking about, understanding and realising their potential. Capitalism has little need for free individuals, it needs disciplined and docile populations who identify themselves as consumers, continually purchasing goods to sustain their ‘strategic image presentation’ (Lodziak, 2003:58); or who invest their time and energy in keeping up appearances and maintaining a narrative which says that ‘all is well with us... we are decent and reasonable’. In De Beauvoir’s (1997:295) terms, for example, ‘one is not born, but rather becomes, a woman’. Within patriarchal culture, being a woman is not so much a biological fact as it involves playing a role and being and conforming to what is socially expected. A similar point can be made in relation to disability: one is born with impairment or acquires impairment, but being a disabled person is part of a social process which involves becoming what one is required to be (Cameron, 2014a).

Moreover, as Sartre (2007) points out, humans have a tendency to be ambivalent about their own freedom and responsibility. Rather than acknowledge the responsibility involved in being an existing self, many choose not to think for themselves, but opt for the relative security and comfort provided by being part of what Heidegger has termed a ‘They’ (Wartenberg, 2013). Being the same as others, thinking the same things, doing things because it’s what the others do and expect; holding ready-made opinions and attitudes circulated by the media, filling your life with meaningless distractions. These are ways of avoiding having to think about and deal with the difficult and challenging aspects of what being human is about, of trying to escape existential anxiety (Cameron, 2014b).

The downside of being part of a They is that it involves conforming to a set of norms, leading to a disquieting awareness of having settled for less than one has the potential to be: of making do with mediocrity. Nobody likes owning to mediocrity, and consequently identifies others outside the norm as inferior in order to give himself a feeling of superiority at least to someone. Sartre explains anti-Semitism in this way and de Beauvoir sexism (Wartenberg, 2013). I’d suggest that we can explain disablism, and the condescending judgements expressed within disabling encounters, in this way too.

Finally, does existentialism offer any insight into how, as disabled people, we might respond to disabling encounters? Camus (2005) asks us to consider Sisyphus – condemned by Zeus to eternally roll a large rock up a mountain. He suggests that we should think of Sisyphus as happy because he scorns Zeus. Explaining Camus’ proposition, Wartenberg (2013:119) says of Sisyphus:

*His scorn for Zeus and the fate to which he has been consigned allows him to take control of his own situation... Zeus may be able to condemn him to an eternally unachievable task, but he doesn’t control Sisyphus’ mind. Sisyphus doesn’t identify himself as the victim of a cruel fate, but chooses to interpret his situation differently... Although his scornful reaction is predicated on his realisation that he will never succeed at his task, he has freed himself from a sense of defeat and succeeded at what Camus calls ‘living in the absurd’.*

Taking an existentialist perspective involves regarding the meanings others seek to impose as irrelevant. Disabled people who reject mainstream assumptions that impairment can only be
related to negatively – regarded as something to be endured or overcome – are in the business of deciding for themselves what matters. An affirmative view which says ‘Impairment might be messy, painful, inconvenient, but it’s an important part of who I am and I’m not prepared to apologise for it,’ is one which challenges the meanings dominant culture seeks to impose through the microcosmic experience of disabling, invalidating encounters. To scorn the requirement to be normal (rather than necessarily the person conveying the normalising judgement) allows us to come out of those situations with self-respect intact. As Camus says, the absurd can be transcended by rebelling, by saying ‘no’.

Tony recently went to buy train tickets at Euston Station. This was a straightforward transaction. As he thanked the sales assistant and was about to turn to go, the sales assistant looked across and asked him “What’s wrong with you?” Tony did the usual confused look and then replied “There is nothing wrong with me. On the contrary, I am delighted with the excellent deal you have given me.” As usual in these situations the sales assistant didn’t get the point, and continued “No, why are you in the wheelchair?” Tony patiently explained that he uses a wheelchair because he had a spinal injury years ago, but that there is nothing wrong with him.

In conclusion, I’d like to emphasise that what I’m talking about isn’t just about ‘having the right attitude’. As the disabled comedian Stella Young (2014) says on ‘inspiration porn’, no amount of smiling ever removed a flight of stairs. Taking on an existential perspective as a disabled person involves recognising your own responsibility for addressing the barriers which exclude. It implies activism. Sartre (2007) argued that in choosing for yourself you’re choosing for everybody. This involves the right of everybody to their own embodiment, gender, class, ethnicity, sexuality, age. The interactionist Goffman (1990) may have suggested that it was for ‘the bearers of spoiled identities’ to take responsibility for other people’s reactions to their difference, but I would contend rather that they have a responsibility to refuse to assent to the idea that they have spoiled identities.

References


Journal of Inclusive Practice in Further and Higher Education (JIPFHE)
Editorial Guidelines

- JIPFHE is the open access refereed journal of the National Association of Disability Practitioners (NADP). All JIPFHE academic papers are peer reviewed and share the common aim of furthering best practice to promote disability equality in post-compulsory education.

- Papers which focus on any part of the student journey from pre-entry to post-exit are in keeping with this over-arching theme, as are those which consider issues relevant to staff in Further and Higher Education.

- The main audience for JIPFHE is staff who work with disabled people in FE and HE and the journal should be of practical use to this constituency. It should enable readers to gain a deeper theoretical underpinning in critical disability studies upon which to develop their day-to-day professional work.

- Based on the principle of ‘nothing about us without us’, contributions directly from disabled students and staff are encouraged.

- A conference proceedings’ edition and a general or themed edition will be published each year.

- Sufficiently robust research papers, as defined in these guidelines, may be submitted for the general or themed editions. Narrative pieces reflecting the personal experiences of disabled people will also be considered for publication. Work submitted for NADP Accreditation can be considered for the journal, including short articles.

- All submissions for JIPFHE need to fulfil the guidelines set out here. Articles of interest to the NADP membership which do not meet the criteria set out for JIPFHE may be considered for the NADP website.

- Articles for the JIPFHE general or themed editions should be a maximum of 6,500 words.

- Communication on your submission will be via the NADP office publications@nadp-uk.org

- Two referees will be nominated by the edition editor, who will be a member of the editorial board.

- An abstract, maximum 300 words, is required for academic articles.

- Harvard referencing is compulsory and authors need to ensure references are as up to date as possible.
• Contributions should reflect ethical participatory/emancipator research, which involves disabled/neurodiverse participants and results in interventions which improve services for disabled/neurodiverse people in the education and training sector.

• Ethical guidelines prescribe that research participants should not be identifiable, and confidentiality must be respected.

• A clear ethics statement is required for academic articles.

• Language reflecting the social model of disability is expected.

• Articles must be original and should not be being considered by another journal when presented.

• Formats must be accessible to screen reading software

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