The Debate and Surrounding Labelling Practices with Special and Inclusive Education with the Politics of Difference

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Abstract

Labels have a strong effect of regulating disparity in education. Therefore, many recent articles have been discussed the concept of labeling and whether the use of labeling in special and inclusive education have potential for equality or affect the quality of education for students with special needs. This paper addresses the role of labelling in special and inclusive education. To address the issue, the paper provides an overview of Goffman’s theory on social stigma as it relates it to labelling practices and reviews the literature on labelling. The final section of the paper presents a snapshot of labelling within the Saudi Arabian education system.
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The debate and surrounding labelling practices with special and inclusive education

The labelling practices in the education system have a strong impact on the classification of students. Therefore, it is crucial to discuss the implications of these practices and how they affect the implementation of special education programs. This paper explores the impact of labelling practices on the integration of students with special needs in regular classrooms. It highlights the need for a more inclusive approach to education that respects the rights of all students, regardless of their abilities.

The paper also discusses the role of parents and policymakers in shaping the educational landscape and ensuring that students with special needs have access to quality education. It calls for a shift towards a more collaborative and participatory approach to education that values the diversity of all learners.

In conclusion, the paper argues that a more inclusive approach to education is necessary to address the challenges faced by students with special needs. It calls for a global commitment to ensuring that all students have access to quality education and that their rights are respected and protected.
Introduction

Among the many vital functions of the modern teacher is recognizing and meeting the needs of all students. This should be inclusive of children with special-education needs. An ongoing debate regarding special-education needs focuses on the effect of labelling on children considered to be exceptional and having a variety of learning disabilities (Green, 2003). Within special education, labelling is viewed in two quite different contexts. The first is the view that labelling contributes to improving education; the other is that labelling is likely to impact negatively on education. An argument against labelling in education claims that giving pupils labels makes them seem like social misfits (Burden & Burdett, 2007). In addition, this has led to society judging how students behave and perform and, consequently, being labeled based on the tag attached to that person. This paper addresses the role of labelling in special and inclusive education.

Issue of Study

Disability often comes with the triangle of poverty, disease and isolation. The child is handicapped or suffers from disability during development. The child is committed to the house, deprived of normal life, and the reasons for isolation are numerous. The family is poor and the disability is an additional burden that can not be solved. Everyone fears social stigma, especially in cases of mental disability, Our Arab world considers it a source of shame and disgrace. The disabled person is because of his semi-permanent isolation and is trapped between four walls that cause more disease, which increases the size of the problem.
Aims of Study

1- Overview of Goffman’s theory on social stigma as it relates it to labelling practices and reviews the literature on labelling.

2- Presents a snapshot of labelling within the Saudi Arabian education system.

literature review

1- Goffman’s theory of Stigma and Stigmatization

The word stigma dates back to the Greeks, who had the tendency of cutting or burning marks on the skin of those who went against norms so as to identify and avoid them (Goffman, 1963). However, stigma currently is generally attributed to social disapproval that breeds spoiled identities, according to Goffman. Most definitions of stigma acknowledge two major components: difference and devaluation. They also emphasize the fact that stigma results from social interactions. In that regard, stigma does not reside within an individual; rather, it is within society. Stigmatizing in a particular social setting may not be regarded as stigmatizing in another social setting.

According to Goffman’s theory, there are two types of stigma: hidden stigma and public stigma. Public stigma is associated with disabilities, diseases, and obesity. The individual cannot hide from public stigma, while hidden stigma is caused by past criminal records and intellectual disability. Individuals can hide past stigmatizing events from the public; however, hidden stigmas affect individuals differently than those that are visible to the public. Stigma has been in existence since time immemorial; the slaves were stigmatized by their societal status.
Goffman (1963) contends that stigma only affects the experiences of those who own the characteristics. Besides, there is a likelihood that its effect spreads among close relatives and close associates of the bearer. The fact that Goffman addresses in his literature the impact of stigma on individuals closely related to the bearer suggests that, even in the case of individuals with disabilities, their family members are likely to feel emotional distress and social isolation.

Goffman explains that stigma results from devaluation that disqualifies individuals from complete social acceptance. In his research, he focused on issues resulting from stigmatization among individuals and groups. He also focuses on coping mechanisms used in every situation. Stigma takes different forms. It may be a result of physical deformity, historical details, and social contexts like disreputable associates. Stigma seems to be inherent in theories of non-conformity. It is about the application of labels to describe individuals perceived as non-conformist or simply exhibiting different behavior (Goffman, 1999; Bos, 2013).

Stigma is associated with moral behaviors in society. Stereotypes contribute to certain behaviors in society. Stigma causes depression among various labeled groups. The labeled group feels rejection and, thus, develops low self-esteem. The individuals with low esteem tend to perform unproductively in the community. The labeled group experiences discrimination based on their conditions, thus experiencing stigma over time. For example, obesity is stigmatized in the US. In the workplace, obese individuals are discriminated against regarding advancement. Society has stereotyped the obese as lazy and unable to perform efficiently. The stereotype has been adopted by most organizations (Goffman, 1999).
The extent of Goffman’s (1963) definition of stigma depends on its applicability as a prototypic blueprint when analyzing stigmatized illness conditions. Stigmatization is, therefore, common in the education context. It can be evidenced among students with intellectual disability or physical deformities. Stigmatization, which is likely to hinder future progress, arises from students’ perceived academic performance (Kusow, 2004). Common to the process involved in stigmatization is the aspect of social control. Labelling students can be regarded as one of the institutions’ ways of controlling their academic progress. Sometimes, labels end up not being removed, making these students never fully socially accepted. Within academic institutions themselves, stigma plays a major role in influencing teachers’ attitudes toward students. Simply knowing that a student is academically challenged can breed a patronizing attitude among teachers. According to Goffman’s theory, this is undoubtedly the effect of bureaucratic institutions that seek to streamline the delivery of education.

There is an assumption that labelling results in stigmatization, based on the arguments and findings of Goffman (1963). He further considers stigma to be a social process responsible for separating people by their differences. The types of differences most often leading to stigmatization are physiological, social, or behavioral. Yang, et al. (2007), Smith (2011), and Green (2003) further define stigma as related to negative stereotypes that facilitate prejudice. Stigmatization and labelling only discriminate and oppress the bearers when they trigger a negative social reaction. On the other hand, stigma affects self-concept when the bearers accept and internalize societal beliefs about behavioral norms, while at the same time acknowledging that they themselves do not fit in (Goffman, 1963).
2- Argumentation on Labelling Practices within Special and Inclusive Education

Labelling is the action of describing an individual based on select behavioural and physical characteristics. In society, an assigned label places an individual into a specific group possessing similar characteristics (Gold & Richards, 2012, p. 144). Labelling is also a theory in sociology that describes labelling of people as control and identification of deflector behaviour (Gold & Richards, 2012). For example, labelling is used to describe an individual who has broken a law as a criminal.

There are at least two elements that stand out in the definition of labelling. The first is the function of society when it creates tags denoting particular traits; society comes up with names with the expectation that individuals will behave as described. It is, therefore, possible to conclude that labels are societal constructions. Second, the definition seeks to incorporate the significant role of norms in assessing and determining behaviour. Norms require conformity; failing to conform contributes to labelling, which is about describing someone in a word. Third, in special and inclusive education, researchers have arguments about both negative and positive implications of labelling when it affects educational quality (Gold & Richards, 2012).

Boyle (2014) spoke about the benefits of labelling in schools. According to the author, labelling is necessary because it associates the person with his or her capabilities. Labelling assists personal interactions among social beings and, in special education, labelling assists tutors in providing extra support to students who require more attention. Also, labelling for special education is important for providing services and special education that are appropriate to student needs and abilities. Individualized curricula are an example of this.
Labels can always be considered useful when they lead to appropriate interventions for facilitating learning. Some labels are important in assisting the teaching process as well as in planning for the needs of the labeled children (Green, 2003). Barton and Tomlinson (2012) analyze the importance of labelling students with disabilities in various learning institutions. Labelling is key in assisting students with special needs in public schools. Professional tutors can attend to special groups of students through special programs. Labelling has a social function of creating cohesiveness among group members. Through the grouping, an individual can acquire diverse knowledge from the other group members.

Although some authors argue that labels may be helpful, other authors still maintain that individualized programs adapted to each individual’s weaknesses are preferred. This would, therefore, meet each child’s needs more substantively and comprehensively. In short, given that labels are indicative of problems faced by the children, there is no guarantee that they may lead to the best solutions; that is, labels do not provide details on how to solve them.

**Negative implications of labels**

Students who are identified as having academic problems are likely to meet eligibility criteria for placement in special education services. In other words, they may be unofficially labelled as learners who are slow, lazy, unmotivated, or exhibiting behaviour problems (Bernberg, Krohn, & Rivera, 2006). There are different arguments about the negative effects of labelling in special and inclusive education.

Taylor (2006) research on special education provides numerous arguments concerning children’s self-perception, self-esteem, and their
relationships with their peers. points out that, regardless of whether they are experiencing learning disabilities, individuals will inherently consider themselves in the same way others view them. He reports that children enrolled in special education felt that they were treated negatively because of their label. In a study by Farrugia (2009), half the children enrolled in special education felt depressed and stigmatized because of the labels associated with learning disabilities.

Green (2003), try to relate stigma and labelling. They assume that there exists a societal consensus responsible for labels that devalue individuals, and their use stigmatizes and discriminates against the individuals to whom they are assigned. They also state to internalize the label prior to the exclusion and oppression through stigmatization. The targets’ reactions are responsible for establishing the negative attributes attached to the label. Such reactions can be in the form of hiding the disability, avoiding others who appear to be unsupportive, or even educating others. It is also important to take a keen interest in the effects of the stigma on the bearers. Low self-esteem and reduced social interactions are commonly associated with negative labels within special-education systems. Young (1990) suggests that such effects are likely to hinder the success of labeled individuals. However, during stigmatization, the information given about the students may not be consistent with the associated label.

Burden and Burdett (2007) argue that being labeled as a special-education student is more likely to influence the views of others’ and expectations of the mainstream students. Studies by Burden and Burdett (2007), Bianco (2005) indicate that children labeled as having learning
disabilities are rarely accepted as readily as their peers who are perceived as not having special educational needs. Social interaction is responsible for students internalizing negative self-concepts. Stigmatization leads to deviant behavior that inhibits the individual from freely interacting with others. Kusow (2004) indicates that children with special-education needs tend to experience consequences because of the low self-concept resulting from stigmatization. For example, when I was working as learning difficulties teacher in Saudi Arabia I found that that children placed in special education are likely to be affected by depression and emotional disorders.

Students with learning disabilities tend to have limited approval from their peers, resulting in their status being minimized (Burden & Burdett, 2007; Green, 2003; Molloy & Vasil, 2002). In studies by Bianco (2005), Farrugia (2009) the majority of students with special learning needs were not approved or accepted by their peers. Lack of acceptance is directly linked to the social and emotional development of these children. However, there were inconsistencies in the findings regarding peer status. While the research by Bianco (2005) provides a reasonable percentage of positive attitudes toward special education, other studies indicate negative attitudes toward disabilities.

Even though labelling in special education is not intended to subject students to social consequences, it is ironic that they end up experiencing increased stigmatization and victimization (Taylor, 2006). From my experiences, there is a rise in the number of students with learning disabilities, and many find that their selected programs do not accommodate their special needs. Some students with learning disabilities whose programs are not calibrated to their needs feel rejected by what they
perceive to be the faculty’s failure to accommodate them. Also, some of educators possess little or no knowledge of ways to accommodate students with learning disabilities. Such students end up hiding their disability to avoid stigmatization by their instructors.

According to Gillman, Heyman, and Swain (2000), labelling students who have disabilities leads to those students’ social disadvantage and exclusion from society. If true, labelling defeats the aim of special education—progressing from a withdrawal model to an inclusion model—in an effort to make sure that students with disabilities are fully engaged with their peers. Placing students in general education settings, so will help them academically; however, it may not benefit them socially or emotionally.

According to Lauchlan and Boyle (2007), in some cases where peers are familiar with existing negative labels, they tend to exclude the labeled individual through reduced interactions with him or her. Children in school are capable of identifying peers exhibiting behavioral disorders and, consequently, they exclude the disruptive classmates from group activities. There was a correlation between the frequency of observed unruly behavior and the level of rejection experienced by children exhibiting the unruly behavior. It is possible for children to successfully distinguish their counterparts who seem to act abnormally (Agbenyega, 2003). Gregory (2007) indicate that children who are labeled feel ostracized by mainstream students and considers a contributing factor in low self-esteem, self-concept, achievement levels and probability that such a student will eventually drop out of school. It could be seen that the ability of children to identify counterparts with behavior disorders and regarding them less favorably is evidence that stigmatization occurs, resulting in negative self-esteem for the
children identified as different. The kind of social reaction exhibited against children who have been labeled as behavior-disordered constitutes exclusion.

Peer rejection has adverse effects during childhood and, therefore, has the potential for negative future outcomes. A study by Pescosolido, Martin, Lang, and Olafsdottir shows that students who have been labeled negatively seem to enjoy activities in the absence of those who are aware of their challenges, so these children therefore report problems of isolation. Other behaviors specific to children who feel excluded by their peers include aggression, noncompliance, and social withdrawal (2008).

DiGennaro Reed, McIntyre, Dusek, and Quintero (2011) claimed that the labelling of students with special needs renders those students less likely to be chosen as a first choice for playing together at recess, sharing a table at lunch, or leading a small instructional group. While it may seem petty to an adult, it is important to note that such social interactions and feelings of acceptance are very important and are an essential component of children’s development of a sense of belonging—especially in students with special needs.

A 2007 study by Lauchlan and Boyle looks into the effects of social integration on the success of students with disabilities. According to their findings, social integration is a powerful determinant of persistence and possible stigmatization among college students with learning disabilities. They also found background characteristics like ethnicity, gender, and parents’ education level to be insignificant when predicting resistance to stigmatization. For students experiencing stigmatization, integration into a college setting by use of social connections greatly influences the students’ academic success.

Brooks (2003); Gregory (2007) argued that the special-education label stigmatizes children as they simultaneously become accustomed to a
low self-concept. In addition, labels are meant to represent deficiencies. It depicts a correlation between positive self-concept and academic success. When self-concept improves, academic success increases, and vice versa. It also indicates that students with special learning needs have always achieved the least success in academics, attributable to the stigmatization concept. Apparently, students with academic difficulties are more in need of aid on how to improve their self-concept.

In most instances, students are placed in special education as a result of a school’s evaluation data that matched them with particular categories of disability outlined by education regulations. These placement methods make an assumption that labelling students with a categorical name describes the student’s learning problem (Taylor, 2006). The identities given to students determine the nature of services they receive and the manner in which they are offered. The classification process is also more likely to alter the students’ school experience.

According to Agbenyega and Klibthong (2014), diagnostic labels can lead to self-fulfilling prophecies as well as stigmatization. Diagnostic labels not only change the reputations of students but also alter how other people treat these students. Also, people usually tend to form negative attitudes about students who have diagnostic labels. For example, teachers who expect less from a student labelled as a learning-disabled student may be reluctant to challenge the student, which will limit the student’s opportunities to learn. The student, therefore, is less likely to perform well in school, which serves to confirm the diagnostic label.

Labelling limits the expectations for students labeled with a disability. Henley, Ramsey, and Algozzine (2009) found that teacher’s
expectation is an important predictor for the student to be success. When the teacher receives a student who labeled with a disability, the label may negatively effects the teacher’s interactions and expectations of these student. For example, if the student have dyslexia the teacher will not ask his or her to read on school audio because the teachers believe that the labeled the student has problem in reading, so student will give up on themselves and they feel that they can not be successful.

Labelling students as learning disabled, behaviourally impaired, or intellectually disabled may limit teachers’ views of the students’ abilities. Also, some teachers may call the student by disability (e.g., learning disability student) instead of by name (Bernberg, Krohn, & Rivera, 2006). Blum & Bakken (2010) argued that may cause the self-identity of these students to be lost and affect the student’s equity, social justice, and human rights. I believe when teachers think about the disability of the student before they know the student well, that can be dehumanising to the student.

Many teachers think that students labelled with the same disability are in the same category, and the teachers ignore the differences in the students’ abilities. These teachers, therefore, use the same education methods and strategies regardless of their students’ differences (Klibthong & Agbenyega, 2013; Gregory, 2007). For example, some learning disability teachers teach all students who have dyslexia in the same way. I believe that if teachers focus on students’ labels, that may affect the teacher’s practices and the quality of education, as well as the students’ achievement.

Many teachers do not like to interact with their special needs students, and these students do not receive support from their teachers. The teachers' support is imperative for the student to increase overall
adjustment and functioning in school (Rosenfeld, Richman, & Bowen, 2000; Barber & Olsen, 2004). These students are, therefore, at an increased risk of engaging in unhealthy, compromising behaviour (e.g., aggressive behaviour) to cope with the stress of not feeling accepted (Samdal, Wold, Klepp, & Kansas, 2000). I think that individuals who have been labelled as having learning difficulties are more likely to feel disengaged from the schools; as a result of this alienation, these students are at high risk for behaving in unhealthy ways.

The negative stigma associated with a disability label is a fateful status that can follow students all their lives. From their school-age years until they reach adulthood and independent living, students may affected by the lasting effects of the special education labels. Some researchers have suggested that special education labelling is a new form of segregation, and that racism through labelling is not the answer (Lin, 2007; Losen & Orfeld, 2002).

The stigma of labelling students with special needs can affect not only those students, but also their families (Kayama & Haight, 2013). Researchers have documented different ways in which stress levels in families are related to the way society constructs and labels the families’ children. These situations can lead to issues with psychological adjustments, marital discord, social exclusion, and economic dysfunction (Brinchmann, 1999). As a result, many families who have special needs students do not like to show their children with special needs in society due to their concerns about societal rejection, which then leads these families into isolation (Macaulay, Deppeler, & Agbenyega, 2016).

Stigma can be experienced by parents of children with special needs, especially mothers who can be viewed as bad mothers (Kayama &
Haight, 2013). Internalizing and responding to stigma can create more stressful situations when raising a child with special needs (Koro-Ljungberg & Bussing, 2009). In fact, some mothers share others’ negative beliefs about having a child with special needs because they perceive that society looks down on their children and feels sorry for them as parents (Kayama & Haight, 2013).

**The Power of Language**

There is much focus on how labelling language is used in education. This is an important area of exploration, according to Burden and Burdett (2007), given that language constructs experience. In mainstream education programs, the way the language is used can lead to either positive or negative perceptions of labeled children. It seem that the way language is used in special education is evidence of the power of language in influencing the lives of children.

According to Bianco (2005), students with disabilities are more likely to find themselves in a secondary or excluded position and, therefore, they are prone to facing peer-acceptance and teacher-support issues. It is then evident that the verbal environment within school settings can lead to the development of a context that determines students’ self-esteem and peer acceptance. The number of students requiring special attention who are placed in less restrictive environments continues to increase. Language, therefore, is relevant in understanding what students with disabilities experience when attempting to relate with their peers. The relationship between language and inclusion creates the need for more research on language as it pertains to disability policy within mainstream school settings.
The Social Constructionist Perspective

It may be considered reasonable to argue that special schools are a disciplinary exclusion against students who seem not to meet the codes in schools (Burden & Burdett, 2007). It is common for special-education students to be a challenge within a mainstream setting and, in those cases, schools often opt for exclusion as the solution. In their study, Lauchlan and Boyle (2007) also found behavioral problems to be the main reason for exclusion. As a result, separate educational provisions are seen to be a sort of dumping grounds for children not conforming to the set codes within the mainstream system, inevitably raising questions about whether special education is an affront to social equality and justice.

The social constructionist point of view dismisses individualistic notions concerning disability, including the approaches taken by teachers and the attitudes of all stakeholders involved in interactions with children. Given this perspective like Goffman (1963) look into how individuals tend to cope with labels and how they manage to control the information received by the public about them. Goffman (1963) contends that however much this may be considered helpful, the public is still left with the notion of shameful difference, which is inevitable. Social constructionists discourage the use of labels, against the arguments of individualistic models. On the other hand, the anti-labelling campaign by social constructionists is largely criticized by Burden and Burdett (2007).

Green (2003); and Squires, Humphrey, Barlow, and Wigelsworth (2012) advocate for full inclusion. According to them, the values of equity and social justice need to be at the forefront. They argue from the human rights perspective—with motivation from ideological considerations—
while also critiquing mainstream education. Besides questioning why children requiring special education fail to be included in conventional education systems, they also question the reason behind many schools not teaching children appropriately.

Proponents of inclusive education consider it to be preferable, arguing that it allows for the avoidance of practices that are central to special education. These include identifying and implementing special-education plans. According to Young (1990), such practices are the major reasons behind labelling students with special education needs. Being categorized as requiring special needs can be regarded as stigmatizing the children; therefore, it should be avoided as per the arguments of Yang, et al. (2007). Lauchlan and Boyle (2007) assert that it is evident that children requiring special education are labeled before they are formally identified. In other words, stigmatization is not necessarily caused by the identification, but by the labelling of these children as different.

It is not surprising that in human interactions, stereotyping and making generalizations is common, because it helps in managing complex information; therefore, it facilitates communication (Sewilam et al., 2015; Williams, Lamb, Norwich, & Peterson, 2009). Professionals working with the special-education sector often use labels as an easy way to describe children. One advantage of this is that it helps in professional communication, given that there is a shared language and concept. This is only true in circumstances with limited complexity. On the other hand, generalization may result in overlooking important aspects of the identified label. It may obstruct important individual differences, thereby limiting how the children are perceived.
Squires, Humphrey, Barlow, and Wigelsworth (2012) further argue that the label is not to blame for the stigmatization. However, once the labels are attached, they only serve to perpetuate the stigmatization. Even though the study is specific to people with learning disabilities, it is unclear whether their arguments apply to other labels.

Lauchlan and Boyle (2007) illustrate a phenomenon involving teachers’ stereotyping of three groups: students with remedial-reading needs, the learning disabled, and mainstreamed peers. It appears that teachers consistently ascribed connotative adjectives to the label-bearers; the labels did not translate to discriminatory sentiments. Regardless of how the teachers labeled the students, they were still able to recognize performance fairly and accurately. It is, therefore, evident that the labels’ emotional payloads do not dictate their reactions (Pescosolido, Martin, Lang, and Olafsdottir, 2008). Other studies comparing labels without the inclusion of an unlabeled control group suggest that attitude and action tend to be independent phenomena.

Using a social model perspective, it is relevant to argue that the effects of the labels are not responsible for stigmatizing people; rather, it is the discrimination and prejudice associated with the labels (Farrugia, 2009). Within the education sector, children feel they are disabled in light of the exclusionary practices of segregating them and labelling their special needs. To mitigate their tendency to consider themselves disabled, social constructionists call for integrated approaches to the situation. These include identifying and removing potential barriers to inclusion (Smith, 2011). People with impairments need to be given an opportunity to control their lives. Empowering such people defines the principle of social
constructionism, where disabled and nondisabled people work hand in hand to achieve change.

Originally, inclusive education mainly focused on individuals with learning difficulties. One major reason behind taking this approach is that many elements that determine diversity act in combination; not doing so increases the possibility of marginalization or exclusion. On the other hand, dwelling on factors like disability may lead to inappropriate assumptions (Kusow, 2004). On that note, Williams, Lamb, Norwich, and Peterson (2009) propose that inclusion policies need not focus only on those in need of special education. The view is supported by Burden and Burdett (2007), who recommend attention to be focused on a wide range of groups regarded as vulnerable. They believe inclusion should be about equal opportunities.

Having explored the literature on labelling within special schools using different authors’ perspectives, it is evident that an indication labelling within the education system is in liaison with disciplinary control, preset standards, non-changing institutional codes, and competition, which leads to exclusivity.

3- Labelling in Special Education in Saudi Arabia

In Saudi Arabia, special education is just getting underway, and society is not familiar with its goals and scope. In addition, people in Saudi Arabia have a negative perception of individuals with disabilities. For instance, those with disabilities are not allowed to live independently and cannot go to public places because others may be uncomfortable around them. Saudi society, in many circumstances, discriminates against these individuals. They are ignored in public and prevented from enjoying the same rights as do other citizens. Alquraini (2010) indicated that instructors
within Saudi Arabian learning institutions are likely to have negative perceptions of students with disabilities. Garni and Abdullah (2012) examined the reactions of male and female instructors to special-education cases and compared them to general education teachers in Saudi public schools. They then analyzed the teachers’ perspectives on factors like gender and age. According to the research, male Saudi teachers’ attitudes toward accommodating students with learning disabilities were more positive than those of female teachers.

According to Alquraini (2010), within the Middle East, several factors seem to influence parents of children with cognitive disabilities to seek personalized help from experts. The parents agree that they are reluctant to admit that they have a family member with intellectual challenges. A very small percentage of them state that they would have no issue taking such special needs children to public places. The stigma attached to seeking public health services is identified as a common barrier to seeking this help for their children.

Alquraini (2010) estimates that almost 10% of students in Saudi Arabia face learning difficulties. However, this percentage is not necessarily accurate, because there are no adequate assessment tools available. Also, when I was working as learning-difficulties teacher I found that only mainstream teachers evaluated disabled children, which resulted in wrong diagnoses. The students so labeled attend inclusive classes and receive support from special-education teachers. In the Saudi Arabian education system, learning disabilities are considered to be minor challenges, which is the reason why affected students are enrolled in the
general education curriculum. As mentioned above, however, extra support is available when needed.

Some authors seem to suggest that stigma related to cognitive disabilities is minimal in the Arab nation compared to other societies. Perhaps this so; however, stigma toward students with special needs is substantial. Most reports on stigmatization in Saudi Arabia were published more than a decade ago and, therefore, do not reflect current public attitudes. It is likely that there is a greater awareness of the damaging effects of stigmatization. This may be attributed partly to the awareness spread through the media as well as the government’s efforts (Alquraini, 2010).

Nonetheless, the stigma about cognitive disabilities may still be persistent in Saudi Arabia even today, similar to the rest of the world. Societal stigma determines how students in need of special education are treated. Some special needs students try to hide the psychological symptoms and continue to attend mainstream education to avoid stigmatization. Garni and Abdullah (2012) report that in Saudi Arabia, the majority of students showing symptoms of intellectual disability first seek to attend general education classes, with only a small percentage of them being diagnosed with intellectual disability. This tendency coincides with the trend in other parts of the world where victims hide their challenges to lessen the stigma.

4- Recommendations

First, attention to educational and training services, many children with special needs did not receive proper training and rehabilitation in Saudi Arabia either because of the ignorance of parents of the importance of early rehabilitation or because of stigma must be hidden. Second,
attention to community care, psychological support and social responsibility, there are places that refuse to receive people with special needs and alienate them because of their disability and this causes them a lot of frustration and isolation. Finally, the important role lies with the media because it has an important role in educating the community in ways of dealing with people with special needs and accept them and not averse to them because of the stigma about disabilities.

5- Conclusion

The results discussed in this paper have various educational implications. First, learning institutions need to focus on correcting false beliefs and enhancing knowledge concerning learning disabilities. Some argue that doing away with labels used to identify disabilities is not enough to lessen the impact of stigmatization. However, others believe that labelling children’s disabilities may provide a social benefit by allowing their peers to understand their exact condition. This assumes that children tend to be more comfortable and accommodating to their peers with disabilities when they understand what differentiates them. Labels, therefore, can be said to help children to comfortably understand individual differences. Understanding that disabilities are not voluntary or, in many cases, intentional behaviors, can turn out to be reassuring for other children. With this knowledge, in Saudi Arabia, the Ministry of Education should continue with efforts targeted toward creating awareness campaigns on disabilities to eliminate stigmatization.
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