Student perceptions of the language of disability, deficit and empowerment

Conference or Workshop Item

How to cite:

For guidance on citations see FAQs.

© [not recorded]

https://creativecommons.org/licenses/by-nc-nd/4.0/

Version: Version of Record

Copyright and Moral Rights for the articles on this site are retained by the individual authors and/or other copyright owners. For more information on Open Research Online’s data policy on reuse of materials please consult the policies page.

oro.open.ac.uk
Student perceptions of the language of disability, deficit and empowerment

KATE LISTER AND TIM COUGHLAN

Institute of Educational Technology, Learning and Teaching Innovation, The Open University (OU).

Email: kate.lister@open.ac.uk, tim.coughlan@open.ac.uk

Abstract

In a participatory research exercise with students, discomfort was expressed with the language and terminology used by higher education institutions (HEIs) to discuss disability. It was argued that this can be a factor in disclosure of disabilities, or in requests for adjustments or support. In response, a mixed-methods research project explored the language that students feel comfortable with, to identify gaps between this language and the social model language used in The Open University’s broadcast communications, and to investigate whether student-driven language norms could be adopted by the institution. While the findings identify that students are generally more comfortable with certain terms than others, they also show that views of appropriate language vary according to the context of the communication, and to demographics. The findings bring into question model-centric views of disability and language. Instead, we argue that they suggest a need for heterogeneous and context-driven language approaches.

Keywords: accessibility, disability, language, social model, medical model

Introduction

When communicating with disabled students, many UK universities use language inspired by the UK social model of disability, developed by disability activists to focus on removing societal barriers and counteract the traditional, medical model of disability, with its deficit language focus (Seale, 2014). However, the UK social model of disability has repeatedly been criticised for perpetuating an unrealistic view of disability, meaning that disabled people can feel obliged to act in a way that doesn’t feel natural to them (Shakespeare, 2002). This model is also at odds with People First models of disability language used internationally. Language is key to identity (Norton, 2013), and in a preliminary research exercise with the aim of generating a student-driven research agenda, many Open University (OU) students fed back that the language used is a key factor in how comfortable they feel disclosing or discussing disability, and how likely they are to voluntarily do so.
The ASSIST project (A Sociolinguistic Study to Investigate Student-driven Terminology) sought to investigate the language that students feel comfortable using when talking about their disabilities, and to identify gaps between the language students use to describe their own disabilities and the social model language used in broadcast communications. The project team posited that gaps between these models create an unnatural and potentially uncomfortable environment for students disclosing disabilities and discussing student requirements and arrangements, and may discourage them from disclosing their disability or requesting adjustments to their study.

Methodology

The project utilised a two-stage mixed-methods approach; a qualitative approach using discourse analysis was applied first to investigate the language that students use and categorise it into models, and a quantitative survey approach, based on the findings of the first stage, was used to capture preferences from students at scale.

In the first stage of the project the general landscape of language used by disabled students to discuss their disability, their experience of studying and their study needs was explored through focus group sessions consisting of 1-3 participants. Sessions were carried out either face to face or remotely, through video conferencing, telephone or email exchanges, according to the participants’ preferences. The sessions had two objectives: to gather a data sample of ‘natural’ speech to be analysed for language norms adopted by students, and to gather qualitative data on students’ reactions to examples of OU communications related to disability and study support. The sessions were recorded and transcribed, and transcripts were analysed using discourse variation analysis in NVivo, in order to identify different models of language used by students.

The second stage of the project sought to investigate language preferences with a larger cohort of participants via a survey; a sample of 8000 students was selected with the aim of receiving 1000 survey responses (in line with typical current response rates).

The survey had two parts: the first presented participants with examples of OU communications both in their original form and reworded using language used by students in the focus groups. Participants were invited to select their choice of wording, to keep it as it was, or change it to something completely different. The second part of the survey focused on positional identity and asked participants how comfortable they felt (using a 5-point scale) with specific phrases identifying them as disabled that were used by students in the focus groups.

Results

Analysis of the focus groups concluded that students used three overall models of language, which the investigators classified as:

- A deficit or medical model, focusing on the disability itself and the issues it causes
A support model, focusing on ‘barriers and obstacles to study’ and the institution supporting the student

An empowerment model, focusing on student ‘needs’, autonomy and ‘independence’, with the institution enabling and empowering the student

In the survey results, however, no single model was consistently preferable, suggesting a disparity between any defined model and the perspectives of students themselves. Instead, it appears that students’ preferences regarding language and terminology were highly dependent on the context of the communication and its intended message; for example, there was a clear preference for a medical language model for a disability disclosure question. This suggests that a one-size fits-all approach is inappropriate to choosing language used to communicate with students who are considered as ‘disabled’.

Regarding terminology to identify people as disabled, the term ‘disabled student’ was particularly unpopular, in striking contrast to the official position of the OU and UK social model language. The use of this term to describe themselves, or to be described by the HEI, appears uncomfortable for many students and alternative phrases are preferred. While person-first terminology in the form of ‘student with disabilities’ is a commonly-found alternative, this was not popular either. Instead, terms such as ‘additional study needs’, ‘your circumstances’ or ‘conditions that affect your study’ were considered most appropriate, depending on the communication context.

Participant demographics played an interesting role in many of the responses. For example, phrases using the term ‘disabled’ show significant differences according to gender, with more of the male population in the sample being comfortable with phrases using the term ‘disabled’ than females. Disability category was also significant, as respondents with a mobility disability appeared more frequently comfortable with phrases that use ‘disabled’ and ‘with disabilities’ than the rest of the respondents, while respondents with specific learning difficulties or mental health conditions appeared less comfortable phrases using ‘disabled’ and ‘with disabilities’, with students with mental health conditions appearing to prefer the term ‘obstacles to study’.

Implications

Discourse around language and disability has traditionally focused on contrasting different disability models, such as social or medical models. The assumption appears to be that consistent language should be used that emphasises these perspectives. This research has explored a range of language related to models, but our results prompt us to question this model-centric view of disability and language. Language considered to reflect the social model was not a good match for the language found from students in the focus groups, and of the alternative models that were derived from the analysis of the focus groups, none were considered preferable across all communications.

The contrast between these findings and official positions also provide evidence to argue for the value of a participatory approach to understanding the preferences for students towards the language used about them. Without such an approach, we would be unaware of the disparity
in preferences that exists between contexts, groups and individuals. These findings also call into question the idea of disabled people as a homogenous group, and opens the door for investigating more heterogeneous, context-driven language approaches though responsive and participatory research.

References

