Labelling Children with Special Educational Needs: To Label or not to Label?

The Warnock Committee in 1978 recommended that statutory categorisation of handicapped pupils should be abolished. Instead it espoused the concept of special educational needs. However, as inclusive educational practice continues apace, the issue of labelling remains contentious.

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INTRODUCTION

The inclusion of children with special educational needs (SEN) in mainstream schools is a focus of debate in educational systems around the world (Rose, 2001). Inherent in this debate is the topic of labelling children with SEN, which Norwich (1999) maintains has been a contentious issue in the field of special education for most of the twentieth century. The use of the word label in this discussion refers to a classifying name given to a condition, disability or difficulty and the way in which it is attached to children identified with that particular condition. This use of labels in the form of diagnosis in health care is conventional and synonymous with a medical model (Beutler, Bongar and Shurkin, 1998).

The balance between the positive and negative effects of labelling children with SEN continues to be of concern, with some considering it to be a threat to the inclusion movement itself (Feiler and Gibson, 1999). A central theme in the discussion on labelling is what Norwich (1993) refers to as the "identification dilemma" (p. 532). This dilemma is perpetuated by the type of legislation that exists in the United States of America (USA) and the United Kingdom (UK) which requires the identification of children with SEN for entitlement to additional or different provision and in so doing labels the child as different (Norwich, 1993).

In Ireland, the system of identifying children with low-incidence SEN for access to special provision is similar to that in the USA and the UK. *Circular 02/05* (Department of Education and Science [DES], 2005) lists eleven categories of low-incidence special educational need that entitle children diagnosed with one of the listed conditions or disabilities to additional teaching support from a resource teacher.

HISTORICAL USE OF LABELS

The use of labels to describe people who have intellectual, physical, emotional or social disabilities seems to have existed throughout recorded history. Professional classification systems, along with cultural changes resulted in a myriad of labels being generated down through the years. At different times these labels were used as a form of protection for vulnerable groups, but at other times they became the language of ridicule.

Cole (1989) relates how, in the late 1800s in Britain, children with 'mental handicap' were graded and labelled. 'Idiots' were the lowest grade and distinguished from the more able 'imbeciles', who in turn were different from the most able group, the 'feeble-minded'. By the early 1900s efficient classification was pursued and with it increased segregation in the educational system. Labels such as 'mentally defective', 'the deaf', 'the blind', 'the partially deaf', 'the partially blind', 'the myopic' and 'the phthisical' (tubercular) had been identified. By the mid-1900s, children labelled 'physically defective' were in schools and following a post-war push for better classification, the British Minister for Education in 1945 added on labels such as 'the maladjusted', 'the delicate', 'the diabetic', and 'children with speech defects' to those already listed (Jackson, 1966). The label 'educationally subnormal' was given to those who were considered mentally defective, but it was considered too broad and categorical terms such as 'slow learner', 'dull', 'backward' and 'ineducable' emerged.

In 1978 the Warnock Committee (DES, 1978) was set up to review provision for children with SEN in Britain. This committee felt that categories of handicap were no longer a useful concept in an educational context, so it was recommended that statutory categorisation of handicapped pupils should be abolished (Riddell and Brown, 1994). A more positive approach was proposed, which adopted a concept of special educational needs to be all the factors which may affect a child's educational progress (Norwich, 1990). Despite the Warnock Committee's efforts at replacing labels of disability with the concept of a special educational need, it appears that it actually replaced one set of labels with another (Norwich, 1999). Now almost thirty years later, the tendency to label children is stronger than ever. Some writers in the field of SEN refer to a 'labelling industry' (Kirby, Davies and Bryant, 2005). Ysseldyke, Algozzine and Thurlow (1992) describe special education as "a complex system of names and labels assigned to students before they can receive special services" (p.23).

Currently in the Irish context, *Special Education Circular 02/05* (DES, 2005) attempts to address the dilemma of categorising children for the purpose of receiving additional teaching support, by providing schools with extra teachers under what is currently termed 'the general allocation model'. The rationale for this model of resource allocation was "to make possible the development of truly inclusive schools" (DES, 2005, p. 2). However, an essential principle of the general allocation model is that teaching resources are to be allocated to pupils according to their needs, and the level of their needs is determined according to the staged approach set out in *Circular 24/03* (DES, 2003). Pupils at stage three of the staged approach are entitled to receive the greatest level of support and generally have a diagnosis of one of the listed high-incidence SEN. Although a diagnosis is not a prerequisite for this level of intervention, it strengthens the entitlement. Consequently, many parents are prepared not only to accept but actively seek out certain labels for their child in return for access to privileged resources (Corbett, 1998).

Children who have significant SEN and require additional special provision from a resource teacher must have one of the eleven named categories of low-incidence special educational needs. One of these categories is autism or autistic spectrum disorder, which includes

Asperger's syndrome. This is a relatively new label and one that carries significant resources and influence. All other labels are previously listed but with some notable changes in the language used.

THE LANGUAGE AND CONNOTATIONS OF LABELS

A persistent feature of labelling children with special educational needs is a concern about the language of labels and their subsequent connotations. Norwich (1999) draws attention to what he refers to as labelling cycles. This is where new terms and labels, which are considered to be positive and progressive, are introduced to replace existing negative terms and labels. However, these new terms in time, through use and context, acquire negative connotations and eventually are replaced by another round of fresh, politically correct terms. Words such as 'special' and 'exceptional' were introduced into educational terminology as a strategy to introduce categorical discourse that is positive in its denotation and connotation. However, with the impact of the labelling cycle, these relatively new terms already seem "outmoded and inappropriate" and there are currently calls for a new approach (Dyson, 2001, p. 24).

In the absence of an official diagnostic label, children with SEN frequently experience unofficial labelling both from ill-informed adults and more usually from peers. The language used generally has derogatory connotations. It is interesting to note that in a study conducted by Kelly and Norwich (2004) into children's evaluations of labels used by others to describe them, that it was the unofficial labels that were most familiar to them and that were evaluated negatively. The labels 'slow', 'stupid' and 'thick' were the labels used most frequently by the children to describe themselves, with 'stupid' and 'thick' also being the labels they most frequently perceived others to use to describe them. Only twelve percent of the participants had heard of the current label of SEN. None of them described themselves as having that label and only five percent of them had heard others apply it to them. This is a significant finding in light of the current debate on the effects of official labelling. The children in the study all had a moderate learning difficulty (MLD)* and, although they were all from the same Local Education Authority county in England, they were distributed amongst twentynine mainstream schools and four special schools. Eight of the participants from the mainstream sample were in designated units. There was a balance amongst schools in terms of urban and rural setting, so it could be argued that these findings may be fairly representative of the views of the general population of children with MLD in England. A study of this nature in the Irish context would provide valuable information and insights.

REASONS TO LABEL

In researching literature on the topic of labelling, the greatest perceived reason to give a child a label seems to be for the acquisition of resources and services. While acknowledging that this may be so, it is important to point out other benefits. For the recipient of the label, a diagnosis can offer a way of understanding and making sense of one's experiences and problems (Beutler et al, 1998). This is particularly evident in the writings of young able people with autistic spectrum disorder (Sainsbury, 2000). Similarly, Dyson and Skidmore (1994), cited in Barry (2006), found that telling students they were dyslexic boosted their

*The British meaning of this term is equivalent to mild general learning disability in Ireland.

self-esteem and empowered them to seek further relevant information. Labels such as attention deficit and hyperactivity disorder (ADHD) offer medical status to students whose behaviour might have previously been considered 'bad' or even dysfunctional (Corbett, 1998). Having a label can evoke accommodating and protective behaviour from others (Norwich, 1999).

In addition to offering parents an explanation for their child's difficulties, a label can allow entry to organisations that are able to offer help in terms of information, advice and support groups. Certain labels have campaigning groups to back them, strengthened by past court cases and media exposure. These organisations tend to represent parents of children within particular categories such as autism or Down syndrome and are usually interested only in the rights of pupils belonging to that particular category (Clarke, Dyson and Millward, 1998). Certain labels can reduce feelings of guilt and self-blame in parents and offer direction towards treatment.

Labels can help teachers be aware of the difficulties encountered by children as a result of difficulties arising from their condition. Barry (2006) feels that assessments can help teachers plan more effectively by considering the relative strengths and weaknesses identified. A label can clarify the nature of the difficulty a child may be experiencing and guide constructive interventions.

A case for the use of labels is made in relation to research. An agreed way of referring to a group with the same diagnosis is necessary in order to examine the symptoms and characteristics, and to investigate and evaluate different treatments or interventions (Ysseldyke et al, 1992). Labels facilitate communication among professionals about syndromes, impairments and conditions (Norwich, 1999).

REASONS NOT TO LABEL

The central argument against labelling centres on the identification of an individual as being different. Being the recipient of a label may result in feelings of abnormality and difference that might lead to anxiety and loss of self-esteem. Labels serve as sources of perceptions and may negatively influence one's own expectations and performance. A label may allow the recipients to avoid taking responsibility for their own behaviour (Beutler et al, 1998).

Ysseldyke et al (1992) contend that perceptions, behaviour, expectations and performance represent personal and interpersonal aspects of the effects labels have on the people who are labelled. This means that labels can negatively affect one's initial impressions about others and consequently affect how they behave towards the individual with the label (Norwich, 1999). This has implications for teachers who may lower their expectations of a child who receives a label, so that teachers themselves contribute to the failure they anticipate and the label becomes a self-fulfilling prophecy (Frostig, 1976).

A label may stereotype a child and have the potential to limit one's view of the labelled student by a focus on the disorder (Clarke et al, 1998). Lewis (1995) concurs and feels that children with labels can be limited more by others' expectations than by intrinsic conditions. The effect of this may be seen in how parents alter their parenting behaviour towards a child with a label. In terms of education, the Warnock Committee (DES, 1978) points out that all children with the same label may not have the same educational needs and labels may distract attention from important strengths and traits of individual children.

A further difficulty regarding the identification and labelling of children with specific conditions, is that few children have a single disability and this makes categorisation complicated (Fish, 1989). Even within categories, there is a continuum of need, which may be overlooked as a result of focusing on the label. In an educational context, these scenarios give little indication of how best to help the child (Norwich, 1990). Hornby, Atkinson and Howard (1997) also draw attention to the issue of diagnosis and urge caution in applying labels where there is a lack of agreement with regard to its diagnostic criteria. Barry (2006, p. 68) refers to the phenomenon of "categorical drift" which occurs when new labels emerge as a result of reclassification and children who would previously have been given one label would now receive a different label. This is particularly evident in what are now labelled 'specific learning difficulties'.

IMPLICATIONS FOR POLICY AND PRACTICE

Norwich's (1993) 'identification dilemma' highlights the issue of identifying and labelling children for the purpose of accessing special provision and consequently risking these children being treated differently, labelled and stigmatised. However, if children who are experiencing difficulties in learning are not identified, then there is the risk of them not receiving the resources they need to facilitate access to the curriculum and learning. Although this dilemma is based on Norwich's (2002) understanding of general ideological issues in British education and special educational needs, the questions raised are equally relevant in an Irish context.

The findings of Kelly and Norwich's (2004) study, cited earlier, regarding the awareness and perceptions of children with MLD, of labels used by others to describe them, question the judgements made by commentators on the negative and stigmatising effects of labelling children. The fact that most of the participants were unaware of the official label SEN and evaluated 'having help' positively, would seem to indicate that the problem is not so much the identification of a SEN, nor is it being treated differently in terms of getting extra help, but rather with the negative attitudes and the careless use of unofficial labels by others. Interestingly, Kelly and Norwich report that the label 'thick' was used by twenty-four percent of mainstream pupils to describe themselves and by none in special schools. As there was no reported difference in the awareness of their own learning difficulties between mainstream and special school pupils, it may be fair to suggest that the use of the word 'thick' was influenced by their more able mainstream peers. This has implications for self-esteem issues

in mainstream schools. Educational programmes that address attitudes to difference and respect for all human diversity are vital if the unofficial use of labels is to cease.

In the Irish context, where the level of special provision and resources is directly related to the category of disability, there may be a temptation to identify and label some students more than others (Ysseldyke et al, 1992). For example, a child with a label of autistic spectrum disorder (ASD) automatically receives five hours a week resource teaching time and can in most cases access the support of a special needs assistant (SNA). On the other hand, a child with a label of mild general learning disability or dyslexia receives whatever level of support is available to him under the general allocation model in that school. In a school where the number of children with difficulties awaiting assessment outweighs the amount of assessments available to that school, there may be pressure to prioritise children according to their potential for accessing much needed resources rather than their level of need. The implication of this is that there may be substantial increases in the reported prevalence of certain conditions and a perceived decrease in other conditions which may be skewed due to this phenomenon.

An alternative to this system of resourcing individuals is to concur with proponents of full inclusion. They suggest that school systems should be able to respond to the full diversity of children's educational needs without any specialised support for individual children (Norwich, 2002). The implications for policy and practice of this viewpoint are immense. Governments will be required to significantly reduce class size, provide a broad range of teaching resources, provide training in SEN for all student teachers, in-service training in SEN for all teachers and a general allocation of support staff (Rose, 2001; Scanlon and McGilloway, 2006).

CONCLUSION

Despite efforts at reducing the need to label children by Warnock (DES, 1978) in Britain and the DES (2003, 2005) in Ireland, cultural and social values are fuelling the re-emergence of labels. In addition to social pressure and resource allocation, Fish (1989) points out that administrative necessity also gives rise to labelling in the field of SEN. In fact, administrative, professional and academic efforts to describe special educational needs accurately, has resulted in new labels for needs rather than new thinking about how to meet the needs.

While the present international and national systems of resource allocation continue to operate, so too will the corresponding need to identify and label children for access to them. Norwich (1993) concludes that there are no simple solutions to resolving the dilemmas inherent in the debate. That no final solution can be agreed at this point, is evident in the differing perspectives and perception of the various stakeholders presented in the discussion on reasons to label and reasons not to label. A significant positive to emerge in this investigation is that students themselves do not seem to be very aware of the official labels that are attached to them for the purpose of allocating resources, a point that should be considered in future debates on the topic.

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