Teacher Educators' Varied Definitions of Learning Disabilities

Rachael Gabriel, Ph.D.,
University of Connecticut &
Jessica Lester, Ph.D.,
Washington State University

Abstract: Research continues to demonstrate that the ways in which current federal and working definitions of "learning disability" (LD) are troubling for researchers, teachers, parents and students. We are therefore interested in how teacher educators present the dilemmas associated with learning disabilities to their students, and the discursive repertoires (Wetherell, 1998) that they deploy while discussing learning disabilities. We orient to the idea of learning disabilities as a troubled construct, with people deploying multiple, polarized metaphors and themes when attempting to make sense of the meaning and "realness" of an LD. Since teachers' knowledge, skills, and mindsets prior to teaching have an impact on their actions and orientations as teachers (Brownlee, 2001, 2004; Brownlee, Purdie, & Boulton-Lewis, 2001), we argue it is paramount to investigate teachers' first exposure to complex constructs such as learning disabilities, attending to ways in which it is described and made relevant in talk. As such, we present the findings from a qualitative study, situated within a critical discursive psychology framework (Wetherell, 1998), focused on the ways in which teacher educators who were responsible for formally introducing preservice teachers to the construct of LD discussed and defined learning disabilities.

Key Words: discourse analysis, learning disability, teacher education

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Introduction

Research continues to demonstrate that the ways in which current United States federal and working definitions of "learning disability" (LD) are troubling for researchers, teachers, parents and students (Kavale, Spaulding, & Beam, 2009). In this paper, we focus on how teacher educators present the dilemmas associated with learning disabilities to their students, and the discursive repertoires (Wetherell, 1998) they deploy when discussing learning disabilities. The findings we present here show that learning disabilities are consistently presented as problematic, yet the problem is not always situated with the definition itself, but instead as being intrinsic to the individual labeled LD. This perhaps suggests that preservice teachers may not always be invited to interrogate or think critically about the ways in which learning disabilities are characterized and what this might mean for their work. Survey-based research estimates that between four and 16% of students currently enrolled in public schools have been diagnosed with a LD (CDC, 2005; LDA, 2010), and national trends towards inclusion of students with special needs in mainstream classes make it more likely than ever that teachers will have students with LD labels in their classes. The ways in which LD is presented in pre-service teaching settings is thus an important area for inquiry.

Although some scholars (e.g., Corker & French, 1999; Corker & Shakespeare, 2002; Sleeter, 1987), as well as disability rights activists (Charlton, 1998), have placed increasing emphasis upon the socially constructed and contested nature of disabilities such as learning disabilities, little work has specifically attended to the ways in which learning disabilities are constructed and "made real" through talk. Researchers often either define disability in terms of a medical condition or disease in which the source of disability lies within the child, or as a socially or interactionally constructed phenomenon that is located between an individual and their environment, though definitions may fall anywhere along the spectrum between these two. Further, researchers have long been troubled by the federal definition of learning disabilities, both because of the overreliance upon intelligence testing and the definition's lack of specificity (Mehan, Hertwick, & Miehls, 1986).

Positioning the Study

We orient to the idea of learning disabilities as a troubled construct, and argue that people deploy multiple, polarized metaphors and themes when attempting to make sense of the meaning and "realness" of learning disabilities. Since teachers' knowledge and mindsets prior to teaching likely influence their actions and orientations as teachers (Brownlee, 2001, 2004; Brownlee, Purdie, & Boulton-Lewis, 2001), we argue it is paramount to investigate teachers' "official" exposure to complex constructs such as learning disabilities, attending to ways in which LD is described and made relevant in talk. As such, we present the findings from a qualitative study, situated within a critical discursive psychology framework (Wetherell, 1998), which focused on the ways in which teacher educators who were responsible for formally introducing preservice teachers to the construct of LD discussed and defined learning disabilities. The research question which guided our work was: How do teacher educators work up and define learning disabilities?

Prior to explicating our analytic approach, we begin with a brief review of the literature on the varied definitions and contradicting constructions of LD. Then, we provide an overview of our study's theoretical and methodological framework, pointing to the philosophical assumptions that shaped our work. Next, we discuss the findings, presenting the ways in which the participants managed and, at times, contradicted the official and culturally familiar ways of talking about learning disabilities. Finally, we offer suggestions based on our findings for, what we argue, might be a more productive presentation of the notion of learning disabilities.

Literature Review

In this project, we attended to the ways in which the language used to describe learning disabilities provides resources for pre-service teachers to construct their understanding of this complex construct. Thus, in reviewing the literature focused on learning disabilities, we specifically attended to the ways in which the *official* (aka privileged) notions and culturally familiar ways of constructing learning disabilities were being deployed. We noted that there was generally minimal discussion and attention given to the "actual" ways in which teacher educators talked about the contingent and controversial nature of learning disabilities. In fact, the majority of the literature focused on learning disabilities and teacher education, begins with the basic assumption that the construct of LD represents a "real," non-contestable category.

Some researchers have oriented to the notion of learning disabilities as problematic, putting into question the belief that an LD is a biological truth. Mehan, Hertwick, and Miehls (1986) claimed that the medical model is implicit in the language of public law 94-142, the initial special education legislation within the United States. They suggested that "the medical model is a conceptual tool that has been used in medical research to understand and combat pathological conditions in the organism. It assumes that symptoms are caused by some biological condition" (p. 70). They argued that "when mental states are equated with physical states, educational handicaps become equated with diseases" (p. 71). They therefore offered a different explanation for differences in school performance that involved the expectancy theory and labeling theory, situating both within a social constructivist perspective. This alternative construction casts learning disabilities as a social construct, not a biological truth, locating the disability within the interaction between a student and the educational environment. Sternberg and Grigorenko (1999) also subscribed to this second set of explanations. They wrote that a "LD is neither purely biological nor purely social, but refers to an interaction between the two factors" (p. ix).

When describing the history of learning disabilities, Sternberg and Grigorenko (1999) explained that a group of parent advocates took on the phrase, "learning disabled" from a local psychologist as they gathered to construct a social-advocacy agenda in support of their struggling children (see Danforth, 2009, for a complete history of learning disabilities). In her seminal article, Sleeter (1987) offered a careful critique of the social and political conditions that made the birth of learning disabilities possible.

Shannon and Edmondson (2010) argued that the medical discourse evoked in the language of the federal definition renders some people powerful (i.e., those who do the diagnosing and labeling) and others powerless (i.e., those receiving the labels). Kavale and Forness (2000), on the other hand, wrote that the federal definition of LD was not substantial enough to be effectively operationalized. Working within a medical discourse, they argue that a LD is currently best described as a rule-out disorder. It does not carry a set of "symptoms," but is the label used when symptoms exist without a recognizable cause. For this reason, the definition does not describe the construct, but defines its boundaries based on what it *is not*, instead of what it *is*.

The diagnostic criteria in the federal definition have long been a bone of contention among researchers for a range of social, financial, and political reasons. In 2002, Steubing et al. performed a meta-analysis of 46 studies of the validity of the IQ-Discrepancy model for identifying learning disabilities specific to reading challenges. They found little evidence to support the use of IQ testing in the available literature. Similarly, a number of researchers have argued against the use of a discrepancy model and of IQ testing as part of the definition and diagnosis of reading related learning disabilities (e.g., Sternberg & Grigorenko, 1999), as they question the test's reliability and validity, especially for students who may struggle with culturally-biased literacy and language-based tasks.

This brief review of the literature on the definitions of learning disabilities demonstrates the polarized repertoires upon which teacher educators and preservice teachers might draw upon when describing and enacting LD labels. learning disabilities can be understood as anything along a spectrum from a social construction to a biological disease (Thomas, 2004). Even researchers who agree on the source of an LD (social or biological) have actively contested the

federal definition because of its lack of specificity, its reliance on IQ tests for diagnostic criteria, and its failure to evolve along with recent legislation and the introduction of alternative models like Response to Intervention (Zirkel & Thomas, 2010). Teacher educators therefore face a challenge as they prepare teachers to understand, identify and explain learning disabilities. There is no single, clear answer supported in the research for what a LD is, how to identify it, or what it means for instruction or expectations. As we found in this study, teacher educators navigate the troubled nature of this construct in different ways. We argue that their choices have consequences, creating and/or limiting the official discourse upon which pre-service teachers draw when constructing their professional understanding of learning disabilities.

Theoretical/Methodological Framework

We broadly situated this project within discourse theory and more specifically discursive psychology. Discursive psychology offers both a theory and method of discourse analysis, borrowing heavily from conversation analysis and ethnomethodology to investigate how psychological constructs are constructed and made relevant through everyday talk. Discursive psychology is often applied to naturalistic data, but may also be applied within interview settings in which the researcher orients to the interview itself as a collaborative conversation in which meaning is both situated and co-constructed (Reynolds, 2008). Discursive psychology attends to how "'psychology' and 'reality' are produced, dealt with and made relevant by participants in and through interaction" (Hepburn & Wiggins, 2005, p. 595). Within the discursive psychology framework, researchers view language as the medium for action by which specific versions of the world are constructed and made relevant. It does not assume that language is the expression of or proxy for inner thinking, and therefore does not attempt to infer what someone *really* means, but rather attends to the ways in which they use language to construct meaning in interaction.

More particularly, in this project we drew upon a critical discursive psychology framework (Wetherell, 1998), as we focused on interpretative repertoires. Like Cherrington and Breheny (2005), we viewed taking a discursive approach as "a theoretical position (locatable as poststructuralist, social constructionist, orientated to process and concerned with material conditions) as well as a declaration of methodology." They explained further that discourse analysis can be used to interrogate dominant or hegemonic understandings based on taken for granted assumptions under which the "illusory idea of a unitary 'thing' often appears to present itself" (p. 92). To analyze the ways in which language was being used to construct professors' definitions of LD, we identified, described, and evaluated (Howarth, 2000) the interpretative repertoires that were deployed within the teacher educators' discursive practices. According to Reynolds and Wetherell (2003), "Interpretative repertoires consist of 'what everyone knows' about a topic. Indeed the collectively shared social consensus behind a repertoire is often so established and familiar that only a fragment of the argumentative chain needs to be formulated in talk to form an adequate basis for the participants to jointly recognize the version of the world that is developing" (p. 495). They add that, "Since different repertoires construct different versions of people and events depending on the rhetorical demands of the immediate context, ideological dilemmas…arise as people argue and puzzle over the competing threads and work the inconsistencies between them" (p. 495). For us, it was therefore important to identify the interpretative repertoires made relevant by professors in their talk about learning disabilities in

order to analyze some of the materials from which pre-service teachers may construct their own definitions.

Data Sources

In that we desired to interview teacher educators from those universities recognized for producing the highest number of certified teachers, we first created a list of the 15 largest teacher preparation programs across a state in the southeast region of the United States. Our list was generated by locating a public document that listed the number of teacher candidates from each university who passed national teacher exams (Praxis series) in 2009. After identifying the 15 largest programs, we contacted the relevant department chairs and secretaries to request the contact information of professors/teacher educators involved in teaching and/or coordinating the development of special education methods courses designed for preservice teachers. We emailed invitations to possible participants, with a total of seven teacher educators agreeing to participate in 15 to 20-minute phone interviews. We followed a semi-structured interview protocol (Appendix B), with six of the seven interviews being conducted by one of the researchers. All of the phone interviews were digitally recorded, and later transcribed by one of the researchers. Unfortunately, for one of the interviews, the digital recorder failed. For that particular interview, we wrote a descriptive synopsis of the interchange immediately following the interview, taking note of places of similarity and dissimilarity in relation to the entire data set.

For the discourse analyst, the sample size is dictated by the research question, with "the success of a study…not in the least bit dependent on sample size" (Potter & Wetherell, 1987, p. 161). Thus, we oriented to the participants' language as the data source. As such, the number of participants in this study did not determine the ways in which we pursued our analysis and engaged in theorizing. We viewed each interview as a bank of language data to be analyzed, rather than as a single unit of data. We took, then, the participant's talk—each utterance, each turn, each discursive feature—as the unit of analysis, working to understand the talk in nuanced and layered ways.

Data Analysis

Within the discursive psychology framework, the first layer of analysis begins with the listening and re-listening to the audiorecordings, familiarizing ourselves with the ways in which the talk of the participants was used to work up certain definitions of learning disabilities. Next, one of the researchers transcribed the entire data set. According to Potter and Wetherell (1987), transcription is understood as "a constructive and conventional activity," and is positioned as a critical component of the analysis process (p. 166). Thus, during the transcription phase of the analysis, a transcription of each recording was constructed, with the understanding that this process was an essential component of our analysis process. Following the transcription of the recordings, we identified those segments focused specifically on defining learning disabilities. We focused on the extracts from the interviews that contained participants' responses to the following interview question: "How would you answer the question if a student asked you what is a learning disability?" We selected to do a more thorough transcription of these segments, applying a transcription system (See Appendix A) developed by conversation analyst, Gail Jefferson (2004), that allowed for a level of detail far beyond the text of the transcriptions (See Appendix C). This allowed for conversational details (e.g., pauses, prosody, gaps, intonation,

etc.) to be represented in an alternate form to sound. We then transitioned to reading all of the transcripts independently in their entirety several times, continually re-listening to the audios, as we searched for and identified patterns and varied ways of talking about learning disabilities.

Over the course of six months, we met weekly to discuss themes within and across definitions of LD in terms of the possibilities they present for students to construct their own definitions. We worked to describe the ways of talking about learning disabilities by noticing what participants made relevant, what they referred to as a source or authority, and which other sources or definitions were challenged or resisted in their responses. We therefore took their construction of LD as both a statement of what "counts" in the definition of or as a source for a definition, as well as what does not count. We oriented to participants' definitions as repertoires or material preservice teachers might draw upon as they construct their own definitions. We discussed what ideas were present, allowed for, privileged or denied in the construction of LD provided by each professor, organizing the noted patterns into four types of responses/definitions. Throughout the research process, we acknowledged the limitations of not having access to the related course materials and classroom interactions, and, that like all research, our understandings were "partial and positional" (Noblit, Flores, & Murillo, 2004, p. 22).

We offer several, amongst many, explanations of the ways in which teacher educators talk about learning disabilities, pointing to how talk may work to shape and re-shape how preservice teachers understand LD as a fluid and socially agreed upon construct in education settings. We begin by presenting the range of professor responses to the question, "How would you answer the question 'what is a learning disability'?" Through our analysis, we identified several patterns across the data, naming such patterns particular types of professor responses (see Table 1).

Definition Style	Sample Quote	Possibilities for Understanding	Implications
Complex/Contingent: Definition acknowledges and describes the complexity and contingency.	"This is a sort of a debate really you and I let them talk about it in the classrooms—what is "dyslexia" or far point copying problems, why can't people reproduce what they see on paper or um you now is it a memory problem so we try to look at it from a lot of different ways."	Offers opportunities to think/talk about the complexity of the definition.	LD is complex yet possible to discuss and explore its varied meanings.
Directive: A single definition is presented and supported by authoritative sources	"A learning disability is a valid construct supported with research and consensus of the learning disability roundtable that is characterized by intra-individual cognitive and intra-individual cognitive and academic variability."	Offers opportunities to think and talk about an authoritative definition.	LD can be defined and understood by a single definition set by authorities (e.g., DSM-IV, federal government

			disability roundtable).
Misdirective: Definition presents a information that may lead to a misunderstanding.	"It prohibits them from performing in their academic classrooms. It hinders their learning."	Does not offer access to a clear definition of the term.	There is a single definition, set by authorities (DSM-IV, federal government) of LD to be memorized.
Nondirective: Definition may be vague or tangential does not describe complexity or cite an authoritative definition.	"I would say it's that these children can learn. I think the word disability on that gives a false impression. They may have to work around situations. And they may have to develop new skills in order to master the content."	Does not offer opportunities to discuss the definition, but has access to one or more ways to talk about disabilities.	A specific definition is assumed not to be required or known.

Table 1. Definitions of Learning Disabilities.

Findings

We oriented to the response types in Table 1 in terms of the possibilities they presented to students, as well as the degree to which the complexity and the culturally contingent nature of learning disabilities was acknowledged (or not). Through the lens of our positionalities (Walkerdine, Lucey, & Melody, 2002), we considered whether space was created for further exploration and questioning within the presented definition (See "Implications" in Table 1).

Each of the participants used language in specific ways to construct learning disabilities as problematic, yet situated the problem in unique ways. For example, in Extract 1 (See Appendix C), lines 3-4, the professor prefaces her definition with a confirmation: "I answer it by saying that a learning disability i:s (.) um a valid construct." The emphasis on "is" works to create a contrast between the unnamed alternative. She makes this feature of her definition most relevant by emphasizing the contrast and placing it first (preferential order). This constructs LD as problematic in that its definition is not agreed upon, while also constructing it as something that needs to be defended or clarified.

Extract 4 likewise begins by defending something essential in the definition. This particular professor starts after a 4-second pause with "I would say >it's a::< < these children can le:earn." She thus begins to answer the question the way it was asked "what would you say?/I would say" but then repairs, and reformulates her answer to include the information she found most pertinent. It is not what she would say to define it that is positioned as most important in this answer. Rather, it is a confirmation statement that children can learn, with "learn" being elongated and louder in volume than the other words in the sentence. It is as if she is responding

to an unseen participant who argues that "these children" cannot learn. Thus, instead of providing the preferred response as she began to do (Sacks, Schegloff & Jefferson, 1974), one formulated in the way the question was asked, she repairs and reformulates her response by telling us what *not* to think.

We also noted that several participants construct the definition of a learning disability as something that is problematic for their students to understand. In Extract 2 the professor begins her answer with what frustrates her about the way her students understand learning disabilities. "Well (3) I harp on my students all the time because they use LD you know generic term meaning any type of disability." In Extract 3 the professor also begins by pointing to the difficulty in understanding LD: "point blank (.) I would tell them that it (.2) is com:plex." In Extract 5 the professor mentions twice that she has to clarify certain aspects of the definition even for her graduate students, which either implies that the concept is extremely difficult to understand, or that graduate students are not very capable of understanding.

In Extract 6, the professor emphasizes her desire for students to understand and the difficulty of explaining it to them in a different way. She begins "I <u>want</u> to say <u>you</u> tell me" and then goes on to describe a critical thinking exercise she does with her students in order to explore the debate about whether or not learning disabilities are socially constructed. This works up a version of LD that requires critical thinking, but is both possible and important for students to debate, grapple with, and explain. She says that the concept of LD answers the question: "How do we explain students that have an average to above average IQ but still have difficulties learning?" She therefore constructs a version of LD that is meant to account for something otherwise inexplicable, instead of to label or define it. This provides a repertoire of ways of talking about LD in which its nature is open for debate and possibly imperfect.

One professor demonstrated that LD is a problematic construct because it is difficult to explain. She begins by working to deflect the question: "I begin by telling them there's a variety of things a child could qualify to make them have a learning disability." We were initially intrigued by this statement because it doesn't make grammatical sense, but still works to open up the range of possibilities and lift the burden of explanation from the professor as if she is saying "it could be anything." Even though they amount to the same thing, saying "it could be anything," allows someone to maintain their position of expertise in a conversation in a way that "I don't know" does not. One demonstrates that the construct is too large to define, and the other demonstrates that you are not able to define it. It does not, however, provide her students with any vocabulary or framework with which to begin talking or thinking about learning disabilities. Her lack of specificity constructs LD as a non-issue, one that cannot be discussed because there is too much to it.

This professor goes on to construct learning disabilities as problematic for three other reasons: (1) they are not something you can see and they are not obvious (Extract 6, lines 7 and 10), (2) she cannot think of the words to define it and would need a textbook to do so (lines 22-24), and (3) even her graduate students do not understand it (lines 29-30). She was so unhappy with the definition she provided on the phone that within 15 minutes of the interview she emailed the interviewer a follow-up to her definition in which she referred to her textbook's definition of a LD and apologized for not having remembered it. This email implicitly defined learning

disabilities as something that is not only hard to understand, but that exists in technical manuals and is to be memorized as received knowledge, not internalized or reinterpreted.

Discussion

Recognizing the contingent nature of a LD and the ongoing debates in the field, we were not necessarily looking for a professor who had a "correct" definition of an LD. We suggest, however, that some definitions leave more room for discussion and construction of knowledge and learning disabilities, while others either invite students to receive and memorize a single definition, or construct LD as something impossible to understand. We argue that professors who acknowledge the debate about the very definition of learning disabilities, such as the professor in Extract 6 who invited her students to participate in the debate, provide contrasts (what it *is/isn't*, what it *does/doesn't* do), promoting critical interrogation of the construct. We further suggest that those professors who positioned disability as internal (Extract 5) or placed blame on a student's failure to understand instead of on the construct's complexity (Extracts 2, 4, and 5), may not provide or model as many resources for talking about learning disabilities.

Building on research describing how preservice teachers' sense of efficacy and responsibility influences their assessment and instruction of students labeled as "struggling" learners (e.g. Scharlach, 2008), it is important for researchers and teacher educators to attend to the ways in which particular interpretative repertoires are deployed when talking about contingent, yet consequential disability labels. Our findings support our claim that there are more and less productive ways of talking about learning disabilities in educational settings, regardless of where professors fall on the spectrum of ways of understanding learning disabilities. We suggest that the ways by which teacher educators talk about learning disabilities both opens and limits how students discuss, envision, and understand disability labels.

We do not advocate a single definition of LD, but instead suggest the importance of making problematic all that works to position learning disabilities as a simplistic, biological truth. We argue that unlike professors who offered a single, authoritative definition or who provided a misleading definition, professors who were nondirective and made the complexity learning disabilities explicit provided more opportunity to discuss and debate with a wider array of interpretative resources available. Since there are consequences for the degree to which teachers understand and feel responsible for the education of students with LD labels, we suggest that the talk about learning disabilities in teacher preparation courses should acknowledge the complexity, allow for discussion, and provide multiple resources for understanding and discussing learning disabilities.

Rachael Gabriel is an Assistant Professor of Reading Education at the University of Connecticut. Her research interests include teacher preparation, development and evaluation with a specific interest in related education policy as well as reading instruction and instruction for struggling readers.

Jessica Nina Lester is an Assistant Professor of Educational Psychology at Washington State University. Her research interests include qualitative methodologies, critical notions of human learning and development, and the educational experiences of children with refugee status.

References

Brownlee, J. (2001). Epistemological beliefs in pre-service teacher education students. *HigherEducation Research & Development*, *20*(3), 281-291.

Brownlee, J. (2004). Teacher education students' epistemological beliefs: Developing a relational model of teaching. *Research in Education*, *72*, 1-17.

Brownlee, J., Purdie, N., & Boulton-Lewis, G. (2001). Changing epistemological beliefs in preservice teacher education students. *Teaching in Higher Education*, *6*(2), 247-268.

CDC (Centers for Disease Control). (4 November 2005). QuickStats: Percentage of Children Aged 5--17 Years Ever Having Diagnoses of Attention Deficit/Hyperactivity Disorder (ADHD) or Learning Disability (LD), by Sex and Diagnosis--United States, 2003. *MMWR Weekly* [Online newsletter], *54*(43), 1107. Retrieved from http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5443a8.htm

Charlton, J. I. (1998). *Nothing about us without us: Disability oppression and empowerment*. Berkeley, CA: University of California Press.

Cherrington, J., & Breheny, M. (2005). Politicizing dominant discursive constructions about teenage pregnancy: Re-locating the subject as social. *Health: An Interdisciplinary Journal for the Social Study of Health, Illness, and Medicine, 9*(1), 89-111.

Corker, M., & French, S. (1999). Reclaiming discourse in disability studies. In M. Corker & S. French (Eds.), *Disability Discourse* (pp. 1-20). Buckingham, UK: Open University Press.

Corker, M., & Shakespeare, T. (2002). *Disability/postmodernity*. London: Continuum.

Danforth, S. (2009). *The incomplete child: An intellectual history of learning disabilities*. New York: Peter Lang.

Hepburn, A., & Wiggins, S. (2005). Developments in discursive psychology. *Discourse & Society*, *16*(5), 595-601.

Howarth, D. (2000). *Discourse*. New York: Open University Press.

Jefferson, G. (2004). Glossary of transcript symbols with an introduction. In G. H. Lerner (Ed.), *Conversation analysis: Studies from the first generation* (pp. 13-31). Amsterdam: John Benjamins.

Kavale, K., & Forness, S. (2000). What definitions of learning disability say and don't say: A critical analysis. *Journal of Learning Disabilities, 30*(3), 239-56.

Kavale, K., Spaulding, L., & Beam, A. (2009). A time to define: Making the specific learning disability definition prescribe specific learning disability. *Learning Disability Quarterly, 32*, 39-48.

LDA (Learning Disabilities Association of America). (2010). About Learning Disabilities—for Teachers. Retrieved from http://www.ldanatl.org/aboutld/teachers/index.asp

Mehan, H., Hertwick, A., & Miehls, J. (1986). *Handicapping the Handicapped.* Palo Alto, CA: Stanford University Press.

Noblit, G., Flores, S., & Murillo, E. (Eds.). (2004). *Postcritical ethnography: Reinscribing critique.* Cresskill, NJ: Hampton Press.

Potter, J., & Wetherell, M. (1987). *Discourse and social psychology*. London: Sage.

Reynolds, J. (2008). *The Single Woman: A discursive investigation.* London: Routeledge.

Reynolds, J., & Wetherell, M. (2003). The discursive climate of singleness: The consequences for women's negotiation of a single identity. *Feminism and Psychology, 13*, 489-510.

Sacks, H., Schegloff, E. A., & Jefferson, G. (1974). A simplest systematics for the organization of turn-taking for conversation. *Language*, *50*, 696-735.

Scharlach, T. (2008). These kids just aren't motivatd to read; The influence of preservice teachers' beliefs on their expectations, instruction, and evaluation of struggling readers. *Literacy Research and Instruction , 47*(3), 158-73.

Shannon, P., & Edmonson, J. (2010). The Political Contexts of Reading Disabilities. In A. McGill-Franzen, & R. Allington, *Handbook of Reading Disabilities Research.* New York: Routeledge.

Sleeter, C. E. (1987). Why is there learning disabilities? A critical analysis of the birth of the field with its social context. In T. S. Popkewitz (Ed.), *The formation of school subjects: The struggle for creating an American institution* (pp. 210-237). London: Palmer Press.

Sternberg, R., & Grigorenko, E. (1999). *Our Labeled Children.* Reading, MA: Perseus Books.

Steubing, K., Fletcher, J., LeDoux, J., Lyon, R., Shaywitz, S., & Shaywitz, B. (2002). Validity of IQ-discrepancy classificaions of reading disabilities: A meta-analysis. *American Educational Research Journal, 39*(2), 469-518.

Thomas, C. (2004). How is disability understood? An examination of sociological approaches. *Disability & Society*, *19*(6), 569-583.

Walkerdine, V., Lucey, H., & Melody, J. (2002). Subjectivity and qualitative method. In T. May (Ed.), *Qualitative research in action* (pp. 179-196). London: Sage.

Wetherell, M. (1998). Positioning and interpretative repertoires: Conversation analysis and post-structuralism in dialogue. *Discourse & Society, 9*(3), 387-412.

Zirkel, P., & Thomas, L. (2010). State laws and guidelines for implementing RIT. *Teaching Exceptional Children*, *43*(1), 60-73.

Appendix A

Jeffersonian Transcription (Adapted from Jefferson, 2004)

Symbol	Example	Explanation
(0.6)	that (0.6) is odd?	**Length of silence** measured in tenths of a second.
(.)	right (.) okay	**Micro-pause,** less than two-tenths of a second.
:::I	::::I don't know	Colons indicate sound-stretching of the immediately prior sound. The number of rows indicates the length of prolonged sound.
_____	I <u>know</u> that	Underlining indicates **speaker's emphasis or stress.**
[	T: [Well at's R: [I mean really	Left brackets indicate the point at which one speaker **overlaps** another's talk.
=	you know=I fine	Equal sign indicates that there is **no hearable gap** between the words.
WORD	about a MILLION	Capitals, except at beginnings, indicate a marked **rise in volume** compared to the surrounding talk.
> <	>I don't think<	Words in "greater than" then "less than" signs are delivered at a **faster pace** than the surrounding talk.
< >	<I don't think>	Words in "less than" then "greater than" signs are delivered at a **slower pace** than the surrounding talk.
( )	What a ( ) thing	Empty parentheses indicate **inability to hear** what was said.
(word)	What are you (doing)	Word in parentheses indicates the **best possible hearing.**

Appendix B

Interview Protocol

1. How do you describe the IEP process to your students?
2. How do you describe IDEA to your students?
3. What do you hope your students remember when they go to their first IEP meeting?
4. Have you ever been involved in a referral meeting?
5. If so, describe that experience OR If so, describe one of those meetings.
    i. Do any stick out in your memory for specific reason?
6. What is your background/How did you come to being a special education teacher educator.
7. How long have you been teaching this course?
8. Did you work in a K-12 setting at some point in your career?
9. How do you describe RTI to your students?
10. How would you answer the question "what is a learning disability"?

Appendix C
Transcribed Extracts

Extract 1
1. Right. How would you answer the question if a student tasked you what is a learning disability.
2. ((laughs)). O:::h I don't think we have time for that-um::
3. Ok
4. Um no um I um well um ⇑I (.2) answer it by saying that a learning disability i:s (.) um (.2) a valid construct. Um supported with (.) um research and uh consensus of the learning disability roundtable
5. … um (2) tha::t >uh is characterized by< <intra-individual cognitive and academic> variability⇑
6. … I:: would also add that <the most common type of learning disability is> uh dyslexia⇑
7. Right
8. And uh discuss the pattern (.) uh that's evident uh <in individuals who have dyslexia.>
9. … I would uh (2) at some point would you know share the the federal definition and note that <even though Rt⇑I has uh been changing the way we look at learning disabilities> that t<he federal definition> hasn't changed. And that that's more THAT THAT is consistent with the um this con you know this idea of (.) intrA-individual variability
10. Yeah
11. and uh unexpected underachievement in certain areas.
12. … Um I would tell them that the learning disability has (.) uh:: can be manifested in according to IDEA 0<u>4</u>: reguLATions actually <which came out in 06>
13. … Um in 1 of 8 areas. >3 reading, 2 math, uh (/2) 3 langauge (2) areas.< So that's in a nutshell. How I would answer it.

Extract 2
1. And then my last question for you is how how would you answer the question if a student asked what is a learning disability?
2. (3) well (3) I harp on my students all the time because they use LD you know generic term meaning any type of disability.
3. Mmhm
4. And because we view learning disabilites in special education as a separate category with average IQ and discrepancy between functional ability and IQ level um then I try to stress that to my students that if we're talking about a learning disability we're talking about something that that relates to cognitive academic performance. If we're talking about a disability then that relates to vision and hearing and all the other disability areas

Extract 3
1. how would you answer the question if a student asked what is a learning disability?
2. Ok=I-i⇑ (it) (.) <point blank> (.) I would tell them that it (.2) is com:plex
3. Uh huh
4. Um (.) I <tell them that it's a> <u>specific</u> learning disability. We take the >definition< <the [state name] state> definition
5. [Mmhm]
   a.   [And we] <u>break</u> (.) that up
6. Mm [hmm]

7. [And] I <u>talk</u> abo:ut um ha:ving (.) you know um (.2) a <u>good</u> child an average to above average IQ:
8. [Uh huh]
9. With a deficit in an area (.)
10. but its its <u>bro</u>ken up <we just finished that> in one of my classes and we spent about >two days on< it

Extract 4
1. Um how would you answer the question, from a student: what is a learning disability.
2. Um ((Audible breathe)) ((laughs)). I <u>want</u> to say <u>you</u> tell <u>me</u> uh
3. Hmmmm good.
4. Uh huh well I think you we I I haven't I have the critical⇑thinking exercise in one cla- the general survey class I teach⇑ which ASKS the question is learning dis is a learning disability a social construct?
5. Uh huh
6. Um (2) so (.) you know we talk about the 19<u>60</u>s a little bit. I talk about was this a white construct⇑ or is there something in some students or how do we explain students that have an average to above average IQ but still have difficulties learning⇑.

Extract 5
1. I see. Ok. Um how would you answer the question if a student asked you what is a learning disability.
2. (8min)
3. (4) I would say >it's a::< <<u>these</u> children can <u>le:arn</u>.> I think the word DISability on that gives a false imPRESSion. They may have to work (.) arou:nd situations.
4. Mmhmm
5. <And they may have to develop> new >skills< in order to: (.) master the content
6. uh huh
7. But I think (.2) that that's being a good student for ANYbody
8. Yeah
9. Um y-you get these uh these people that um (1) <didn't have to study in elementary school. (.) You know everything came easy.> Then in ⇑middle school it gets a little ⇑harder so they have to develop ⇑study skills. Well (.) you get ⇑some students that they go all the way through ⇑high school and they just breeze through
10. Right
11. But they haven't developed the study >strategies<. Like if something is difficult with you ok how do you app⇑roach that and how do you break it down into little pieces so that you can:: um make uh little accomplishments toward the goal:
12. Mmhmm
13. and those are good strategies for everybody to have.
14. Right right.
15. So, I mainly present it like tha::t because we we all have areas that we I I tell em SOONer or later everybody hits the wa:ll. It may in the ⇑doctoral program. Maybe somebody doesn't hit the wall until their doctoral program
16. Uh huh

17. But there's always uh gonna be a challenge out there (2) that's not easy to overcome. and you may not ⇑find it early in your life but ev⇑entually you will. ((laughs)).

Extract 6
1. Um when your students ask and they may not because it sort is the actual topic of your course, but if a student asked what is a learning disability, what's your answer for that question?
2. U:m⇑ hu-h I: tell them there's a variety⇓ of things a child could qualify to make them have a learning disability.
3. Mmhmm
4. Um I also tell them that a learning disability is >not phys-< <a lot of times it's> not <somethin that's (.) you know> you can see. ⇓
5. Mmhmm
6. Um children have a <learning disability and you have no idea they> have one (.) so it's not a disa <one of those disabilites that we talk about> (.) that is so obvious⇑ to everyone⇑
7. yeah
8. That (.) it is actually (.2) <something the child is> struggling with⇑.
9. So even though it's not something >physical< or <something we can> see, the child is really struggling ( ) in that >area< and so (2.2)
10. we have to see we have to evaluate that child and say what is their <learning disability>and what is it.
11. I just it kinda it has a variety of things it can (.)qualify for lots of different disabilities.
12. Yeah yeah. What does it mean to have a learning disability?
13. (2) What does it mean to (.) t- have a learning disability⇑? We::ll⇑, hehe
14. Hmm(laughs)
15. Um:: well it means a dela:yed it um I mean I don't know if <I can I can't think of the exact words right this minute> um (.2) the definition of a learning disability. Well now you're making me (have) think of my textbook. ((laughs))
16. Oh no I'm sorry. I just you know in [terms-]
17. Well I
18. You know, yeah
19. <It it it so well it has it> prohibits them from performing in their academic classrooms. ⇓ Um (.2) and it hinders that so because that's one thing that I have to emphasize <even to my graduate students> (2) >a child can< have a disability but if it >doesn't< prohibit them from: (.2) what is the word that we use. if it doesn't⇑ (.2) <is it it has to⇑> hinder their >learning.<
20. [Yeah]
21. [For] them to qualify.
22. Right sort of like with with psychological disorders it has to have an impact on normal functioning.
23. Right. And so they have to realize that even my even my <some of my graduate students say> like "well they have it" yeah <but if it doesn't> hinder their l- (.2) if it doesn't hinder their learning then they're not going to qualify (.2) and they're not going to receive services.
24. Right right.
25. So I emphasize it as that.
26. Mmhmm that makes sense.