(Dis)abling children in primary school micro-spaces: geographies of inclusion and exclusion

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Abstract

The geography of disabled children’s schooling in the United Kingdom (UK) is changing, and this is underpinned by a growing international consensus that disabled children should be educated within mainstream school settings (UNESCO, The Salamanca statement and framework for action on special educational needs. World Conference on Special Needs Equality and Quality, Salamanca, Spain, 1994). As a result, new geographies of desegregation in disabled children’s education are emerging, with disabled children being increasingly educated within mainstream rather than ‘special’ schools. This paper explores this issue, focusing on the (re)production of discourses of ‘inclusion’ and ‘disability’ in two mainstream primary schools in England. Empirical findings demonstrate that school actors reproduce meanings of inclusion and disability in different ways within and between school settings. It is shown that discourses of inclusion are frequently based on educational–medical models of disability, and can serve to exclude some children from mainstream schools. With this in mind, the paper highlights the value of a spatially sensitive evaluation of inclusion, that emphasises the importance of schools as unique moments in space and time to everyday practices of inclusion and disability.

Introduction

Within the context of recent international educational statements (UNESCO, 1994), contemporary (UK) education policy has heralded a shift in the geographies of disabled children’s education. Despite ongoing academic and lay debates (Hornby, 1999), general international policy and national (UK1) trends are emerging, which focus on the ‘inclusion’ of disabled children (Education Act, (DfEE, 1993) Education Act, (DfEE, 1996) Special Needs and Disability Act (DfES, 2001a); Code of Practice (DfES, 2001b)). This is manifest in an increasing proportion of disabled children attending mainstream schools and a related decrease in the numbers of children being segregated within ‘special’ schools.2

Importantly, these policy changes appear to have developed in response to critiques of segregated ‘special’ education from academics, activists and disabled adults. For instance, some commentators argue that special schools ‘educate’ disabled people into a lifetime of dependence/marginalisation, by not providing disabled people with the skills and qualifications necessary to...
competes effectively in the labour market (Barton, 1993; Kitchin and Mulcahy, 1999). Moreover, as with asylums and other forms of segregation of disabled people, it can be argued that special schools serve a dual purpose of containing ‘other’ groupings and administering ‘therapies’ that seek to normalise disabled children (Park and Radford, 1999; Philo, 1989). Indeed, Copeland (1999) asserts that in common with asylums, special schools serve a more general normalisation purpose, by demonstrating the potential results of not reaching normative curriculum expectations. Morris (1991) claims that special schools serve to ‘other’ disabled children. Following this line of thought, it can be argued that special schools are physical ‘dustbins of disavowal’ (to borrow the Shakespeare (1994) terminology), developed for the physical containment of one group of ‘others’. Special schools represent the spatial representation of society’s fear of socio-spatially constructed ‘others’ (Kitchin, 1998; Sibley, 1995). These arguments cumulate in a civil rights agenda, which claims that it is the right of every child to attend mainstream school (Alderton and Goodley, 1998; Barton, 1993). Despite the strength of these arguments, the legislative changes noted above have occurred synchronously with a rise in neo-liberal ideology in many ‘developed’ countries, and this also reflects the timing of ‘de-institutionalisation’ in ‘developed’ countries (Gleeson, 1997). Indeed, critics claim (among other things) that ‘inclusion’ conceals an agenda to reduce expenditure on (special) education (Kauffman and Hallahan, 1995). Meanwhile some advocates of inclusive education have suggested that wider neo-liberal trends in education conflict with ‘inclusive principles’ (Bangley and Woods, 1998; Booth, 2000). Critics and advocates alike highlight the need for substantive research on the issue of ‘inclusion’.

This paper contributes to these ongoing debates, through an examination of the meanings that are projected onto ‘inclusion’ within national policy documents and teachers’ discourses, and the understandings of disability that underpin these representations. Empirical findings are presented from interviews conducted with 20 teachers3 from two ‘physically inclusive’ primary schools (‘Church Street’ and ‘Rose Hill’4), which formed part of a wider research project. Although both schools have a relatively high proportion of disabled pupils, they are located within differing institutional and socio-economic contexts. Church Street is situated within an Education Action Zone (EAZ).5 This highlights the high level of social exclusion experienced by many pupils. By contrast, Rose Hill is not located within an EAZ, but is a special resource mainstream school for physically disabled children.

This paper is divided into three main sections. The following section identifies the changing national (UK) policy context of Special Educational Needs (SEN) policy, with particular emphasis on discourses of inclusion/exclusion and disability. The second section presents findings from interviews with teachers. This demonstrates the flexibility of interpretations of inclusion, and the dominance of individual tragedy understandings of disability. Due to the flexibility of ‘inclusion’ and the prevalence of educational–medical understandings of disability, the final section considers the contribution that this examination of geographies of ‘inclusion’ and ‘disability’ in schools has made to current academic debates on inclusion and ‘geographies of disability’.

The national policy context

There is a growing international hegemony, which identifies the mainstream school as the place to educate (most) disabled children, and this is exemplified by the Salamanca statement (UNESCO, 1994). However such agreements are open to a variety of interpretations, and are enacted through mundane everyday practices. Thus, inclusion has unique expressions in different contexts at a variety of interconnected scales, and this emphasises the difference that place makes (see Massey, 1993, 2001). Indeed, the variety of interpretations is demonstrated by the diversity of ‘national policy’ interpretations of ‘inclusion’ (Kitchin and Mulcahy, 1998; Loxley and Thomas, 1997). Moreover, legislative frameworks are open to (and emerge from) a variety of interpretations, contestations and transformations, as demonstrated below.

UK policy: discourses of inclusion, exclusion and disability

In the UK context, the 1980 and more specifically 1993 and 1996 Education Acts facilitated a shift in the location of disabled children’s education from segregated special to mainstream schools (DfEE, 1993, 1996). Urban environments are, however, palimpsests representing artefacts of social relations, with space being constituted in social relations simultaneously to social

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3Teachers, classroom assistants and school managers were interviewed.
4To ensure confidentiality and anonymity, the schools and interviewees have been assigned pseudonyms, and the LEA is unidentified.
5EAZs are groups of schools that have successfully bid for extra funding from national government. Groups of schools are awarded EAZ status on the grounds of levels of social exclusion and become, among other things, eligible for extra funding.
relations being constituted in space (see Harvey, 1985; Imrie, 1996; Laws, 1994, for a fuller discussion). In terms of special education, this results in the existence of special schools wherein facilities for disabled children are concentrated. Moreover, the special needs ‘institution’ is not dismantled by moves towards inclusion, but becomes a reconfigured institution, a ‘...spidery network of dispersed intentions, knowledges, resources and powers’ (Philo and Parr, 2000, p. 514). The special needs institution influences ‘inclusive’ education, generating powers’ (Philo and Parr, 2000, p. 514). The special needs institution influences ‘inclusive’ education, generating what Mousely et al. (1998) identify as a tension between special educators’ professional ‘expertise’ and inclusion. This section now examines how UK national policy negotiates this tension.

The recently applied Special Needs and Disability Act or SENDA (DfES, 2001a, b) represents a consolidation of ‘inclusive’ policies, especially the changing physical location of disabled children’s education. This Act also extends the provision of the Disability Discrimination Act (1995) into schools, and thus encourages significant moves towards the ‘inclusion’ of disabled children into mainstream schools.

Despite this, national policy guidelines contain flexibility, with a variety of caveats that educational actors can draw upon to exclude disabled children. For instance, disabled children can only attend mainstream schools if the following criteria of the Act are met:

The conditions are that educating the child in a school which is not a special school is compatible with: a) his receiving the special educational provision which his learning difficulty calls for; b) the provision of efficient education for the children with whom he will be educated, and; c) the efficient use of resources (Special Educational Needs and Disability Act, DfES, 2001a, p. 316/2).

Although schools cannot ‘abuse’ this criterion (Code of Practice, DfES, 2001b), not all schools are expected to include children with all types of SEN. This suggests that some disabled children will continue to be excluded from their local ‘community’ school, and this conflicts with the Salamanca statement (DfES, 2001a; UNESCO, 1994).

A further demonstration that inclusion does not involve all children attending mainstream schools is the continued existence of special schools. Thus, exclusion is a central component of inclusion within national government policy, with inclusion involving children with a wider, rather than the entire, range of mind–body characteristics (DfES, 2001a, b).

Whether children are included or excluded in/from mainstream schools can depend upon children’s personal characteristics, particularly the level, type or severity of a child’s impairment(s). A discourse of meeting the needs of individual children facilitates such exclusions.

This is especially the case as such ‘special’ needs are located in the individual child, rather than the child–environment interface (Slee, 1997). This is evident in the current Code of Practice (DfES, 2001b), where children are classified as having SEN if:

They have a learning difficulty which calls for special educational provision to be made for them: i) have a significantly greater difficulty in learning than the majority of children of the same age; or ii) have a disability which prevents or hinders the child from making use of educational facilities of a kind generally provided for children of the same age in schools within the area of the local education authority (DfES, 2001b, p. 1/3, original emphasis).

Along with situating SEN firmly within individual children, there is a clear emphasis on age-related learning expectations. This demonstrates that hegemonic representations of childhood, as expressed in educational discourses, mediate understandings of disability in SEN policy. Although Piagetian models of age-related educational development, founded upon ideas of measurable intelligence have been critiqued (Archard, 1993), they remain pervasive in educational policy (James et al., 1998). Schools as organisations and the National Curriculum are designed around a socially constructed ‘norm’ based upon expectations of age-related stages of competence development (James et al., 1998), and this is also apparent in ‘inclusive’ national policies. These norms can serve to ‘other’ children who cannot/do not reach these expected milestones (Hill and Tidsall, 1997), although they may be reproduced or contested by teachers and children through their everyday practice in schools.

This demonstrates that national education policy (like urban environments, see Imrie, 1996) are ablest, being designed around a socially constructed ‘normally (physically, cognitively, behaviourally) developing child’. Children can be labelled ‘special’ (or ‘abnormal’ Vachlou, 1997) if they do not reach these expected developmental norms. Children so defined will be ‘treated’ by special educational needs (psychological–educational) pseudo-medical intervention, which focuses on ‘curing’ children’s difficulties through therapies aimed at the individual.

This focus on the limitations of the individual child is further highlighted through the definition of disability in the Code of Practice (DfES, 2001b). This draws upon previous Acts (Children’s Act, 1989; Disability Discrimination Act (DDA), 1995) to define a child as disabled:

...if he is blind, deaf or dumb or suffers from a mental disorder of any kind or is substantially and permanently handicapped by illness, injury or congenital deformity or such other disability as may be prescribed in the Children Act (1989)…[or]…if he
has a physical or mental impairment which has a substantial and long-term adverse effect on his ability to carry out normal day-to-day activities (DfES 2001b, p. 7).

The SENDA draws upon an individual tragedy approach to disability and emphasises the individual in determining when discrimination is ‘justified’.

Indeed, the educational–psychological ‘diagnosis’ as special has evident parallels with the ‘medical model’ of disability (see Oliver, 1996), with its focus on (medical) diagnosis, intervention and ‘cure’ (to make disabled people ‘normal’). Indeed, Oliver (1993) argues that the medical model of disability is a sub-set of the individual tragedy model, which emphasises medical intervention to alleviate the tragedy of having what is viewed as a ‘personally inadequate’ body (or mind). Oliver claims that the individual tragedy model of disability posits disability as a ‘deviation’ from a ‘norm’ of bodily function, producing a dichotomy between ‘able-bodied’ and ‘disabled’ people, which is then represented as a biologically reducible individual tragedy. It is, therefore, the individual tragedy model that locates disability within the body (Oliver’s discussion focuses on bodily rather than mental differences), concealing the operations of a disablist society (see also Gleeson, 1996; Imrie, 1996; Parr and Butler, 1999). This position allows this current argument to be taken a step further.

Drawing upon the Oliver (1993) definition of the medical model of disability as a sub-set of the individual tragedy model, it is possible to identify national (special) education policy as underpinned by an individual tragedy model of disability. This establishes disability or SEN as an individual ‘tragedy’, rather than considering how society contributes to disablement. This discussion has identified two sub-sets of the individual tragedy model of disability within the policy documents. The first is situated within an educational–psychological model, which labels children as ‘special’ (in terms of cognitive or behavioural development) and intervenes through various therapies (e.g. speech therapy, occupational therapy) in an attempt to make these children ‘normally developing’. The second is the medical model, as some children are subject to labelling and intervention under the medical model. Some children will have dual or multiple diagnoses. This identification of (at least) two sub-sets of the ‘individual tragedy model’ within education policy is useful in that it contributes to an agenda for highlighting the intellectual in disability geographies (Hall and Kearns, 2001). Moreover it is possible to extend this agenda by making ‘space’ for the emotional and behavioural within geographies of disability.

The policy for identification and meeting SEN, outlined above, creates a division between those children who have special needs and those who do not, drawing dividing lines on a continuum of ability. This provides one example of how children are categorised as ‘able’ or ‘disabled’ in different settings. In this sense, the SEN process can be understood as an institution, which operates within and between schools (see above). This represents the ongoing conflict between the specificity of identifying and meeting individual needs, and the generalising impulses of ‘inclusive’ education (Dyson, 2001). This conflict is situated in a mainstream education system that is designed around the social construct of a ‘normal’ child (with parallels to urban environments designed for ‘normal’ bodies: Hahn, 1986; Hall and Imrie, 1999).

While most children with a diagnosis as special will be educated in mainstream schools, those who fall furthest from these norms will be excluded and taught in segregated special schools. However, policy is vague concerning the exact level of ‘deviance’ from the ‘norm’ at which children will be excluded, and this facilitates interpretation by actors at the local (Ainscow et al., 1999) and school level, as discussed in the following section. In considering the inherent flexibility of this policy, it is useful to consider legislation not as determining practices, but producing an environment in which particular practices are more socially acceptable (Shilling, 1991).

**Teachers’ interpretations of inclusion/exclusion and disability**

*Interpreting inclusion/exclusion*

This section draws upon findings from semi-structured, qualitative interviews that were conducted with 20 ‘teachers’ from the two case-study schools. Importantly, the findings illuminated that understandings of inclusion within and between the school settings were heterogeneous, while some shared facets of inclusion were noted. For instance, teachers in both Rose Hill and Church Street considered inclusion to involve various exclusions. This was based upon the individual characteristics of children, and often justified by a discourse of meeting children’s needs. More specifically, in the context of Rose Hill, some teachers discussed the needs of both disabled and non-disabled children. By contrast, teachers in Church Street only drew upon a needs discourse in relation to disabled children.

Despite the shared emphasis on children’s needs within the two schools, the characteristics of children who were physically included/excluded differed between the two schools. In Rose Hill children with physical disabilities and/or learning disabilities were physically included, and this reflects both key actors’ considerations and a local policy of identifying mainstream schools to cater for specific disabilities. Exclusions from
the school were often based around ‘learning’ or cognitive competencies, particularly for children with a dual diagnosis as being learning and physically disabled. As Anthony argued:

...[this is] a mainstream primary school offering resources and places for children who can access mainstream curriculum...that’s one of the criteria for us (Anthony, head teacher, Rose Hill).

This priority accorded to academic criteria was situated within a school ethos that emphasised academic attainment, and the school’s ‘effectiveness’ (as measured externally by Standard Assessment Tests (SATs) and Ofsted6). This implicitly suggests that some disabled children may be excluded due to the pressures of maintaining ‘standards’ in order to effectively compete in the education ‘market’. This supports the Bangley and Woods (1998) findings that national policy emphasis on standards can serve to make mainstream schools hostile environments for disabled children.

In contrast, the competitive education market was considered by some teachers in Church Street as contributing to the schools’ acceptance of pupils with a range of types and severity of impairment. A key determinant of schools’ funding is the number of pupils on roll, making it imperative for schools to compete effectively in the education market to attract students. Church Street, unlike Rose Hill, could not market itself as academically ‘successful’ due to its poor SATs results. Instead, some teachers suggested that the school (along with having an accepting ethos) included children with a range of mind–body characteristics, in order to maintain sufficient numbers of pupils.

Furthermore, teachers in Church Street did not suggest that ability to ‘access’ the curriculum was a selection criterion. Indeed, inclusion was seen as principally serving a social, rather than academic, role for disabled children. This contrasted with the views of teachers in Rose Hill. In discussing cases where children had been excluded from Church Street, teachers emphasised issues of safety (protection) and danger. Teachers emphasised that the majority of exclusions from Church Street occurred on behavioural grounds. Some children were discursively constructed as ‘little devils’ that compromised the safety of ‘little angels’, who it is the schools’ responsibility to ‘protect’ (see Valentine, 1996 for a discussion of discourses of children as angels and devils). In considering the use of such discourses it is necessary to consider schools’ role within society, as a container, within which children are segregated from mainstream society, usually for a proportion of the day.

Society expects children to be protected within this environment and this begins to demonstrate the competing pressures on schools to ‘include’ different types of children, whilst ‘protecting children’ and maintaining a calm environment in which children can ‘learn’ (to ‘become’ adults, see Wyness, 2000).

Teachers within the two schools negotiated these competing pressures heterogeneously, and thus official discourses of inclusion and exclusion were found to differ between the two schools. However, teachers within the schools also drew upon a variety of conflicting discourses of inclusion/exclusion. Some teachers in Rose Hill contended that disabled children should be excluded if they were violent and physically disabled. In an extreme example, Anita claimed that children should be excluded if their level of difference makes themselves or other children uncomfortable, a view that contrasted with stated school policy:

I think when it becomes uncomfortable for the child themselves, whatever differences there may be and if those differences become uncomfortable for the children around them [children should attend special schools] (Anita, teacher, Rose Hill).

In Church Street, some teachers commented that children with more severe learning disabilities should attend special schools. Other teachers stressed that some disabled children with Down’s syndrome should attend special schools in order to learn the skills necessary for their adult futures which were different to non-disabled children’s (see Shakespeare and Watson, 1998). Other teachers claimed that some disabled children should be in special schools to protect them from being bullied by non-disabled children. This is a common reason for parents selecting special schools for their disabled children (Alderton and Goodley, 1998). One teacher’s opinion of ‘inclusion’ directly conflicted with dominant school and national policy discourses:

I think inclusion is rubbish. Because children need to be at special schools to be cared for, with specialist teachers in a specialist environment where they’re getting what they need. Now they’re in the classroom, they’re stuck at the back of the classroom being looked down on, they’re way behind. ...Well, some can do the same kind of work, but I expect them to do it slower, less neatly—it’s going to take longer for them to compute it through, they’re going to be noisier, their concentration level’s going to be less, so they’ll get easily distracted. They are going to, in turn, distract the others, which is what I don’t want really, because I want to develop these children (Jackie, teacher, Church Street).

Of course, children with learning disabilities do not have to sit at the back of the class, or be labelled as

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6 Contention abounds regarding SATs as a measure of school standards (Dyson, 1997). However, published SATs league tables are used by parents and local/national institutional actors as a guide to schools’ effectiveness.
different, and this statement emphasises specific disabbling practices that Jackie herself engaged in. However, Jackie draws upon a common distinction between ‘special needs’ and ‘general’ teachers (Vachlou, 1997).

Jackie was relatively powerless to influence school (or national) policy, and this emphasises how teachers were variously positioned within the power-geometries (c.f. Massey, 2001) of the schools or education institution to impose their views of ‘inclusion’. However, school policy is ‘precarious’, as dominant discourses are unstable, being open to contestation and transformation.

This demonstrates that schools are ‘precarious accomplishments within time and space,’ (Philo and Parr, 2000, p. 518). So far this discussion has examined teachers’ views of physical inclusion/exclusion. However, although some teachers defined inclusion as synonymous to the physical relocation of disabled children from special to mainstream schools (a position reflective of ‘integration’ rather than ‘inclusion’, Farrell, 2001), the majority of interviewees emphasised that inclusion involves particular within-school practices. It is valuable to now consider teachers’ representations of inclusive within-school practices.

When discussing within-school practices of inclusion, many teachers cited issues such as caring, acceptance and/or tolerance. This has resonance with current academic interpretations of ‘inclusion’, which have been widely disseminated to schools (Booth et al., 2000). Interestingly, this theme was more dominant in interviews with teachers from Rose Hill than Church Street. For instance, Anthony (head teacher, Rose Hill) stressed, ‘That’s part of the caring and respect and tolerance and those things....’

All staff from both schools placed an importance on children being treated the ‘same’, whether they had disabilities or not. It was noted that an important concern was that all children should follow the same rules, and many teachers in both schools mentioned this.

Despite the shared focus on being ‘the same’ the everyday practice of inclusion differed between the two schools. For instance, in Rose Hill children were educated alongside their non-disabled counterparts, to the extent that they were seldom in classes with children with similar impairments. As the SEN Co-ordinator in Rose Hill emphasised:

...they’re all treated the same. There’s no—it’s exactly the same, and if they can’t do things because they physically can’t, like hockey, or something, then they have a hockey stick and they actually play in the chair. Or they do physio in that time....they are treated as equally as everyone else, and the other children who aren’t physically disabled, they know that as well (Leslie, SEN Co-ordinator, Rose Hill).

In contrast to this total physical inclusion discussed above, in Church Street the children with Down’s syndrome were taught separately from their non-disabled peers, for the majority of the time, in a makeshift special unit. When these children attended mainstream classes, they did so en masse as ‘the Downs’ kids’, rather than joining the various form classes to which they belonged:

They get the best of both worlds really, they get to do our Art, they get to do their own thing, they get to do our PE, or somebody else’s PE. They’ve got all sorts of things for them, so they get to work with everybody, not just the Downs kids, and they get to be on their own for a bit as well—and they get to do their life skills... (Gerry, teacher, Church Street).

Segregating children with Downs’ Syndrome for the majority of formal timetabled periods depended upon an assumption that these children, because they shared a common medical diagnosis, were homogeneous in terms of academic capability. This was despite significant diversity between them. This practice of children learning targeted skills in a segregated setting is indicative of education policy interpretations of social inclusion (Farrell, 2001). This arguably reflects Church Street’s location within an EAZ, although unlike national education policies towards ‘social inclusion’, the skills that the children with Down’s syndrome are taught were not aimed towards their inclusion into the labour market. Instead, this dividing practice was based on a perception that these children need to be equipped for a dependent future; radically different from their non-disabled peers (Shakespeare and Watson, 1998). Thus, the children with Down’s syndrome were thought to require ‘... rather more of....making toast....and rather less Science, History or whatever’ (Amanda, head teacher, Church Street).

This discussion has demonstrated that although there were some shared meanings attached to inclusion, participants’ representations of inclusive practices frequently varied between and within the two schools. This suggests that inclusion, rather than signifying a common meaning between educational practitioners, may be identified as an ambiguous social–spatial construct, evoking a variety of meanings for individuals in different settings, although some shared group understandings may exist. Teachers’ interpretations of inclusion/exclusion are frequently dependent upon particular representations of disability, and this issue is explored in the following section.

Constructing disability

When considering instances when children should be excluded from mainstream schools, all interviewees drew upon facets of ‘individual tragedy models’ (see Oliver,
For instance, all teachers located disability within the individual child, rather than emphasising the role of disablist socio-spatial relations (c.f. Imrie, 1996). Teachers were often found to construct disability as deviant or ‘abnormal’ (Hahn, 1986; Morris, 1991), by contrasting ‘disabled’ children to what James et al. (1998) label the ‘normally developing child’. Some teachers emphasised non-disabled children’s ‘normality’ in comparison to disabled children, evoking disabled children as ‘abnormal’ through an absent presence:

Sometimes the parents don’t realise. Joanna’s [girl with Down’s Syndrome] mum is like that. She expects Joanna to be here all the time, and she wants her to be included and be with normal children. That’s not helping her (Gerry, Church Street).

The concept of the ‘normally developing child’ suggests that children’s competence (emotional, bodily and cognitive) should increase at a set rate with age. Teachers talked about an increasing ‘gap’ between ‘able’ and ‘disabled’ as the children got older. For instance, Anthony commented:

…but what you’re finding is that in reception, the gap [between disabled and non-disabled children] is manageable, but the gap is getting wider and wider and he’s less and less able to access anything which is part of the school (Anthony, head teacher, Rose Hill).

This quote clearly locates disability in this individual child, who Anthony thinks should access things that the school has to offer, rather than the school adapting (beyond a point) for him.

Along with establishing disabled children as having ‘abnormal’ mind–bodies in relation to the ‘normally developing child’, many teachers drew upon discourses of disability as a (random) tragedy (Morris, 1991). As Sharon, a teacher in Rose Hill states, ‘...it’s bad enough—it’s unfortunate to be disabled...’ (Sharon, teacher, Rose Hill).

This discussion has emphasised that individual tragedy models of disability dominate teachers’ discussions. This is unsurprising, as it is widely agreed that individual tragedy models of disability are hegemonic in ‘developed’ capitalist societies (Oliver, 1996). This emphasises that schools’ staff comprises part of society (simultaneous to schools being instrumental in the reproduction of society). However, within the schools, these individual tragedy models take on particular configurations. Children can be diagnosed as ‘disabled’ through medical models of disability, which is not unique to schools (Oliver, 1993; Parr and Bulter, 1999). Within the school space, however, children can be ‘disabled’ through pseudo-medical educational–psychological diagnosis. This represents a unique set of institutional practices existing within the education institution, which contrasts children with ‘learning difficulties’ (or emotional and behavioural difficulties) to the normally developing child, situating these difficulties within the individual child (Slee, 1997).

Teachers in both schools demonstrated this pseudo-medicalisation of children, through their use of diagnostic labels, the understanding of which were essential to some teachers’ (particularly Special Educational Needs co-ordinators, or SENcos) professional identity.

The above discussion has emphasised that dominant discourses drew upon individual tragedy models of disability, which were subject to a particular interpretation due to a set of institutional practices. Although all teachers drew upon facets of the individual tragedy model of disability, many also employed components of more affirmative understandings. These representations of disability celebrated children’s capacities and accepted all kinds of difference (Morris, 1991). Interviewees within both schools demonstrated more affirmative understandings of disability (in conjunction with individual tragedy models). However in Rose Hill, actors in relatively powerful positions constructed disability affirmatively. Thus in Rose Hill the dominant discourse of disability was an affirmative reading of the individual tragedy model.

Some senior teachers in Rose Hill refused to categorise children into disabled and non-disabled binaries, and focused upon children’s individual strengths rather than their weaknesses: ‘I like to call children differentially able, I don’t like the word disabled and I don’t use it’ (Jemima, teacher, Rose Hill). Jemima had extensive experience of working with disabled children, and her affirmative understanding of disability supports the Dear et al. (1997) argument that social interaction between disabled and non-disabled people will deconstruct the artificial dichotomy of ‘disabled’ and ‘non-disabled’. Jemima was also a member of the management team, and was therefore relatively powerful in influencing within-school practice.

The most powerful within-school actor at Rose Hill, the head teacher illuminated the abilities of the disabled children:

I mean, we had a little girl who left us two years ago, and now she’s entering the Paraplegic Olympics. You see people see these things (Anthony, head teacher, Rose Hill).

It has been demonstrated that inclusion can be interpreted in a variety of ways within and between different spatial settings, and that both national policy and local practices of ‘inclusion’ frequently draw upon individual tragedy models of disability. ‘Inclusion’ policy is arguably limited by its acceptance of individual pathology models of disability, and a lack of considera-
tion of the everyday (dis)abling practices in and though school spaces. The following section considers some of the contributions that this examination of the geographies of disability and inclusion/exclusion in mainstream primary schools has made to geographies of disability and understandings of inclusion. How these contributions could be further extended through future studies of how children’s identities are constructed as abled or disabled in school spaces, is briefly discussed.

Conclusion

This section illuminates the key contributions that this paper provides within the context of geographies of disability, with particular emphasis on enablement and disablement within mainstream schools.

It has been demonstrated that practices of inclusion/exclusion differ between and within the two case-study schools, and these practices emphasise the unique interpretations of ‘inclusive’ policy in space. Despite such differences teachers in both schools draw upon caveats within national educational policy, in order to justify representations of which children are included/excluded from the school, in both physical and metaphorical terms. In discussions of inclusion/exclusion, teachers typically draw upon individual tragedy models of disability. However, these individual tragedy models take on unique configurations, as mediated through ‘special’ education discourses. This was described as the ‘educational–psychological’ model of disability that emphasises educational intervention, and is a form of pseudo-medicalisation. From this analysis it can be contended that education is institutionally ableist, being underpinned by the assumption of a ‘normally developing child’, and locating any ‘deviation’ from this norm within the individual child, rather than examining socio-spatial processes of disablement in schools.

Although many teachers cast questions of inclusion/exclusion within this educational–psychological/medical model of disability, some teachers drew upon more affirmative models of disability in conjunction with facets of the individual tragedy model. This emphasises that schools are the sites of creative social agency, wherein teachers can differentially interpret, reproduce or contest practices encouraged by the education institution, and enshrined in formal policy. However, this paper has shown that teachers are variously positioned in terms of power relations within the schools to impose their view of ‘disability’ or ‘inclusion’, and teachers representations of disability and inclusion frequently conflicted with stated school practice. This emphasises that schools are ‘precarious geographical accomplishments’ (Philo and Parr, 2000, p. 518).

Although some teachers drew upon affirmative readings of the educational–psychological and medical models of disability, all teachers located ‘disability’ within individual children, and contrasted ‘disabled’ children to the ‘normally developing child’. This reflects both the schools’ connection to the wider education institution, and to society more generally. Indeed, individual tragedy understandings of disability (within which these educational–psychological and medical models are grounded) are dominant and represented as ‘common sense’ in developed capitalist societies (Kitchin, 1998). It is, therefore, necessary to expose (and ultimately deconstruct) the normally developing child, and to disrupt the location of deviation from the ‘norm’ within the mind–body of individual children.

In the project of disrupting the location of ‘disability’ within the mind–bodies of children, it is possible to draw upon embodied social models of disability. These understandings identify disability as located simultaneously within the mind–bodies of individuals and external disabilist socio-spatial relations (Butler and Bowiby, 1997; Moss and Dyck, 1996; Parr and Butler, 1999). Within education policy, the external social and spatial sources of disablement remain under-explored by geographers and social sciences (although see Davis and Watson, 2001). Limited consideration is often given to how the socio-spatial regimes of schools and the wider educational institution can serve to disable children.

Overall, this paper has emphasised teachers’ negotiations and interpretations of inclusive policy, via a focus upon schools as the sites of social agency positioned within various socio-cultural relations in space. Future geographical accounts could usefully examine geographies within schools as institutions (Philo and Parr, 2000). This could identify how the organisation of space and mundane practices within schools, serve to categorise children as ‘disabled’ or ‘abled’ (see also Dixon, 1997; Holloway et al., 2001a, b; Shilling, 1991 in relation to gender). Such accounts could develop understandings of geographies of disability, by integrating the ‘intellectual’ (Goodley and Rapley, 2002; Hall and Kearns, 2001) along with the emotional and behavioural, to identify more fully how (dis)abled children’s identities are (re)constructed, (re)produced, contested and transformed within mainstream school spaces.

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