

Labelling in Special Education

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Abstract

This paper is divided into three parts. First, I introduced the arguments surrounding labelling to address the question: Is the use of labels for people with disabilities helpful? The section begins with a definition of labelling and is followed by an exploration of different perceptions about labelling and a look at how the use of labels in special education may affect people with disabilities. To be clear, the positive points of the practice are outlined, and then directly followed by counter arguments. Then, I defend my own position, which confirms that the abolition of labelling is not a solution; instead, people who work in special education should think about alternatives to narrow the negative effects of labelling. In the second part of the paper, I explained some positive coping techniques employed in the special education field that might help people with disabilities to overcome the negative impact of labelling. At the end of the section, I presented some ideas on labelling theory by defining the meaning of deviance, demonstrating its usefulness. In the final part of this paper, I explained labelling theory and how it refers to labelling people with disabilities. I use Becker's theory and the literature to provide some evidence about how society can affect the meaning of the terms 'deviance' and 'disability'.

Introduction

Looking back on the history of special education, we can see labelling has been among the most controversial of issues (Norwich, 1999). While opponents of labelling believe it is useless and argue for its abandonment, claiming that the practice can lead to stigmatisation, proponents of labelling stress that it brings numerous advantages to the lives of people with disabilities for reasons relating to communication and the provision of support and resources. Labelling also has different views and definitions. According to Thomson, labelling is related to classification, and both have the same meaning, which 'lead[s] to [the] affiliation of students to a category of disabilities' (2012, p. 159). This means that, if a person is identified as having a special education need, he often associated with a specific group that has similar properties, so he is likely to feel a sense of belonging. Labelling can be formal if it is imposed by a psychologist or diagnostician; for example, a person can be identified as a member of the group with dyslexia or the group with Asperger's Syndrome. Labelling can also be informal if used, for example, by peers such as the use of epithets like 'idiots group' or 'cretins group' (Thomson, 2012). According to Barga, labelling is known as 'anything functioning as a means of identification or descriptive term[,] formal or informal' (1996, p. 414).

Some people suggest that labelling is a positive practice because it provides special support for people with disabilities and might opens doors for a variety of opportunities and resources (Boyle, 2013). Diagnostic labelling might lead to early intervention and help people with disabilities to gain better treatment plans, which will then facilitate their learning. Gross (1994) raises a good example supporting the usefulness of labelling among Asperger's syndrome students; the label helps teachers to provide appropriate curricular and social support for children with disabilities. It seems to be that diagnosis and labelling may help professionals to understand the difficulties a child is facing and to provide suitable services and programmes dependant on each individual's needs. Categorisation helps with determining eligibility services for people with disabilities and can also be considered necessary for protecting their rights (Ho, 2004). In Saudi Arabia, for example, the government offers services only for people who have been assigned a label, such as 'learning disabled', 'deaf', and/or 'blind' (Aldabas, 2015).

In Saudi Arabia, children who are categorised as 'learning disabled' are fortunate to get the instructional help they need; this does not happen for children who are unlabelled (Alhano, 2006).

Thomson believes that, 'when categories are used, children with special needs are not treated as individuals' (2012, p. 160). I could say that, when a professional diagnoses a person as having a disability, they usually attempt to establish a new programme to provide special educational support to him or her. These programmes may, however, build barriers between the person with the disability and his or her society, because professionals or teachers may need to apply these programmes during a special time with special equipment in a special room. Labelling may, thus, lead to exclusion and cause the removal of the disabled person from his or her community

(Barga, 1996). This may occur, for example, when a student is removed from the mainstream classroom to attend another room, where he or she receives special support. In other words, the real disability may be when society places restrictions that impede an individual from fully participating in his or her society.

Moreover, professionals and teachers often focus on the difficulties the student suffers from in school and elsewhere; they do not realize the strengths and personality of that person (Boyle, 2013). Based on my experience working in the special education field, I noticed that, in an effort to provide special support to people with disabilities, professionals usually diagnose them by observing their disabilities and deficiencies. However, it could be argued that people with disabilities may need help to discover their abilities and potential, and then assistance in teaching them how to exploit these strengths to overcome their difficulties, rather than focussing on their weaknesses. It is the teacher's duty to focus on students' strengths and help them to improve their individual abilities, regardless of any label that may or may not be applied (Boyle, 2013).

Another positive aspect of labelling is that, it helps people with disabilities and their families to understand their situations by explaining their difficulties (Kayama & Haight, 2013). It seems that labels are used not only to categorise and place people with disabilities into special groups equipped to address their difficulties and provide them with the assistance they need, but also both to help them with disabilities and their families to understand their difficulties and needs, in order to better assist and interact with them. All around the world, people with disabilities are not only facing challenges due to those disabilities, but also suffering from the misunderstanding of their difficulties and needs. Most people 'seek explanations for events and experiences that [they] regard as illness or disease, in order to relieve the stress or ambiguity of the unknown' (Gillman, Hayman, & Swain, 2000, p. 394). Riddick provides a wonderful example when she describes the feeling of adults and children with dyslexia who call labels 'helpful', and she notes that they emphatically stress 'the importance of having such a label' (2000, p. 7). These people reported that, before they had been identified as dyslexic, they did not know why they were different from others, what they were doing wrong or what should they do to address their problems. However, after labelling, one person said, 'It had a name. I was not stupid, the psychologist said I was not stupid, and it was a lovely feeling' (Riddick, 2000, p. 7). It could be argued that labelling can be a positive experience when it provides knowledge to people with disabilities about their situations and explains why they are different from others and how to cope with these difficulties. Becker mentioned that, when a deviant joins a group, he learns rationally how to face his problems and avoid trouble (Becker, 1963). Labels provide an explanation for events and can reduce the ambiguity and stress in people with disabilities and their families (Lauchlan & Boyle, 2007). Another example can be found in Japan, where educators tend to provide help for parents to accept their children's differences. Educators attempt to explain the child's situation to the parents, give parents opportunities to observe their children at school and then try to explain the child's behaviour (Kayama & Haight, 2013). Labelling may help parents to accept their children's difficulties and understand their struggles at school. Consequently, parents may feel comfortable and relieved when they finally understand their child's behaviour.

A counterargument to labelling is that, the use of labels can be destructive if society is unable to recognise and comprehend the purpose of labels and how to deal with labelled individuals. This is also the case when labels are used to stigmatise the children, damaging their self-esteem as a result. In some cultures, parents refuse to accept or acknowledge their children's disabilities, making it difficult to convince them to attend awareness sessions. Lalvani's (2015) study found that some parents have negative views about labelling and react adversely to the notion of having a child with disability. It seems that, this may cause them to struggle to accept the fact that their child is different and that he or she needs special support, often as an attempt to protect their child from further abuse, isolation or feelings of inadequacy. According to Becker, 'membership in such a group solidifies a deviant identity' (1963, p. 38). Some parents even realise their children's situation but still to refuse to deal with it. Kayama and Haight (2013) believe that parents may refuse to attend awareness programs in order not to draw attention to their child's situation. As a result, convincing these families of the gravity of their child's situation and needs can be a difficult and time-consuming process.

Moreover, labelling may have a negative effect on people with disabilities and lead to low self-esteem and frustration, even if the person with disabilities understands his situation. The person with disability may be exposed to negative pressure from their peers, such as name-calling and the bad-mouthing of classmates who have certain disabilities or learning difficulties, using labels to tease them (Lauchlan & Boyle, 2007).

Another argument against labelling is that, it can cause children to suffer from stigma, stereotyping and low self-esteem as a result of the inferred understanding that they are different or the perception that they have some form of incapacity. Low self-esteem can have a great impact on the psychological health of children with disabilities, potentially harming their personality and enabling others to devalue and stigmatise them (Thomson, 2012). One can argue that the negative impact of low self-esteem extends to the behaviour of the labelled students and cause symptoms such as feelings of inferiority, depression and isolation. Labelling can also be seen as harmful to people with disabilities who may deem the acts of classification and labelling themselves as forms of stigmatisation (Riddick, 2000). In short, labelling can influence perceptions and lead to shaming and stereotyping. Goffman's book (2009) *Stigma* discusses the various effects of stigmatisation on labelled people

and the impact of others' reactions to them. Labelling can cause some people to bear stigma throughout their lives, leaving them open to discrimination. At the same time, it can lead to increased displays of mercy and compassion towards individuals with disabilities, because others in society may look at a person with disability through an inferior lens and see him or her as different from others. Their feelings of mercy and compassion towards these people may be triggered by a focus on weaknesses and the assumption that the disabled person is unable to function. This, in turn, can lead some people with disabilities and their families to feel shame and to argue that labelling is not necessarily a positive approach (Lalvani, 2015).

My opinion is that labelling is inevitable in special education, despite the negative impacts that may emerge as a result of it. Goffman (2009) argues that, when someone new comes into our life, we first label and categorise the person depending on his or her appearance. Professionals and carers in any field, including special education, usually need to define and name some phenomena to overcome any confusion they have about a person. They also often need to share their ideas to improve any phenomena they are attempting to study. They need clear and common language, often in the form of labels, that allows them to exchange information. Thomson believes that 'talking openly in public about the issues will encourage people to confront them, revise their attitudes towards the problem and take responsibility for their actions' (2012, p. 164).

Professionals, educators and carers in special education field should to a powerful stance on this issue. The abolition of labelling is not a solution, however, because the advantages of labelling often outweigh the disadvantages. Instead, professionals should think about how to promote alternatives to the narrowing and negative effects of labelling (Hatton, 2009). It could be claimed that, these alternatives might be achieved through the following approaches:

1. Focus on the individual, not on his or her disability. Society should value people with disabilities as people with unique needs, skills and strengths, irrespective of their disabled status (Thomson, 2012).
2. Help society to understand people's difficulties by raising public awareness. Professionals can raise public awareness by creating links between professionals, parents and peers; doing so may lead to a better understanding of the needs and behaviours of people with disabilities (Kayama&Haight, 2013).
3. Help people with disabilities to understand their difficulties and how they can deal with them. Goffman (2009) suggests that people who feel stigmatised often resort to techniques to control their negative feeling.

Positive Coping Techniques for People with Disabilities

It is a challenge to educate societies and people with disabilities about how to deal with labelling, how they can benefit from the advantages of a label and how to override a label's disadvantages. Successful people usually resort to mitigating their sense of deficiency through coping techniques (Becker, 1963). Coping techniques 'are behaviours or initiatives the student takes to assist in managing his or her disabilities' (Barga, 1996, p. 417). Often, people with disabilities resort to positive coping techniques to become successful in life, at school, on the job and in relationships with friends and family members.

Barga (1996) provides good examples of students with disabilities who use different techniques, such as interacting with a benefactor, self-improvement techniques and improving study skills and management strategies, to cope with their disabilities at school. His study found that participants were able to avoid the negative impact of stigma through the use of creative positive coping strategies in different social and educational settings. Based on this work.

Egyptian writer Taha Hussein is a splendid example of positive coping amidst disability. He lost his sight at the age of three, but did not consider his blindness to be a hindrance. On the contrary, his disability led him to write wonderful books and to assume a variety of enviable positions. He was called the 'Dean of Arab Literature'. I suggest that Hussein would have agreed with Green and colleagues, who note that successful people are those who can find 'a variety of ways to resist the negative consequences of components of stigma... by adopting and projecting a positive, confident and competent self-image' (Green, Davis, Karshmer, Marsh, & Straight, 2005, p. 204).

Another way to deal positively with disabilities is through reframing. Reframing is 'changing a frame in which a person perceives events in order to change meaning. When meaning changes, the person's responses and behaviour changes' (Gerber, Reiff, & Ginsberg, 1996, p. 98). This means that a person should change his way of thinking and perceiving things. He should to look at reality from a positive perspective, believe in his abilities and work to achieve his objectives. Riddick provide a good example in her study about a person who has dyslexia. He said, 'I am dyslexic and I do not mind telling everyone "with a big neon flashing light"' (Riddick, 2000, p. 659). She found that people who use this technique usually face their problems courageously. It could be argued that, when successful people with disabilities face their problems openly, they show that they understand the strengths and weaknesses in their personalities and behaviours. They then usually attempt to learn how to reframe their disability experience. They are not passive and willing to accept negative societal beliefs, stereotypes and attitudes (Gabel, 2005). On the contrary, they may attempt to ignore or resist the negative emotions from their cultures. Labelling theory argues that society is the source for most problems many

people face (Becker, 1963; Goffman, 2009). It could be claimed that, people with disabilities who feel good about themselves may also encourage society to change its negative beliefs and attitudes toward those whom they often consider disabled or outsiders. Green and colleagues (2005), note that, 'people will judge you [a person with a disability] by how you project yourself. If you project yourself as a loser... you will be a loser. If you project yourself as confident, people will deal with you that way' (p. 204). Many studies, such as those by Taylor (2006), Hatton (2009) and Thomson (2012), have emphasised that successful people with disabilities should face their difficulties, attempt to accept them and be conversant about their specific disability, so that they know their strengths and weaknesses they have. When a person has done this, they may then be able to 'reframe their earlier learning difficulties and put them into a more positive context' (Riddick, 2000, p. 659).

The notions outlined above led me to consider why deviance or stigma is associated with labelling. Who has the power to judge a person as 'disabled' or 'deviant'? The best answer to these questions invokes labelling theory, which is also known as interactionist theory (Quicke & Winter, 1994). Labelling theory argues that society creates the notions of deviance and outsiders. (Müller, 2014). By definition, one who is deviant is not normal. 'Normal' encompasses those individuals who obey and comply with societal norms and rules (Bryant & Higgins, 2009). This means that normal behaviour encompasses all that is in harmony with the accepted norms of a society; however, deviance refers to non-compliance with society's rules or norms, so those who violate these norms are marked as 'deviants' (Taylor, 2006). Others believe deviance 'not only violates norms but it has negative consequences for the organisation and requires social control by management' (Bryant & Higgins, 2009, p. 251). Some societies label people depending on this perspective towards a person's actions, even if their acts are not considered deviant in other segments of society. Deviance, in short, is anything that is extremely different from the average, which is decided by societal norms (Becker, 1963).

I prefer to discuss interactionist theory in terms of Becker's theory. I have chosen the book *Outsiders* because it is a pioneering study of the sociology of deviance. I found the book enjoyable and interesting because it reflects the reality and how people assess each other. It also explains how people become members of a deviant subculture. Moreover, I think the book is useful for people who work with people with disabilities, because disability can be considered a social phenomenon. Deviants and people with disabilities may suffer from similar problems, such as negative societal perceptions or so-called labelling.

Labelling Theory and How it Refers to People with Disabilities

The sociological definition of deviance sees it as 'the failure to obey group rules' (Becker, 1963, p. 8). This is similar to the social model, which sees social barriers as a direct cause of disabilities (Gable, 2014). This model attempts to sever any connection between impairment and disability and considers people with disabilities to be disabled by society. Labelling theory shows that social groups create deviance by establishing norms and rules where infractions are considered acts of deviance and then applying those rules to a specific group of people and labelling them as 'outsiders' (Schur, 1969). Deviance, then, is the result of social judgments of people who may differ extremely from the norm. The differences might be in characters, behaviour, gender, colour or physical appearance. It could be argued that people with disability may be labelled because their behaviour or physical appearance does not fit with recognised social norms. In other words, people with disabilities may possess traits that other people do not wish to acquire (Green et al., 2005).

According to Becker, members of deviant groups have things in common, which gives them a sense of a 'common fate, of being in the same boat' (1963, p. 38). They face the same problems, the same social perspective and the same consequences. Becker believes that joining an organised deviant group may give members a sense of confidence and a self-justifying rationale. Being a member of a special education group that means a person is not longer alone, and that there are people like them who can support them.

In special education, the medical model often serves as the essential instrument for diagnosing and classifying individuals with disabilities (Gillman, Heyman, & Swain, 2000). Psychologists and medical professionals have the power to force people with disabilities into deviance groups. In Saudi Arabia, the diagnosis and labelling of people with disabilities depends on the knowledge and experience of the professionals with whom they work. Many students considered deviants are rejected by mainstream schools because of a professional's opinion. Worse, due to the lack of strictly enforced rules, some organisations do not implement inclusion efforts correctly. There is no common law or strategy followed, and each professional has the power to judge people with disabilities based on his or her own point of view. According to Becker, 'legal rules, naturally, are most likely to be precise and unambiguous, informal and customary rules are most likely to be vague' (1963, p. 133). This makes me wonder, does deviance result from those who create the rules, or it is a result of those who violate them? Becker (1963) mentions that deviants are people who break the rules of social norms. This means that deviants do not follow the rules and attempt to violate organisational norms. Examples of such people are thieves and drug addicts. Rules and norms relate to people's culture, and their infraction constitutes deviance. However, people with disabilities have not violated the rules before being labelled and excluded by society. According to Becker, 'some people may be labelled deviant who in fact have not broken a rule' (1963, p. 9). In other words, society uses norms or rules to judge people with disabilities as outsiders based on their behaviour

disorders, body dysfunction and appearance. Consequently, people who break the rules of the healthy body are likely to be defined as outsiders or deviant, which is similar to Becker's theory. In this context, labelling and deviance are not the result of deviant acts or a breaking of rules, but rather are a result of the reactions of those who consider the behaviours to be deviant (Bryant & Higgins, 2009). According to Taylor (2006), mental retardation exists in judges' minds, rather than in the minds of the judged.

Moreover, it is important to keep in mind that social norms and rules are constantly changing, so people's views are also changing. The view of a person with a disability as deviant may change because norms are not fixed (Riddick, 2000). General values, such as freedom and equality, may change and can be interpreted differently in many ways (Becker, 1963). With this in mind, it could be argued that, today, there are significant trends that are changing the perceptions of inferiority regarding people with disabilities. This is, to a great extent, due to the efforts of those working in the special education field who are actively attempting to change society's views. Interactionist theory argues that 'norms are subject to ongoing re-construction and negotiation by social actors' (Bryant & Higgins, 2009, p. 253). I think these attempts are moving in a positive direction, since they focus on the person, and not on his or her disability. For example, currently there are many attempts to persuade people to use the term 'people with disabilities' instead of other, might more hurtful descriptors such as 'handicapped children'. This is a positive development, since this change in terminology might help to facilitate social acceptance and increase the self-esteem (Harris, 1995). According to Finlay and Lyons (1998), in recent years, people with disabilities' lives have changed, largely as a result of simultaneous changes in societal conceptions of individuals' needs and rights. Saudi Arabia is one of the countries that strives for continuous change in support of the learning and success of people with disabilities. There are authentic efforts being made to mainstream students with disabilities into public schools, and to ensure that their treatment is equal to that extended to other members of society, in terms of health, social and educational rights.

Conclusion

To sum up, Becker's interactionist theory helps us to understand that disability is a social phenomenon; it is associated with making social judgments of people who may differ from the average, which is decided by societal norms. Labelling people as 'disabled' or 'deviant' is based on cultures, customs and traditions. The meaning of labels depends on the social contexts in which they are applied (Quicke & Winter, 1994). Moreover, this theory provides a good perception of that the advantages and disadvantages of labelling might also be associated with social contexts. In short, labelling can be considered an advantage in one community, but might not be considered on in another community. According to Becker (1963), society plays an important role in labelling based on specific concepts, so we can argue that, societies' perceptions of people with disability are not fixed, but rather vary even within the same community based on different and conflicting opinions. This theory confirms that discrimination exists in societies even absent of labelling. It has been present for all of human history in forms such as racial or gender-based discrimination (Finkelstein, 1993). Further, it could be argued that deviance or disability is result of social judgment that might be informal in the absence of official labelling. Becker (1963) believes that legal rules are precise and unambiguous; however, informal rules might be vague. Labelling might be necessary for the provision of special support for people with disabilities, and might allow them to access a variety of educational opportunities and resources. Through labelling, people with disabilities can demand their rights and claim proper social resources from their government. However, labelling can have negative and harmful consequences, such as stigmatisation, discrimination and exclusion. The challenge is to educate societies and people with disabilities about how to deal with labelling and on how they can benefit from the advantages of labelling while overriding its disadvantages. People with disabilities should create a variety ways to resist the negative impact of labelling and stigmatisation. Using positive coping techniques is one approach that people with disabilities have employed to be successful in life. Successful people with disabilities face their problems by understanding the strengths and weaknesses in their personalities and behaviours.

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