

Teacher Perceptions of Students' Understanding of Their Own Disability

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Teacher education programs typically provide pre-service teachers preparation in assessment and identification procedures used to identify students with learning disabilities. What may be missing from teacher preparation is the development of communication skills to thoughtfully and professionally teach children about their disabilities. This mix-method survey examines teachers' perceptions regarding students' knowledge and understanding of their learning disability; what teachers tell students about their identified learning disability; what specific activities, lessons, discussions teachers use to help students understand their disability; and how the disability affects the students' academic, social, and emotional lives. Results of the study reveal that teachers often speak in jargon and euphemism to children with disabilities. They use deflecting behaviors to pass the responsibility onto parents and the students themselves. Although teachers are aware of self-determination activities, they fail to implement them appropriately. Finally, the mix-method nature of the survey allow for more accurate descriptive results.

Keywords: *self-determination; self-advocacy; learning disabilities; mixed method*

Individuals with disabilities have minority status in this country; thus, they share the conditions of discrimination, segregation, and subordination with certain ethnic, racial, social class, and gender groups (Brantlinger, 1991). Advocacy is the key for developing self-determination and fostering basic civil rights. Typically, for young children with disabilities, advocacy responsibilities are carried out by their families, teachers, and community advocates. As children mature, they should assume an advocacy role for themselves. The role of the family and educators should evolve to include the child in educational programming so that by age 16 or younger if appropriate, students are prepared to act as their own advocates.

One component of self-advocacy is knowledge of oneself (Mithaug, Mithaug, Agran,

Martin, & Wehmeyer, 2002), but children with learning disabilities and behavior disorders are often unsure of what their disabilities are and how they affect their academic and social lives. In fact, adults with learning disabilities have reported not knowing that "what was wrong with me, had a name" (Rodis, Garrod, & Boscardin, 2001, p. 72). Children may be unsure about why they receive special education services or why they have an Individual Education Program (IEP). If children reach age 16 unknowledgeable about their disability, their ability to participate in the educational decision-making process is compromised. The premise is similar to one understanding a medical condition. If a patient knows that he or she has diabetes and understands the disease and how it affects one's life, he or she will be able

to advocate for personal needs and manage his or her lifestyle to maximize health.

Lack of skills allowing one to make independent decisions and advocate for oneself has serious lifelong repercussions for students with disabilities. The National Longitudinal Transition Study (NLTS) was developed and funded by Congress in the mid-1980s to follow postschool outcomes for students with disabilities. The first report in 1996 found that employment, wages, postsecondary education, and independence for students with disabilities lagged significantly behind their peers without disabilities (Blackorby & Wagner, 1996). The findings of Wave 2 of the NLTS were released in 2006. The results show some improvement, finding that 3 in 10 youth with disabilities have been enrolled in some type of postsecondary education with one in five enrolled at the time of the interviews. Nevertheless, this rate of enrollment is less than half (41%) that of their peers in the general population (Wagner, Newman, Cameto, Levine, & Garza (2006).

One strategy for alleviating these poor postschool outcomes is to teach students to be self-determined. According to Martin and Marshall (1995), "self-determined individuals know how to choose—they know what they want and how to get it. From an awareness of personal needs, self-determined individuals choose goals, then doggedly pursue them" (p. 147). According to self-determined learning theory, one cannot become self-determined without first understanding one's self (Mithaug et al., 2002).

Defining Self-Determination

The answer to "what is self-determination?" depends on who answers the question. Despite numerous studies on self-determination

(Deci & Ryan, 1985; Martin, Marshall, & Maxson, 1993; Nirje, 1972; Wehmeyer, 1992a), there is no agreed-upon definition. Typically, self-determination is defined by listing included components of a self-determined individual. Past findings have included components such as setting learning goals, constructing a plan, and adjusting behaviors (Mithaug, Wehmeyer, Agran, Martin, & Palmer, 1998); know yourself, value yourself, plan, act, and experience outcomes (Field & Hoffman, 1994); and self-awareness, self-advocacy, self-efficacy, decision making, independent performance, self-evaluation, and adjustment (Martin & Marshall, 1996). One widely accepted definition was proposed by Wehmeyer (1992b), in which he stated that a self-determined individual is, "acting as the primary causal agent in one's life, free to make choices and decisions about one's quality of life, free from undue influence of interference" (p. 302).

There is general agreement and substantial research demonstrating the importance of self-determination for students with disabilities. In the mid-1980s, attention turned to the need for specific preparation focused on adult life for students with disabilities. By this time, students who were in elementary school or beginning school when P.L. 94-142 (now known as the Individuals with Disabilities Education Improvement Act) was passed in 1975 were entering adulthood. In 1984, the director of the U.S. Office of Special Education and Rehabilitation Services called for educational services that were more focused on long-term outcomes that would lead to employment. Including the student with a disability in the IEP meeting was first mandated in the reauthorization of IDEA in 1997. However, after nearly two decades of instructional interventions, results from the NLTS (Blackorby & Wagner, 1996; Wagner et al., 2006) and findings by Louis

Harris and Associates in 2000 demonstrated that outcomes for students with disabilities were still more bleak than those for students without disabilities, describing adulthoods with lower rates of postsecondary education than that of peers in the general population, and without adequate employment, appropriate independent or group living options, or suitable programs and services for recreational activities.

To effectively include the student in an IEP meeting, it is important for the student with a disability to understand his or her own disability. Not understanding the characteristics of one's own disability and being asked to participate in an IEP meeting would be akin to not understanding one's own work capabilities and participating in a job interview. In addition, having knowledge of one's self is typically included in definitions of self-determination. However, previous studies have shown that many students with disabilities not only have a lack of knowledge about their disability but also may not even know they have a disability. One participant in a study by Posthill and Roffman (1991) stated that she "had lived in a world of severe confusion and had never been given an explanation of learning disabilities" (p. 627). This lack of knowledge about one's self leads to the lack of ability to self-advocate.

Role of Self-Advocacy in Self-Determination

When students with disabilities are in elementary and middle school, most decisions about their education are made by their parents (as they are for most typically developing students as well). Because a student's disability may affect his or her ability to problem-solve or analyze situations requiring decision-making skills, many times, as

students with disabilities get older, their parents continue to make decisions for them. Students with disabilities may develop a passivity, allowing others to make far too many decisions and choices for them (Abernathy & Obenchain, 2003). This characteristic, known as "learned helplessness" (Seligman, 1975) continues into adulthood, affecting the person's ability to lead a productive, independent life. Zetlin and Hosseini (1989) found that young adults with learned helplessness had difficulty in adulthood and held unrealistic expectations of their own abilities.

As students progress and leave the K-12 education system and move into higher education or employment, it is critical for them to be able to self-advocate. While students were in elementary and middle schools, parents were the primary decision makers and parents and educators typically led the development of educational plans. Once students reach the age of 18, they become the primary decision maker. In higher education, there are services and accommodations available for students with disabilities, but they must approach the institution and request the services. The student must be able to speak to faculty members about the accommodations he or she may need to succeed in class. In the workplace, young adults must have a clear understanding of their abilities and their weaknesses to better determine what jobs may be appropriate for them and what modifications to the job duties may be needed. The Americans with Disabilities Act protects persons with disabilities in both higher education and job settings, but again, it is the individual's responsibility to approach the institution with needs or concerns.

Importance of Self-Advocacy

Being able to self-advocate may be especially important for students with mild

disabilities, such as learning disabilities or emotional disorders. These so-called hidden disabilities are not readily noticeable or visible, and many times, the only way others are aware of the disability is if the student self-discloses. This becomes critical in postsecondary settings.

Several studies have specifically shown the importance of college students understanding their disabilities so they can better ask for help from a professor when experiencing difficulty or suggest strategies for how they most effectively learn (Byron, 1990; Goldhammer, 1990). Services are available that could greatly support students with mild disabilities (such as note takers or extended time on exams), but students must self-disclose their disability, first to a student support department, then to individual faculty members. Students must be able to "own" their disability and understand that this is to their advantage in the higher education setting (Brinckeroff, McGuire, & Shaw, 1992). Unfortunately, many students do not sufficiently understand the nature of their specific disability or the benefit appropriate services may provide, and they choose to hide their disability to avoid labels and possible stigma associated with special education that they encountered in K-12 settings (deFur, Getzel, & Trossi, 1996).

The importance of understanding one's disability is not only apparent in educational settings. Dalke (1993) found that disability self-awareness was a characteristic of students who not only succeeded in college but also made good employees. Other researchers have found that successful adults with learning disabilities gained control in their lives by reframing situations in which they accepted and understood the characteristics of their particular disability and used that knowledge to overcome possible obstacles. They also were able to use this self-knowledge to develop goals that were

both appropriate and obtainable (Gerber, Ginsberg, & Reiff, 1992).

How Self-Advocacy is Currently Taught

In higher education, some programs have been designed specifically to teach students with disabilities about their disability (Allard, 1987; Roffman, Herzog, & Wershba-Gershon, 1994; Yuan, 1994). There have been limited programs in high school settings (Durlak, Rose, & Bursuck, 1994; Eisenman & Chamberlain, 2001; Phillips, 1990; Sachs, 1987) and even in elementary settings (Jones, 2006; Pearl, 2004). Jones (2006) found that when a group of teachers decided to begin teaching students about their disabilities at the elementary school level, the teachers were initially surprised to find how little students actually knew about their own disabilities and how many students used terms such as *dumb*, *stupid*, and *lazy* to describe their academic abilities. After learning about his disability, one elementary student said, "I always knew I was different, but I never knew exactly how I was different. It's good to know how and to know that it's not bad to be different from the other kids in my class, because before I thought it made me stupid" (p. 16).

Durlak et al. (1994) designed a study in which direct instruction was used with high school students with learning disabilities to teach them about the nature of their disabilities and how to self-advocate in a postsecondary setting. Students were required to demonstrate the ability to verbally state the nature of their learning disability and request the types of accommodations they required to succeed. The researchers discovered that all of the students had great difficulty telling a teacher about their disability, even after repeated instruction and role play. Two of the eight students were never able to accomplish this task, and the authors noted that both students

had been receiving special education services since early elementary school and their parents had always advocated for them, rather than the students learning at an early age to advocate for themselves. Another study found similar results, in that high school students were very reluctant to discuss their disability, and the authors stated that this reluctance was compounded by the fact that teachers were reluctant to talk to students about their educational needs for fear of making the students feel uncomfortable (Eisenman & Chamberlain, 2001).

In 2000, Wehmeyer, Agran, and Hughes published a key study addressing teachers' opinions regarding the value of self-determination and the actual methods they used to address self-determination with their students. This nationwide study followed earlier statewide studies by Agran, Snow, and Swaner (1999) and Hughes et al. (1997). In all three studies, teachers stated that self-determination and self-advocacy were important skills for students, but they could report very few activities they actually did with students to promote these skills. Wehmeyer et al. found that although 60% of teachers responding were generally familiar with the construct of self-determination and the component parts (including self-advocacy), only 22% of the teachers responded that all of their students had some type of self-determination goals on their IEP. Thirty-one percent of respondents stated that none of their students had any such goals. The authors summarized that although teachers are aware of the concepts of self-determination and self-advocacy and may be able to identify some key practices, this knowledge may not actually be translated into actual instructional practice.

Additional studies have supported this lack of connection between knowledge and practice (Chambers et al., 2007; Grigal, Neubert, Moon, & Graham, 2003). Teacher training (both pre-service and in-service) has

been identified as a critical component in all studies. Researchers have found that when asked where they received information about self-determination, only 12% of teachers identified their undergraduate education as a source and 13% identified education textbooks as a source (Wehmeyer et al., 2000). To effectively teach their students with disabilities self-advocacy skills, special education teachers must first learn methods for doing so. A limited body of research exists on how special education teachers teach their students self-advocacy skills and how or where they learned these methods (Chambers et al., 2007; Nevin, Malian, & Williams, 2002; Thoma, Baker, & Saddler, 2002; Thoma, Nathanson, Baker, & Tamura, 2002). Even in these studies, self-advocacy is viewed only through the larger lens of teaching students how to become self-determined individuals. When ranking instructional domains in self-determination, one study found that 64.4% of teachers felt self-awareness was very important and only 59.3% felt that self-advocacy was very important, whereas 73.6% felt both decision making and problem solving were very important (Wehmeyer et al., 2000).

Knowledge and ability to teach students the body of skills considered to comprise a self-determined individual is a crucial component of the job of any special education teacher. In this study, however, the researchers posit that the first step to teaching self-determination skills should be teaching the student about his or her own disability. Therefore, this study was developed to determine answers to the following three questions: (a) What are teachers' perceptions regarding students' knowledge and understanding of their learning disability? (b) What do teachers tell students about their identified learning disability? (c) What do teachers do (specific activities, lessons, discussions) to help students understand their disability and how the disability affects their academic, social, and emotional lives?

Method

This study was initiated using a presurvey focus group ($n = 5$). Data from the focus group were later used to construct the First Step Survey. Five special education teachers were invited to participate in the focus group. Their experience ranged from 2 to 7 years, and three were intermediate elementary grade special education teachers and two were middle or junior high school teachers. These teachers taught at the same level as the teachers we expected to survey later.

The focus group began with introductions that included a description of the teachers' current teaching assignment and the students on their caseload. The moderator followed the guide proposed by Vaughn, Schumm, and Sinagub (1996). Two guiding questions were used during the focus group. The second question was posed after the participants agreed that they had nothing left to contribute on the first question. Teachers were asked the following: (a) How do you inform students of a newly identified disability? and (b) What do you do during the school year to help students learn about and understand their disability? The focus group was recorded and later deleted after the First Step survey was constructed. The focus group lasted approximately 90 minutes.

The First Step Survey was constructed based on the focus group data. Participants' responses to Question 2 ("What do you do during the school year to help students learn about and understand their disability?") were particularly important to the instrument's construction. Focus group participants were contacted after survey construction to act as field testers and to edit the items on the First Step Survey.

Instrument: First Step Survey

The opening section of the First Step Survey was composed of 12 closed items with a 10-point response scale (1= *never* and

10= *often*). Two of the 12 items had multiple sections. Item 3 asked four subquestions and Item 5 asked five subquestions (see Table 1 for items). The second section of the instrument opened with a vignette, followed by two open-ended items asking for a narrative response. No demographic items were asked per stipulations from the university Institutional Review Board (IRB) and the school district IRB. The following is the vignette used in the survey and the open-ended questions suggested by the focus group:

Jalen has recently transferred into your classroom/school and he has been struggling academically and socially. Jalen was referred for special education assessment and the eligibility team as determined that he has a severe learning disability. Jalen's major areas of weakness include reading fluency, comprehension, and written communication. His math skills are developmentally appropriate and he is thriving in hands-on science instruction.

1. Based on your professional experience, what would you say to Jalen to inform him that he has a learning disability?
2. Describe any specific activities, lessons, or discussions you would use with Jalen to help him understand his disability and how it affects his life (socially, academically, and/or emotionally).

Data Source

A mailing list of special education teachers in the second largest school district in the state was obtained from the state department of education. Using a set of randomly generated numbers, a graduate assistant selected 100 teachers from list. Only the graduate student knew who was selected, and once the surveys were mailed out, the master list of teachers selected for mailing was destroyed. This procedure was mandated by the local education agency IRB and did not allow for any follow-up mailings.

Table 1
First Step Survey Items with Means and Standard Deviations

1st Step Survey Items	<i>M</i>	<i>SD</i>
1. To prepare students for transition from school to the workplace, I focus on functional activities that address real-life situations.	7.03	2.28
2. When planning activities, I consider the preferences and/or interests of the student(s).	8.18	1.49
3. I encourage the student(s) to take part in the IEP or ITP (Individual Transition Plan) process through:		
participation in the meeting	8.96	2.09
voicing their preferences	8.65	2.02
sharing their goals for the future	9.21	1.61
facilitating the meeting	4.55	2.83
4. I plan activities that require the student(s) to have input and control over their lives.	7.58	1.91
5. I plan activities that help students acquire a range of self-determination skills including:		
the use of prior experience to make decisions	7.86	1.76
setting goals	7.82	1.77
self-assessment	7.03	2.17
self-advocacy	7.75	1.59
self-management	7.82	1.71
6. As students learn new content, I facilitate generalization of what they have learned.	7.78	1.87
7. I encourage students to make choices and to respond to the choices that they make.	8.58	1.50
8. I use work-related and employment-related activities as part of my everyday curriculum.	6.03	3.12
9. I constantly encourage the student(s) to re-evaluate their vision of their future and what they need to do to reach their future goals.	6.72	2.59
10. The academically strongest 5th- to 12th-grade student can describe his or her learning disability.	7.24	2.26
11. The average (modal) 5th- to 12th-grade student can describe his or her learning disability.	5.67	2.21
12. The academically weakest 5th- to 12th-grade student can describe his or her learning disability.	3.06	2.34

Every teacher mailed a survey held a valid special education teaching license. No one was included on the mailing list from the state department of education who was teaching on a provisional license or who was in the process of obtaining a special education license while teaching in the classroom. Surveys were sent to 70 intermediate level elementary teachers and 30 middle school special educators. As indicated, no follow-up mailings were sent. The return rate was 30% ($n = 30$).

Results

Closed Item Results

Descriptive data in the opening section of the survey revealed that teachers typically

engage their students in activities related to improving self-determination and self-advocacy. For educators of such young students (intermediate grades 4 to 6 and middle school grades 7 to 8), these teachers report taking action rather than waiting for students to get older before self-determination skills are encouraged. The highest rated items on the closed item portion of the survey were related to student participation in IEP meetings. Item 3 was a multiple response item asking teachers how they encourage students to participate in the IEP meeting. The highest rated response in Item 3 ($M = 9.21$, $SD = 1.61$) indicated that teachers encourage students to share their goals for the future, followed closely by student participation in the meeting ($M = 8.96$, $SD = 2.09$), and including student preferences

Table 2
Descriptive Results for Item 3 (Individualized Education Program [IEP] participation) by Student Knowledge of His or Her Disability

Teacher Report Items 10-12	Sample Size (<i>n</i>)	Participation in IEP Meeting		Voicing Their Preferences ^a		Sharing Their Future Goals		Facilitating the IEP Meeting ^b	
		<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Caseload has limited knowledge ($M \leq 5.0$)	17	8.31	2.60	7.93	2.43	8.81	2.00	3.50	2.28
Caseload has more detailed knowledge ($M > 5.0$)	13	9.69	0.85	9.54	0.77	9.69	0.75	5.84	2.97

a. Indicates a significant difference between groups ($U = 55.5, p < .05$).

b. Indicates a significant difference between groups ($U = 59.0, p < .05$).

($M = 8.65, SD = 2.02$). Facilitating the IEP meeting was the lowest rated response on the survey but also the response with most variance among the respondents ($M = 4.55, SD = 2.83$).

Teachers were asked to consider the strongest student on their caseload, the modal student on their caseload, and the academically weakest student on their caseload. Teachers were asked to rate how much the student knows and understands about his or her learning disability. With 10.0 representing "can describe the learning disability in detail," teachers rated academically strong students as $M = 7.34$ ($SD = 2.26$). The modal student was rated as $M = 5.557$ ($SD = 2.21$) and the weakest student as $M = 3.06$ ($SD = 2.34$) with 1.0 representing "cannot describe the learning disability." Table 1 lists each item and the descriptive results.

A stratifying variable was created using the three items identifying student knowledge of their disability. The sample was divided into groups: (a) Caseload has limited knowledge of their disability, $M \leq 5.0$ ($n = 17$); and (b) caseload has more detailed knowledge of their disability, $M > 5.0$ ($n = 13$). Student participation in the IEP meeting was

examined by these two stratifying variables (see Table 2 for descriptive results.) Teachers reported having their students with more detailed knowledge actively participate in the IEP process (range: $M = 9.69$ to 9.54) but limited the facilitation of the IEP meeting ($M = 5.84, SD = 2.97$). Students with limited knowledge of their disability also participated actively in the IEP process (range: $M = 8.81$ to 7.39), but few teachers indicated students were facilitating the IEP meeting ($M = 3.50, SD = 2.28$). A Mann-Whitney *U* Test, a non-parametric procedure considered appropriate for small samples, was used to test for differences in IEP participation between students with limited knowledge of their disability ($n = 17$) and students with detailed knowledge of their disability ($n = 13$). The Mann-Whitney *U* Test revealed significant differences between these two groups on "voicing their preferences" ($U = 55.5, p < .05$) and "facilitating the meeting" ($U = 59, p < .05$). In both instances, teachers reported students with more detailed knowledge of their disabilities participating more in the IEP process, thus leaving less knowledgeable students fewer opportunities to voice their preferences or facilitate meetings.

The highest rated item aside from the IEP items was related to student preferences. Specifically, when planning activities, teachers consider the preferences and/or interests of the student(s) ($M = 8.18$, $SD = 1.49$). This is a highly student-centered approach for students with learning disabilities given the rigidity of curriculum standards and achievement expectations. Although student interest and preference is considered important in transition planning for intermediate and middle school age students, this may be either an inflated self-report measure or a luxurious anomaly in this sample.

Open Item Results

Next, researchers reviewed the open-ended questions relating to the vignette about Jalen. The questions focused on two key issues: (a) what teachers tell students about disability and (b) what activities teachers use to teach about disability. Responses were first analyzed line by line. After the initial coding, "in vivo" codes were identified. These were subcoded as "talk" versus "action."

All responses were then coded line by line. From this coding process, three main themes emerged: (a) transition best practices (as identified in literature), which included discussion of disability, planning, futures, daily living; (b) euphemisms, which included learning styles, learning differences, learning difficulty, strengths, weakness, feelings; and (c) jargon, which included placement terms, formal reading curricula, learning theories, and accommodations. There were a total of 180 coded entries. Of these, 85 (47%) were from Question 1 and 95 (53%) were from Question 2. Entries were then divided into the talk or action categories. Of the 180 entries, 141 (78%) were talk, with only 30 (17%) coded as action. There were 9 (5%) nonresponses. Understandably, all of the responses for Question 1 (what teachers say)

were coded as talk entries; however, in looking at Question 2 (what teachers do), the entries were predominantly coded talk (63%) whereas only 32% were coded action. Finally, entries were divided into the three main themes. The majority of entries were categorized as euphemisms (58%), with best practices (19%) and jargon (11%) occurring less often.

Combining Open and Closed Responses

Finally, the researchers wanted to determine if there was any relationship with the teachers' identification of their students' knowledge of disability (closed item) and what teachers said or did to teach their students about their disability (open item). Using the two stratifying variables identified earlier (i.e., students have limited knowledge of the disability, students have more knowledge of the disability), the coded entries were then grouped by question and by the three main themes. A breakdown of these results can be seen in Table 3. A review of the responses for Question 1 ("How do you inform students of a newly identified disability?") indicated no difference between how teachers informed limited knowledge students and those who have more knowledge of their disability ($X^2_{(2)} = .14$, $p > .05$). The number of responses rated as "best practice" was low for both groups. Teachers in this study relied on euphemisms as a strategy to inform students of their learning disability.

Question 2 ("What do you do during the school year to help students learn about and understand their disability?") revealed a significant relationship in how teachers interacted with students who had more knowledge of their disability compared to peers with less knowledge of their disability ($X^2_{(2)} = 9.08$, $p < .05$). Teachers who believed that their students had more knowledge of

Table 3
Responses to Open-Ended Questions by Stratifying Variable and Theme

	Best Practices		Euphemisms		Jargon	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Question 1						
Caseload has limited knowledge	4	11	40	40	3	15
Caseload has more detailed knowledge	2	6	28	28	2	10
Question 2						
Caseload has limited knowledge	7	20	20	20	7	35
Caseload has more detailed knowledge	22	63	12	12	8	40

Note: limited knowledge ($n = 17$), detailed knowledge ($n = 13$); Question 1: $X^2_{(2)} = .14, p > .05$ (nonsignificant); Question 2: $X^2_{(2)} = 9.08, p < .01$.

their disabilities were the ones more likely to engage in talk and action that reflected best practices in self-determination education (with 63% of the responses for both questions categorized as best practices), whereas teachers who believed that their students had less knowledge of their disability were the ones more likely to engage in talk and practice that was weighted with use of euphemisms (with 60% of the responses for both questions categorized as euphemisms). Responses demonstrating the use of jargon were split equally between the two groups of teachers.

A clearer view of the differences among themes and responses by teacher grouping can be obtained through samples of the responses to the qualitative questions. For example, in the theme of best practices, a teacher in the limited knowledge of disability group stated, "I would be honest and tell him he has a learning disability. This does not mean he cannot learn. His learning will require more determination and time than others, but it can be done," while a teacher in the more knowledge of disability group stated, "I would discuss with Jalen the idea that his disability was like my needing glasses or a diabetic needing insulin." Within the category of euphemisms, clear examples of the typical statements from both groups were statements

such as, "Always base things on 'you can do it' and 'we all have strengths and weaknesses,'" "I would tell Jalen that everyone is 'wired' differently and we are all unique," and "It is not your fault and you are very bright; you just learn differently in some areas than other students." Finally, within the theme of jargon, teachers in both groups were likely to use terms for placements or curriculum models as either topics of discussion or actions they would follow, with comments such as, "At our school, push-in is the main model, so I would ask if he wanted accommodations," and "Some curriculum ideas might include: Resource English, Reading, and/or Directed Studies," or a combination of euphemisms and jargon, such as, "By discussing the theory of multiple intelligences (Gardner), you can show students that they aren't flawed, so to speak, just stronger in different areas." Examples of how the individual items within the descriptive survey matched with individual codes and the final three themes can be seen in Table 4.

However, the comments that were most telling were the ones that could be viewed as most troubling. These comments came from teachers in the "less knowledge of disability" category, and responses of what they would say or do with the hypothetical student included statements such as, "I've never had

Table 4
Examples of Individual Items With Supporting Narrative Comments

Best Practices	<i>M</i>	<i>SD</i>
Functional skills		
Closed-ended responses		
1. To prepare students for transition from school to the workplace, I focus on functional activities that address real-life situations.	7.03	2.28
8. I use work-related and employment-related activities as part of my everyday curriculum.	6.03	3.12
Open-ended responses: Talk-daily living; Action-daily living		
"You need to be able to read and comprehend . . . in order to be a contributing member of society."		
"I would give him a job application and have him fill it out."		
"I would give him a driving test to read and take."		
"I would maybe show him a sample of a workplace memo or the classifieds or a driver educator manual."		
Futures and planning		
Closed-ended responses		
3. I encourage the student(s) to take part in the IEP or ITP process through:		
participation in the meeting	8.96	2.09
voicing their preferences	8.65	2.02
sharing their goals for the future	9.21	1.61
facilitating the meeting.	4.55	2.83
Open-ended: Talk-futures; Action-planning		
"He needs to know that whatever career he chooses in life will involve reading and some writing."		
"I'd tell him I'm getting him ready for school, college, and career choices. Younger kids don't think about those things, but I try to connect it to life after school."		
"Tell him the better he reads . . . the more money he will make."		
"I would insist that Jalen be at every IEP in order to help the team discuss accommodations based on how he learns best."		
Self-knowledge		
Closed-ended responses		
10. The academically strongest 5th-grade to 12th-grade student can describe his or her learning disability.	7.24	2.26
11. The average (modal) 5th-grade to 12th-grade student can describe his or her learning disability.	5.67	2.21
12. The academically weakest 5th-grade to 12th-grade student can describe his or her learning disability.	3.06	2.34
Open-ended responses (Talk-Disability)		
"I would then lay out a plan on how we can work on his disability through his strengths."		
"After a rapport has been established, then I could begin discussing his learning disability."		
"I would explain reading fluency, comprehension, and written communication in the simplest terms possible so he can grasp the concept of his disability."		

the 'pleasure' of informing a student like Jalen that he has a learning disability," "Please talk to your parents!" ". . . I would assume he knows he has difficulty reading

and writing," "We (he and I or other special education teachers) will work to fix this problem," and finally, "Kill a month and learn about the student."

Conclusion

The results of this descriptive study highlight a significant need in teacher education. Teachers appear to be either unskilled or unwilling to discuss with students the nature and manifestation of their learning disability. Teacher education programs focus appropriately on identification of students with learning disabilities and include assessment and testing as a key part of their programs. Furthermore, most programs include ability and disability awareness activities and coursework in working with families of children with disabilities. Traditional coursework seems to surround helping others identify and understand a child's disability, but less attention is focused on developing pre-service teacher skills in communicating to students about an identified disability and developing a student specific plan for teaching the child about the identified disability (Wehmeyer et al., 2000). As the results of this project indicate, despite the high mean scores on the closed items and teachers' self-described emphasis on self-determination skills and issues, they avoid authentic discussions with students about their disabilities.

Rather than use accurate terminology and "straight talk" about disability, teachers often rely on the use of euphemisms and jargon to talk to students identified with a learning disability. Particularly troublesome about the use of this type of language is the mismatch between the child's cognitive struggles and a teacher's knowledge of disability. For example, students with learning disabilities are often described as struggling with abstractions, metaphor, generalizations and vocabulary (Gerber, 1993; Wiig & Secord, 1994; Wong, 1994). Teachers who have had coursework and preparation in the characteristics of students with learning disabilities appear to ignore these characteristics and opt to use language where a disability may impair a

student's comprehension. It may be that teachers lack skills in describing learning disabilities and may use abstract language as a compensatory habit. In essence, we know that the students do not understand figurative language, but we use it anyway.

One example of educators' intolerance for euphemisms and figurative language is in sex, health, and drug education. Educators who work in these fields use technically correct language at developmentally appropriate levels for students (Shore, 2002). During instruction, these highly trained educators are not embarrassed to talk to students, teach students, and answer questions. These educators consider it their responsibility to provide accurate information to students and they pride themselves on being trustworthy sources. Their teacher preparation has settled them into a professional comfort zone (Lang, Erikson, & Jones, 2001; Wight & Buston 2003). We use technically correct language to teach students about their bodies; perhaps we should consider using technically correct language to teach students about their learning.

Some of the teachers' statements regarding what they tell students about their disabilities were deflection. That is, they passed the responsibility onto another party. In some instances, teachers assumed that the student already knew they had academic problems, making the understanding of the disability the student's responsibility. Another teacher rather disparagingly wrote, "Please talk to your parents." The referral and identification process has often been described as a situation in which the professionals have all of the power and can use their expertise to include families appropriately or inappropriately. Regardless of how professionals manage the process, they are the ones skilled in the process and in the identification of students with learning disabilities. To suddenly shift the responsibility of helping students begin

to understand the nature and manifestation of their disability to the parents or the students is giving the novice a responsibility they are ill prepared for. Research has shown that due to the overreliance on jargon in special education meetings, many parents are unsure of the true nature of their own child's disability (Fish, 2006; Harry, Allen, & McLaughlin, 1995). It begs an uncomfortable question. Are we preparing teachers who manage the referral and identification process to suit their own needs or the needs of the child and the family?

The results from the closed item portion of the study revealed a group of educators who appear to understand what it means to teach students self-determination. Although they seem to understand the constructs as evidenced by the closed-ended items, they may not actually put these principles into practice in the classroom as the second open item revealed. For example, teachers reported encouraging students to take part in their IEP meeting through sharing their goals for the future ($M = 9.21$). Yet none of the open-ended responses mentioned activities to support goal setting. Furthermore, teachers were prompted in their open-ended responses because they completed the closed items first. Throughout the data set, teacher behaviors were not affected by their knowledge of self-determination or the prompting of previous items in the survey. The only open-ended response that offered any support for the closed response was related to employment activities. Nonetheless, the responses to give the student (Jalen who is in fifth grade) job applications, a driving test, and a loan application are inappropriate. In essence, teachers report teaching self-determination often in their classrooms, but the open-ended item does not support their responses, calling into question the reliability of the closed-ended items.

Limitations

Upon reflection, this project has drawbacks to consider. First, and not meaning to be disrespectful of the IRB process, were the limitations placed on the project by the university and LEA (Local Education Agency) Human Subjects Committees. The sample size in this project is small and no attempts were made at second mailings or follow-up contacts. All questions related to demographics were disallowed during the IRB process. Teachers could not indicate how long they had been teaching, whether they were consulting or pull-out teachers, or the number of students on their caseload. No items asking for caseload descriptors, school demographics, student demographics, or teacher demographics could also be included as limitations; this constraint limited analyses. The IRB constraint poses an interesting challenge for researchers and may create design and analysis challenges for some researchers that may not be a challenge for researchers in other institutions. Second, the project relied on teacher self-report; socially appropriate responses are part of any self-report measure. That said, even the prompting of the closed items did not appear to have influenced the open-ended items, which validated the use of a mixed-method instrument.

Final Thoughts

Research on self-determination and teacher preparation has focused on assessing the knowledge of pre-service or novice teachers regarding different self-determination programs (e.g., Personal Futures Planning, MAPS, ChoiceMaker). Each of these programs carefully structures student learning experiences and leaves little planning in the hands of teachers. Teachers guide students through the prescribed materials. This prescriptive process is a step in the right direction and

provides structure and comfort for teachers, much like curricula used in sex and health education (Lang et al., 2001). As Eisenman and Chamberlain (2001) point out, reluctant and uncomfortable teachers produced reluctant students who were unable to communicate about their disability.

As successful and promising these materials are in their structure, none emphasize knowledge of one's disability as a prerequisite to participation in the self-determination process. Ignoring how one's disability manifests itself in learning and social situations is comparable to ignoring the 2-ton elephant in the room that everyone knows is there but no one talks about. How can authentic self-determination and future planning occur if honesty about a student's disability is not part of the process? Pre-service and in-service teachers need communication skills that allow them to comfortably talk to students about the nature of their disability, defining characteristics of the disability and how it affects their lives. As Eisenman and Chamberlain (2001) suggest, if we do not find a comfort zone and move past our reluctance to teach students about themselves, they may always be disadvantaged.

Teacher education can affect the communication skills and knowledge that pre-service teachers have about students with learning disabilities. Prescriptive curricula may be one suggestion, and including facilitated communication skills in existing coursework may be another strategy. By considering the instructional time span of children with disabilities as a guide, we can begin to consider probable intervention points in teacher education programs. The time span has four distinct intervention points for talking with students about their disabilities: (a) when a student is struggling but has not been identified as having a learning disability, (b) when a student is initially identified as having a disability, (c) each time instructional

modifications and adaptations are made, and (d) transition planning.

By aligning teacher education coursework with these four intervention points, opportunities to teach appropriate communication skills emerge. For example, in a characteristics course in learning disabilities, pre-service teachers can demonstrate proficiency through case studies and describe a child's identified learning disability to the child and the parents as part of a class assignment. Assignments giving pre-service teachers practice in communicating with students about their learning disability could be incorporated in assessment, instructional methods, and transition courses.

Reconsidering teacher education programs and how we teach characteristics of disabilities, case management, self-determination, and transition topics to pre-service teachers is a worthy discussion whose time has come. University faculty members are just as culpable in this situation as the teachers who "pass the buck" to parents to help a child understand his or her disability. Pre-service teacher instruction that ignores learning to communicate authentically with students and families about learning disabilities and behavior disorders is a participant in a dangerous game of lying by omission. As a society, we are direct in communications about a person's illness and its impact on their quality of life. We are honest with doctoral students about the challenges that doctoral study will have on resources and families. Why are we afraid to talk honestly to students about their disability?

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