Understanding the Reality of the Work Undertaken by the Disability Officer in relation to Student Support in a Third Level Educational Institution in Ireland.

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A Thesis Submitted for the Degree of Master of Science

Waterford Institute of Technology

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May 2008

DECLARATION

The author hereby declares that, except where duly acknowledged, this thesis is entirely her own work and has not been submitted to any other institution for any other academic award.

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Acknowledgement

Abstract

The aim of this study is to reach an understanding of the reality of the work undertaken by the disability officer in relation to student support in a third level education institution in Ireland. To achieve the purpose the objectives set out were: to examine the 'everyday' work of a disability officer, describe the 'visible' and 'invisible' processes of the everyday, include the student voice and the disability officer voice and use a reflective practice approach to serve as a method of inquiry that allows for a way of finding out about self as well as the research topic.

Use of accessible language in the ethnography was a priority. The choice of reflexive ethnography as methodology was primarily influenced by the ethical requirement that no burden of time or energy be placed on the cohort under study – students with disabilities. The reflexive element in the ethnography allows that the 'turning back on oneself' is the means by which the author is visible throughout the ethnography.

In this study the 'field' (an ethnographic term for the study setting) is a third level educational institution. The 'fieldnotes' are a written account of what happened in the field during the time of the collection of data. Through working with fieldnotes created by students and input on behalf of students by the ethnographer, the student voice is heard. From these fieldnotes an extracted statement made by a student during the data collection phase of the study is the focus of the analysis. Agar's (1985) protocol is used in undertaking the analysis.

Interpretation of the analysis is underpinned by the use of Goleman's work (2006, 1999, and 1996) in the area of emotional intelligence.   Findings of the study are; that listening can be understood as caring and that in the unique setting of the research there is a student need to perceive the disability officer role as a caring role.

The role of the disability officer is considered to have emerged only recently. It has not been the subject of much discussion in the literature to date. The issue of whether the disability officer role is a professional one is examined, resulting in the acceptance that for now it is most likely a semi-professional role.   The required undertakings to professionalise the role are currently being addressed by disability officers in Ireland.

The substantive issue and contribution of the research is the uncovering of an affective element to the disability officer's everyday work and the acknowledgement that it is, for the main part, invisible work. The affective element centres on active listening and through such listening the disability officer's role as a caring one has been demonstrated.

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Introduction to the Study

The aim of this study is to reach an understanding of the reality of the work undertaken by the disability officer in relation to student support in a third level institution in Ireland. To achieve the purpose the objectives set out were: to examine the 'everyday' work of a disability officer, describe the 'visible' and 'invisible' processes of the 'everyday', include the student voice and the disability officer voice and use a reflective practice approach to serve as a 'method of inquiry' that allows for a way of finding out about self as well as the research topic.

On the first page of this introduction to the study it is important to state that I write of the everyday work of a disability officer. In doing so the writing style is specifically chosen to be accessible and clear. There are exceptions where theoretical issues demand writing with a more academic slant and even then, I have purposefully endeavoured to keep the language clear. In writing of the understanding of the work of a disability officer it must not be obfuscated[1] by the use of inaccessible language. Although my audience may include academics, the study is to be useful to anyone desiring access to its contents. This is a particular requirement, I contend, in a study undertaken by a disability officer.

Ethnography is rooted in the researcher's desire to "learn about a world … by encountering it first hand and making some sense out of it" (Agar 1985, p.12). The researcher, as ethnographer, according to Agar (1985) offers a public presentation of a coherent view of a 'humanscape' – in this study the world inhabited by students with disabilities in a third level educational setting. In ethnography, understanding is key and Agar (1985, p.12) says that the work of the ethnographer lies in "emphasising the *understanding* of situations that have occurred rather than the *prediction* of the value of one variable given the knowledge of the values of others." In this respect ethnography offers no initial research question or hypothesis. Therefore, I have not, in the introductory chapter, included a research question or hypothesis. Ethnographic understanding *unfolds,* is described and analysed throughout the research process and the study is not completed

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[1] I have used this word deliberately.

until the last word is written (although the collection of data may take place during a defined timeframe). This ethnographic study leads the reader through the lived experience of the researcher and the students, resulting in some understanding of the disability officer's role, which is the aim of the study.

That the work of a disability officer needs to be understood is grounded in both the personal experience of the researcher and the fact that there is a scarcity of literature in relation to the role.   It could be suggested that an understanding of the role impacts on support provision for students with disabilities. Without understanding of the role of a disability officer students are possibly at risk of being deprived of adequate support. Additionally, where the role is not understood referrals of students with disabilities to the disability officer may not be made by, for instance, lecturers or staff within/without the institution.   A possible outcome of an unclear understanding of the role might be that the successes/achievements of both the students and the disability officer are not understood or acknowledged.

In introducing this study I am taking cognisance of Wolcott's (1995 p.135) advice when he suggests that "an introduction to any study should begin with outlining the purpose of the study in the very first sentence, of the very first paragraph, in the very first chapter." I have found in my readings around 'doing ethnography' that Wolcott suited me as a writer, I liked his style of writing and his common sense approach to the endeavour that is ethnography.   I have, therefore, taken his advice on several aspects of 'doing ethnography'. I need, therefore, to state that I agree with Wolcott (1995 p.135) that readers should be credited "for being able to remember what they are reading" and therefore, I try not to keep referring to this 'study' or 'research' etc. except on occasions where I think it necessary to do so. As an accessible piece of work, I decided to use a relaxed format and from time to time there is inclusion of personal asides or my

experience as a disability officer. These are included as unique to me and are not intended to be generalisable in any way to other disability officers. Wolcott (1995 p.137) says that in relation to anecdotes and personal asides "… we tend to remember material presented in this way."

The disability officer and student work in partnership in the everyday work of a disability officer. To denote this partnership in the writing, disability officer or disability office does not attract capital letters any more than does the title student. A level of reciprocity existed between the disability officer as ethnographer and the students as informants and the use of small letters in depicting the titles goes some small way in valuing this reciprocity. There is an exception to this decision, where the description of disability office is employed to depict a particular model of support delivery as in the American model of Disability Office for Students with Disabilities, i.e. an Office to 'work from' rather than an office to 'work in'.[2]

The introduction to the study commences with the rationale, justification and catalyst for the study. Decisions taken in relation to pseudonyms, confidentiality and anonymity are explained briefly.[3] The plan of the study follows, in which the content of each chapter is outlined.

Rationale in the undertaking of the study
The study was elicited because of my perception that the work of a disability officer is poorly understood. When questioned regarding my occupation, even by way of general conversation, it is clear to me that the term 'disability officer' holds little understanding for the questioner; clarification is often required. The exceptions are people who are in contact with disability officers through their work, or students with disabilities.

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[2] This model is referred to in the Findings, Discussion and Conclusion Chapter.
[3] See Methodology Chapter for full examination of the subjects of confidentiality and anonymity.

Justification for the study

In an initial search of the literature it was clear that there was a paucity of literature that spoke of the work of a disability officer. This confirmed my perception that the work of a disability officer could not generally be understood. It is not possible to have a clear understanding of a role that the literature doesn't, to any real extent, speak of. Internet searches using diverse combinations of the descriptors 'disability' and 'officer' drew little information. The bulk of references to disability officers came from third level education web sites. The information even then, was sparse, informing readers that a disability officer was in place and that contact could be made to discuss support requirements. Results from inputted queries to United States' Internet sites consistently returned results relating to 'officers' of the law with a remit relating to people with 'disabilities'. Such poor results from my searches[4] for even the most meagre amount of information relating directly to the work of disability officers supported my theory that the work was not well understood. I began to form the question around 'if and how' such an understanding could be achieved.

Catalyst for the study

In the interests of trustworthiness and integrity on my part, it needs to be stated that the catalyst for the study was the realisation that the work of a disability officer was not well understood, if at all. As a life-long learner I decided that research in this area might yield some useful results. That the outcome of the research would be usable in some way was important to me, particularly as my full time role dictated that the study would be undertaken over several years. This was a major commitment for me, but I sensed that the work of a disability officer needed to be understood. I decided to undertake the research.

Decisions taken in relation to the study

Decisions taken by me as ethnographer are tracked throughout the ethnography, chapter by chapter. I am alert to allowing the reader insight into my decision making process as

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[4] Electronic and Internet sources searched included: Cochrane, Medline, CINAHL, Blackwell Synergy, InfoTrac, Google Scholar, PubMed, CrossSearch, ScienceDirect, disABILITY I, Ovid and Google.

part of the ethnographic journey and in the interests of trustworthiness and integrity (Davies 1999).

Pseudonyms

The ethical issue of confidentiality and anonymity in relation to informants (students with disabilities) is dealt with by the decision to use pseudonyms as agreed with the students in initialising the study. The names used in the ethnography as applied to students are biblical names, from the Old Testament. The students as informants are referred to mostly in the ethnography simply as 'students' or the 'folk'[5] and are described as 'students with disabilities' from time to time simply to reinforce their status as the informants in the research.

One interview as data for analysis

When researching for a method around the lifting out of data for analysis I found it interesting that Michael Agar himself, (whose protocol I used for the analysis) used only two interviews for his analysis in one of his own studies. I, therefore, felt comfortable deciding to use the approach of using data from just one interview for my analysis, given that the data were collected in the field over a full academic year. The 'one interview' does not, however, stand alone. Support for the content of the interview from other student interviews and checking for understanding of the interview content by 'others'[6] illuminates and expands the data in several directions.

Limitations of the study

Possibly one of the most felt limitations of the study is the non-availability to the reader of detailed biographical data in relation to the informants. Because of this limitation the descriptions of informants might be said to lack the colour and vibrancy such inclusion would have allowed. Biographical data cannot be included in the interests of confidentiality, as support of students with disabilities through the systems prevalent in third level educational institutions in Ireland is pledged as confidential. It was relevant

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[5] An ethnographic term to describe the informants (McNeil 1995) – in this study – students with disabilities registered with the disability office at the time of the research.
[6] 'Others' are students and work colleagues.

to informed consent on the part of the students that only writing in relation to the everyday work of the *disability officer*[7] would be undertaken and that nothing would be written concerning any student[8] that might lead to them being identifiable in any way.

Content of interviews undertaken as part of the needs assessment[9] process with students, while available to the ethnographer cannot be written as fieldnotes. Notes relevant to these interviews are kept on student files and are confidential. Therefore, there are no excerpts or fieldnotes in this ethnography from interviews undertaken during needs assessments. This is a limitation of the study, in that such interviews are a major component of the disability officer's everyday work and together with 'review of needs' interviews (which fall into the same confidential category as needs assessment interviews) amounted to approximately one hundred and fifty interviews in the academic year of the data collection.

It is a further limitation of the study that work colleagues did not have time to explore the issue of the student perception of the role of a disability officer as a caring one. The responsibility of what is included and what is excluded is my responsibility as ethnographer.[10]

Plan of the study

The study is made up of several chapters. They are presented in an order that allows the reader to follow the ethnographic story. The story is of how a disability officer, as ethnographer, with a group of students with disabilities as informants, over a specific length of time, undertook an ethnographic journey that resulted in research findings and a contribution to an understanding of the everyday work of a disability officer. Data were gathered during the academic year 2004-2005.

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[7] Italics – mine, to stress the weightiness of this ethical accountability.
[8] The agreement around what could be written about informants is detailed in the Methodology Chapter.
[9] See Ethnographic Analysis and Understanding Chapter for full explanation of needs assessments.
[10] As the researcher undertaking an ethnographic study I am referred to as the 'ethnographer'.

Chapter Outline

Chapter 1 - Background to the Study

A brief overview of the history of disability is given to contextualise the research. Included is an introduction to models of disability - in Chapter 1; this is from an historical perspective only.[11] The emergence and status of the disability movement is outlined. The chapter then attends to policy and legislation relevant to disability issues in a higher education setting in Ireland.[12] To give the reader a sense of the location in which the study took place a geographic description of the third level College that was the setting for the research is provided. 'The folk' are introduced by way of a short history of the group.[13]

Chapter 2 – Literature Review

The review of the literature commences with reviewing literature in the area of definition and concepts of disability. There is a vast literature on definition and whilst offering samples of definition, those where the focus is on third level education in an Irish setting are particularly stressed. Models of disability are outlined in the Literature Review chapter, with acknowledgement that the definition in use in third level education in Ireland is predominantly the social model.[14] The issues of disability, impairment and handicap are also addressed.

The chapter goes on to review the literature in relation to the role of disability officers and finds that it is practically non-existent. One study carried out in the United Kingdom underpins what information is available relative to the role of disability officer.

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[11] Models of disability are also reviewed in the Literature Review.

[12] To further facilitate the reader a chronology of policy and legislation relevant to this study in given in Appendix L. It commences from the mid 1980's (when the disability officer role was established in Ireland) to the present.

[13] There are no extraordinary issues to draw attention to regarding: kinship, social relations, economics etc., in relation to the group under study.

[14] Supports are delivered to overcome the barriers created by society in disabling the student.

However, it carries with it the weightiness of first hand evidence with verbatim accounts of the work from disability officers themselves. Literature became available in the form of a conference paper which addresses the role of the disability officer in some detail, particularly in relation to professionalisation of the role. Some literature was found where disability officers in the United Kingdom and Australia[15] had carried out research, but as they did not relate to the role of disability officers per se, they were not found to be useful for the purpose of this research. A Disability Advisors Working Network (DAWN)[16] document is reviewed to give Irish context.[17]

Chapter 3 – Methodology

Ethnography, as method, is the underpinning subject in the Methodology Chapter. The chapter commences by giving a background to the choice of methodology for this research. The choice of method was initially problematic because the student cohort under study fits the profile of a 'vulnerable population' on the basis of being students with disabilities. An initial proposed method of participation action research had to be abandoned and the decision making process around this is given in Chapter 3.

A brief history of ethnography is offered, followed by ethnographic explanation. Chapter 3 examines reflexivity in ethnographic method. Reflexivity is of consequence in this study as the study comes under the banner of a reflexive ethnography. Ethnographic method and analysis are dealt with, including: gaining entry, finding an identity, defining the research problem and data collection. Attention is paid to reflection on writing. Ethical considerations when initiating this study were considerable and as already stated one proposed research method had to be abandoned. Ethical approval from the College Ethics Committee was a requirement for the study and all ethical concerns are written about in the Methodology Chapter.[18]

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[15] Areas addressed in these documents are: Working with Students with Mental Illness (Harris & Phillips (2004), Evaluation of a Regional Disability Liaison Officers Initiative (Kable and Heath 1999) and Philosophy of Service Delivery (Shaw – undated). At the time of the literature search these documents were unpublished and were given to me by colleague disability officers who knew of my research.
[16] DAWN was established in 1999 and its members are disability service coordinators/disability officers from the higher education sector in Ireland.
[17] See Appendix A.
[18] See Appendix K for copy of Ethical Approval.

Chapter 4 – Fieldwork

Fieldwork as an ethnographic process is the subject with which the Fieldwork Chapter opens. Relationships in the field are explored, with students and staff making up the bulk of the relationships. The relationships have a consistency about them as some students were in the College prior to the commencement of the fieldwork, as were the staff. Given these conditions, the ring-fencing of a particular time-frame for fieldwork is noted and that the collection of data is confined to the allotted time is pertinent.

The ethnographer as 'self' in the field during the fieldwork is addressed from the perspectives of the 'brought self' to the field; the issue of the person the ethnographer 'becomes' in the field is given attention also. Interviews - as frequent sources of fieldnotes and data - are discussed from the perspectives of interviewing 'techniques' and suggested ethnographic interview models. Fieldnotes, used to describe places, people and events offer the possibility of recording emotions also. The use of emotion is clearly flagged in this study and because of this there is an expectation that emotion will litter the fieldnotes. The Fieldwork chapter works through the means to 'exit the field' while remaining in it.

Chapter 5 – Ethnographic analysis and understanding

Chapter 5 deals with two elements of the study; that of ethnographic analysis and that of ethnographic understanding. In the first sentence of the chapter it is clearly stated that the ethnographer grapples with Agar's (1985) analysis protocol while also tackling ethnographic understanding. The theoretical underpinnings of Agar's (1985) protocol are explained by outlining his approach to ethnographic language, which he describes as a language used to allow the transmission of information from the ethnographer to the reader. Effort is exerted in this chapter to keep the language used in the transmission of the information from the ethnographer to the reader in accessible language. In running the analysis in tandem with understanding in this chapter it was planned that understanding would sit side by side with theory. Included in this chapter are extracts

from fieldnotes, which includes the story of the segment[19] from the fieldnotes that was chosen for analysis. A view of the 'humanscape'[20] that made up the study is clear in this chapter, with student voices joining that of the disability officer as ethnographer. There is a sense of the interplay between them in the everyday work of the disability officer. The students and ethnographer are joined in this chapter by other informants and players in the ethnographic story, for example, parents of students with disabilities and the disability officer's work colleagues.

The statement made by a student, Seth, which became core to the analysis, is the main focus of this chapter. The statement is segmented and analysed, with interpretation applied in the latter portion of the chapter. The statement as understood by the ethnographer was checked for understanding by 'others' too and this process is described in the chapter on Ethnographic Analysis and Understanding.

Chapter 6 – Findings, discussion and conclusion

Chapter 6 commences with an outlining of the findings. That listening can be understood as caring (listening axiologically as caring) is demonstrated. Through such listening, understood as caring, the student 'need' to perceive the disability officer role as a caring one is met. The discussion section opens with an overview of the study. The discussion then goes on to deal with the substantive issue of the research – an understanding of the everyday work, the 'visible' and the 'invisible' work of a disability officer. This involves exploration of the disability officer role as a caring role, activated by listening. Having examined the mechanics of the role as dealt with in the Literature Review, it was clear from evidence from the analysis and interpretation that an affective element of the work of the disability officer was core to the 'invisible' aspect of the work. The question as to whether or not the disability officer role is a professional caring role is explored in the discussion drawing on literature from the Literature Review as evidence for professionalism. The conclusion deals with the contribution of this research to an

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[19] See Table 4 for an explanation of 'segment'.
[20] The 'humanscape' in this study consists of the students and disability officer with others in the field at the time of the research – see Ethnographic Analysis and Understanding for further detail on the "humanscape".

understanding of the everyday 'visible' and 'invisible' work of a disability officer. A review of the ethnographic journey follows which examines the suitability of ethnography as methodology in the undertaking of this research. Recommendations in the areas of research, education and practice in relation to the disability officer role are made.

CHAPTER 1

Background to the Study

Introduction

Atkinson (1990) says that ethnographies often begin with passages that "set the scene" by way of introduction to the whole work. So it is with this ethnography. Setting the scene begins with looking back, by addressing aspects of the history of disability which help to contextualise the research. This overview includes: models of disability, normalisation, and the disability movement. Irish policy and legislation impacting students with disabilities in higher education in Ireland is addressed in this chapter.[21] The chapter culminates with a description of the setting in which the research took place, together with a brief history of the group under study. A personal framework for the study is also included to allow the reader access to the background of the researcher (ethnographer), as person, disability officer and author of the study. This personal framework is offered as a means of establishing authenticity and integrity.

Historical aspects of disability

Linton (1998 p.4) declares that: "people with disabilities exist and have existed in all communities throughout time." Despite this fact, Terzi (2004 p.141) says "it is only in the last three decades that any type of systematized political and theoretical reflection on disability has emerged."

These statements allow for an acceptance of the fact that people with disabilities have always existed and in all societies, but their existence and experiences have not been well documented through time. Toolan (2003 p.171) points out that "disabled people have historically been problematised through medicalisation or criminalisation so that they might be detained or confined away from society." He reaches back to the Middle Ages by citing Foucault (1989) regarding those persons with mental health problems who filled

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[21] An outline of Irish policy and legislation impacting the area of disability relative to this chapter is presented as Appendix L.

the vacated leprosariums. Foucault (1995 p.51) describing a 'patient' (a criminal) going to execution writes: "… at the head two police sergeants: then the patient …" thus aligning with the idea of patient as criminal. Those with disability frequently fit the profile of patient.

Negative terms are frequently linked to people with disabilities. The mark caused by the branding of slaves and criminals was termed 'stigma'. Nowadays, stigmatised individuals seek to control the negative images others have of them through a process of 'impression management'.[22] Stigma is also linked to dependency and to groups that are "living off the state" (welfare) and those who are physically or mentally handicapped and dependant on the care of others (Graham 1985, pp.53-54).

From an Irish perspective Paddy Doyle's *The God Squad* (Doyle 1990) tells of the huge physical, sexual, emotional and psychological scarring of institutionalised persons, including those with disabilities, which the State is now perceived to have legitimised. A number of documentaries addressing the issue of State complacency in relation to the institutions led to the setting up of the Laffoy Commission to investigate such abuses against children, including children with disabilities. Toolan (2003) takes an historical look at the portrayal of people with disabilities in film and literature. As an interesting approach it offers perceptions of disabled people from the time of Thomas Edison's film *Fake Beggar* (1898), Dickens, *A Christmas Carol,* through the fairy tale era with *Snow White and the Seven Dwarfs.* Toolan (2003 p.173) referring to Fielder (1978) contends that human freaks have existed for ritualistic aesthetic commercial purposes ever since history began.

Two enduring trends were established which have "exerted a powerful influence on disabled people for nearly two centuries; one toward approaching disability from a medical perspective, and the other towards the institutional compartmentalisation of people with disabilities according to disability type" (World Bank 2004, p.xix). The eighteenth century discovery that people with disabilities could learn, precipitated the

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[22] See also 'normalisation' in this chapter.

emergence of special schools and custodial care institutions for the visually and hearing impaired. Such institutions did not emerge until much later for people with physical disabilities and most of them were affiliated to hospitals. Until the emergence of the civil rights movements in 1960's and 70's most people with disabilities were educated in segregated facilities. This approach was supported by churches and charitable organisations. During this period government involvement in special education tended to be meagre and was carried out through ministries and departments of social welfare and not departments with responsibility for education (World Bank 2004 p.viii). Disabled people were screened from public view, hidden in institutions or in attics and basements, to shelter their families from shame. 'Special' schools and classrooms, segregated transport, 'invalid' coaches that shuttled disabled people from venue to venue were the order of the day (Linton, 1998). The emphasis on 'invalid' is explored by Toolan (2003 p.174) who points out that the medical model infantilised disabled people to ensure that power stayed with the professionals "who sought to administer care and cure." Oliver (1990) refers to this also as a form of medical imperialism.

During the rise of western capitalism and industrialisation because people with disabilities could not undertake heavy physical labour they were seen as "financial burdens" and were restricted to workhouses (National Disability Authority 2002, p.25). There was enormous upheaval in the lives of people with disabilities on the closure of the workhouses, as the charitable model was epitomised by the placing of people with disability in the workhouses. The twentieth century saw the isolation of adults and children in institutions often miles from their family homes (Macfarlane, 1996). Quinn and Degener (2002) speak of the demise of the charity approach in stating that:

> A dramatic shift in perspective has taken place over the last two decades from an approach motivated by charity towards the disabled to one based on rights…the human rights perspective on disability means viewing people with disabilities as subjects and not objects.

> (Quinn and Degener, 2002 p.1)

Toolan (2003 p.174) might not agree totally that 'motivation by charity' has been fully supplanted by a rights based approach as he refers to "… the clappy-happy charities who suggest that everything in life can be sorted by a cup of tea and a Telethon where publicity shy celebrities can demonstrate their compassion towards others." Naughton (2005) put forward the notion that, even today, the best deal for fundraising (charitable model) is to invoke some type of sadness in the giver. Almost every day on the streets of cities/towns and in the countryside in Ireland the charitable model is invoked by the fact that groups supporting people with disabilities often have no other source of funding but to go to the public *box in hand*[23].

In addressing recent academic history in relation to disability Shakespeare (2005 p.139) - a disabled activist - points out that as he started his PhD in 1990, disability was "a problem for social policy and a research domain for medical sociology." He discussed his thesis topic with his professor, whom, Shakespeare writes, recommended that he read Goffman.[24] Goffman and others explored disability from a normalisation perspective. Shakespeare having read Goffman went on to read studies by Blaxter, Locker, Topliss, and Walker and as he says himself 'a few others'. He states that the arrival of Mike Oliver's *The Politics of Disablement (1990),* Colin Barnes' *Disabled People in Britain and Discrimination* (1991) and Jenny Morris' *Pride against Prejudice* (1991) was a welcome transformation of the intellectual climate. Oliver, Barnes and Morris engaged with the subject of disability from a disabled person's perspective. This gives some sense not only of the recent historical academic time line, but also some sense of the relief expressed by Shakespeare that works are currently being published, offering insight into disability issues from the perspective of disabled people themselves. Williams (1999) speaks of the celebration in 1996 of ten years of the publication of *Disability and Society*[25] (originally called *Disability, Handicap and Society*). This publication is of clear historical importance (tracking disability issues), as was the setting up of the Disability Press.[26] The National Disability Authority (NDA) has commenced publication of

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[23] Italics-mine, to stress the 'begging' charitable approach still required to be taken to secure funds.
[24] Goffman's work on 'normalisation' is dealt with later in this chapter.
[25] Published by Routledge - Taylor and Francis Group.
[26] The Disability Press was set up by Colin Barnes and Geof Mercer at the University of Leeds.

Disability Agenda to inform and educate on disability matters in Ireland. The availability, through publication, of contemporary disability literature will be an historical legacy for generations to come.

This brief historical overview of disability followed a path in time from where people with disabilities were invisible and institutionalised to where people with disabilities are visibly expressing their views. The method of expression is frequently that of the written word. This study, by including the student voice acknowledges that the path continues to be trod and that any opportunity, no matter how small (such as this study) to hear such voices must be seized.

Even a brief overview of aspects of the history of disability is not complete without addressing the topic of models of disability. In this area the historical progression is clearly seen. The following section deals with models of disability to ensure that this important aspect of the history of disability is offered to expand the overview given in this chapter.

Models of disability[27] - an historical perspective

Medical and charitable models

In the previous section, references were made to the charitable model of disability. It is almost impossible to separate information and explanation of 'models of disability' as they usually share a commonality. This holds true for all models: charitable model, medical/individual model, social model, human rights model, universal model. The list seems to grow daily much like the definition of disability itself.

An overview of disability by the World Bank (2004) outlines how "in early medicine disabilities were narrowly defined as impairments or disturbances at the level of the body; [as] medical problems to be either prevented or corrected" (World Bank 2004, p.viii), thus giving rise to what it now termed the medical model of disability. The

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[27] The Literature Review chapter addresses models of disability further. This section deals with models of disability from an historical perspective, thus also laying the foundation for the later reviewing of models of disability currently in use.

medical model imposed a blaming of the victim – the disabled person – ideation, or the belief that disability was a punishment of some type. This led to the marginalisation of people with disabilities (World Bank, 2004).

An approach to tackling the issue of 'marginalisation' in the 1980's was that of 'normalisation'. While it applies in most part to people with learning disabilities, what is now referred to as general learning disability, it does offer an insight into similar application to people with disabilities of any type, where acceptance due to physical or mental 'abnormality' applies.

The term normalisation was first coined in Scandinavia to underpin reform of institutional services for people with learning disabilities. Erving Goffman (1961) critiqued the institutions, observing that inmates were forced to experience work, relationships and leisure under the same roof. Based on information presented here it can be seen how exactly the same circumstances pertained to many other people with disabilities, not described as learning disabled. The idea of normalisation was to model the lives of ordinary citizens within the institutions. Goffman (1961) suggested that the rhythms of the day, weeks, seasons and life cycle would be made available to people in these settings and their rights upheld. These rights included the right to make choices (Brown and Walmsley 1997, p.228). Wolfensberger (1972) extended Goffman's work. He proposed that services be evaluated against 'normal' and not 'abnormal' (or even sub-normal) reference points. These reference points included: physical setting, cleanliness, what is nearby, the name of the service, the agency logo, the appearance projected by clients, what the clients are called, and what the service activities are called. Wolfensberger's work played a major part in achieving change on behalf of people with learning disabilities. Normalisation was about promoting positive images,[28] and giving the appearance of competence. In North America (where Wolfensberger lived) integration became the keynote of normalisation.

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[28] Attention was drawn earlier in this chapter to the idea of 'image management' by people who are stigmatised.

Wolfensberger's model of normalisation assumes that conformity is a condition of acceptance in the mainstream society. In 1983 he advocated a change from the word 'normalisation' to 'social role valorisation'. The Scandinavian Model of Normalisation in the 1980's was a rights-based model (Brown and Walmsley (1997). The American Model of Normalisation in the 1980's focused on integration and acceptance by society. Both models have followers in Britain and Ireland; examples are the L'Arche and Camphill communities in Ireland.[29] During the 1980's other aspects of rights issues were being promoted, this time by people with disabilities themselves (Oliver 1997).

As outlined in this section acceptance in mainstream society was a tenet of normalisation. In present day Ireland the move to the mainstreaming of students with disabilities in educational settings is to be welcomed. This of course needs to be tempered by particular student need and provision of education in each case must be planned for within the environment most suited to the individual. Students with disabilities whilst availing of mainstream education at third level still require in most cases, supports to ensure access both to the environment and the courses they choose. This study acknowledges that the disability officer role should not be a necessary one – universal access should negate a need for it. Disabled people themselves are marshalling around their requirements for universal access through their involvement in disability movements.

Disability movement(s) and the social model of disability
Since the 1980's, people with disabilities have become increasingly more visible and disability is now firmly considered to be a social and human rights issue. There is general consensus that people with disabilities have established their own movement (Melucci 1989, Oliver, 1997, Beresford 1999, Toolan 2003). The 1960's Civil Rights Movement in the United States of America encouraged people with disabilities to view disability as a rights issue and disability groups have gradually become more organised and vocal. The disabled people's movement identifies with other movements, for example the women's movement, black people, gay men and lesbian movements. It can

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[29] L'Arche and Camphill Communities in Ireland are communities of disabled people. The ethos is one of supported independence in both the working and living environments of the community members.

be argued that these movements, while having achieved much, are still working from an aspirational standpoint rather than one of full and equal involvement. It is noteworthy that commentators refer to movements (plural) of disabled people, often emphasising the differences and labelling them as individual movements, for example, the intellectual disabilities group, the physical/sensory disabled people's groups or the disabled people and psychiatric survivors movements (Beresford 1999). A core element of the disability movement, whether divided out as individual movements or considered as one movement, is that of human rights. Toolan, (2003 p.175) says that "Ireland's engagement with the concepts of rights seems at best uncomfortable." He postulates that it is the experience of women and their struggle against a male Catholic order which sought, through the agents of the state, to regulate and restrict their lives that are probably the clearest expression of how our legislature historically engaged with concepts of individual rights. Toolan (2003 p.176) posits that in Ireland we have a unique glass through which to see the value of rights at this time - the Good Friday Agreement.[30] This, he believes, "references our need to value rights."

According to Beresford (1999) disabled peoples' movements are concerned to change both the individual disabled person's life and the broader society, with the aim of the movement being to promote change; to improve the quality of disabled peoples' lives and promote their full inclusion in society. It might be argued that if the aim of the movement is to promote change its objectives are to enable members to develop their own identity, collectivities and agendas. The disability movement has allowed for the move away from people with disabilities being perceived as individuals with deficiencies – the medical or individual model - which demands welfare solutions, to one where the social model has been developed, thus crediting the disability movement with the birth and nourishment of the social mode. It is of note that Oliver (1997) writes of a 'new' social movement in referring to the disability movement and bases his claim for a new social movement status on a study carried out by himself in conjunction with Campbell (Campbell and Oliver, 1996). Oliver (1997 p.244) draws attention to the discriminating

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[30] The Good Friday Agreement was signed on 10th April 1998. It affirmed the parties' [to the Agreement] commitment to "the civil rights and religious liberties of everyone in the community" (Conroy et al. 2004, p.2).

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factors, which he claims are the pointers to including the disability movement in the category of 'new'. 'Old' movements tended to campaign on single issues led by experts with lobbying as their only tactic. New movements are more concerned with a broad range of issues and use a variety of tactics.

In these movements the same people leading policy issues are the very people on the picket lines, activists, or 'organic intellectuals' such as Oliver, Toolan, and Pfeiffer. However, Hasler (1993 p.18) points out that it is more difficult for intellectuals to be generous now that disabled intellectuals are selling, rather than giving away their intellectual property. In the selling of disability-related information such intellectuals attach a monetary value to it where previously they did not. Their approach had been one of sharing of information for no financial gain. She says that information plus experience is her definition of knowledge and that knowledge is power. The disability movement, she claims, is the power of that knowledge made visible, in action. The movement now challenges the tradition of non-disabled people speaking on behalf of disabled people. This springs from a desire to move from the charity model to a social, rights-based model. Beresford (1999 p.43) posits that such a move should help lift the social oppression and attacks he believes "state and society make on our bodies and ourselves."

In a very finite overview of aspects of the history of people with disabilities in this section, it is possible to evidence the move from a time when disabled people had no voice, to the present where it is being heard particularly through the disability movement(s). Some commentators argue that having the voice of disabled people heard is still problematic:

> The prevailing system seems to presume a capacity to make one's voice heard. However, vulnerable people with disabilities in institutional settings may not have a voice or their voice may be feeble.
>
> (National Disability Authority 2001, p.6)

People with disabilities are currently better placed than previously to have their voices heard to influence policy issues; they are selling their intellectual property often by

publication of their work, thus reaching larger audiences. Disabled people are insisting that their knowledge is power, which they use to promote their own individual and collective agendas. The use of the student voice in this research supports the approach to having such voices heard.

Policy and legislation impacting disability in Ireland

The NDA posits that:

> a process of disability law and policy reform is already underway in Ireland. It is premised on the insight that people with disabilities are not problems – they have rights.

(National Disability Authority 2001, p.2)

The research topic, whilst not addressing policy issues as a main focus, nonetheless requires that they be alluded to as they are embedded in the everyday work of a disability officer. It is not required in this study to draw, in any detail, on each report in relation to disability during the lifetime of the State. To facilitate the presentation of information, as background to the study, the appropriate reports and legislation are dealt with in as chronologically an order as possible commencing with legislative and policy issues from 1984.[31] This is to facilitate a path to where this research commences in relation to the policy and legislation aspects of disability issues in contemporary Ireland (See Appendix L).

In attending to disability legislation and policy issues it is pertinent to flag the legislation that governs third level education in Ireland at the present time:

- Employment Equality Act (1998)
- Equal Status Act (2000)
- Equality Act (2004)
- Employment Equality Act (1998-2004)
- Equal Status Act (2000-2004) (the combination of Acts 2000 and 2004)

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[31] The mid 1980's saw the emergence of the disability officer role as a permanent full-time one in Ireland. The chronology of policy and legislation is therefore, picked up from that time to date.

- Disability Act (2005)

The Employment Equality Act (1998-2004) allows that registered students attending third level educational institutions have the status of employees. This Act also relates to vocational training (S.12). Courses such as medicine, nursing and engineering are examples of vocational training courses to which the Act applies. This has implications for students at third level colleges and by extension disability officers who work with them (Quinlivan 2008).

Both the Equal Status Act (2000-2004) and the Employment Equality Act (1998-2004) are implicated in the provision of reasonable accommodations for students in third level settings. Failing to reasonably accommodate a student with a disability constitutes discrimination (Quinlivan 2008). In order to avoid discrimination claims, the college must undertake (the disability officer assesses and provides), all that is reasonable to accommodate the needs of a person with a disability by;

> providing special treatment or facilities, if without such special treatment or facilities it would be impossible or unduly difficult for the person to avail himself or herself of the service.

> (Equal Status Act 2000-2004, S.4)

An example of such special treatment or facility is note-taking provision for students who have writing difficulties. Accommodations must be assessed for[32], if not legal outcome is a distinct possibility (Quinlivan 2008). As the disability officer holds the responsibility for needs assessment and the provision of supports for students with disabilities, at a minimum a basic knowledge of the appropriate legislation is needed by her/him. From time to time legal consultation may be a requirement and the disability officer needs to have knowledge of who the appropriate consultants are in specific legal fields. Therefore, this legislation impacts in a major way on the everyday work of a disability officer. In addition, Common Law Principles in relation to duty of care need to be heeded by

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[32] Needs assessing as a major function of the disability officer role is described fully in the Ethnographic Analysis and Understanding Chapter.

disability officers. Where a disability is not disclosed by a student, but the disability officer is aware that the student is disabled, duty of care applies. It is, then, against this backdrop of legislation and policy that the role of disability officer is played out.

The disability officer post in the setting under study was created in 2001. Since the new role of disability officer was not well understood at the time, nor is it well understood at present, the aim of this study is to come to an understanding of the role. The study is primarily located in the College in which the ethnographer is employed as the disability officer. To introduce the reader to the College a short description follows.

The geographic location in which the study was undertaken
The study took place in a large third level college in Ireland. Student facilities are excellent and with a high number of students and staff, the location at the time of the study was busy and vibrant. The disability office, situated on the main campus, registered 58 students with disabilities in 2001. In the academic year that the research data were gathered (2004-2005) there were 160 students registered.[33]

The disability office is the location where, most frequently, students and disability officer meet. The exceptions are times when prospective parents and students meet me for the first time (usually prior to entry). They are met in the Board Room and are welcomed with refreshments. The Board Room is totally accessible, as is the campus in general, and this, together with an informal approach helps give an ease and sense of relaxation to such meetings at a time when parents and students are often anxious.

The location of the study, an educational institution, boasts excellent facilities and a high level of comfort. To expand further on the background to the study my personal framework for the study is provided next. This is followed by an outline of the role and function of the disability officer.

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[33] See Appendix B which shows comparative student numbers for 2001-2002, the year of the disability officer appointment and 2004-2005, the year in which the research was undertaken.

Personal framework for the study

If asked to describe myself in one word I would to date, have described myself predominantly as caring, activated by giving - of myself.   The eldest of four children, one of my earliest memories in relation to caring is that it usually involves some kind of giving of self.   I understood that there could be a spiritual value to caring, where an underlying factor in the caring was selfless and loving. With my young life centred on this principle it was inevitable that the caring and helping professions appealed to me. Working initially as a Montessori teacher, I worked with young children with intellectual disability. I found this work most satisfying and believe I was good at it.

My older daughter has a mobility disability, as an outcome of Juvenile Arthritis. It is sufficient to record here that her journey through life to date has been arduous with much learned on the way. I was further inculcated in the arena of disability, when in 1993 I had a road traffic accident.   Though not severely injured I was left with some residual damage, though hidden, it sometimes leaves me in discomfort. This is my claim as researcher to 'marginal native' status. Experience of disability has, of course, added to my store of knowledge which I consider to be valuable. It goes a little in conferring on me what Weber (1946) called 'verstehen' – being able to empathise with, or think like the people that are being studied. It was then, from that place in my life that I took on the role of disability officer. I feel I bring to it an understanding of the 'back stage' aspects of disability, not just the 'front stage' elements (Goffman 1959).

The insights I have offered into the person I am and where I have come from, amounts to the person I brought to the 'field' as ethnographer.   The fieldwork chapter offers further glimpses of me - as ethnographer in the field.   In further chapters I allow myself, as author, to be seen again and again, frequently in conjunction with students with disabilities as informants, our voices heard clearly, often in unison, our task to understand the everyday work of a disability officer.

Role and function of the disability officer in Ireland

The Disability Advisors Working Network (DAWN 2002) document, '*Role and Function of Disability Service Coordinators'*, addresses the issue of role title, naming those of disability officer, access officer, disability liaison officer, disability service co-ordinator and head of disability service, demonstrating the diverse range of titles used in Irish higher education settings.   In the Irish experience, where the disability officer is situated in the college hierarchy, leads to differing levels of service delivery and policy direction. The disability officer, according to the document, is usually a sole operative, with the issue being one of possible isolation in the role.   Four areas are outlined as the key functions of a disability officer in the Irish setting.   They are named as: provision of individual support, community education and networking, public relations and systemic advocacy/policy development and monitoring.   These are not necessarily competing functions in a conceptual sense, but in the discharge of these functions there is an inevitable competition for the finite time of the disability officer.   This creates problems in the role.   Some matters present themselves as urgent, particularly those brought to the attention of the disability officer by a student in need of support. Hence the analogy of the 'fire fighter' is often used in this function.   Some locations require the provision of more than one disability officer and this is reflected in Recommendation (No. 42) of *The Report of the Action Group on Access to Third Level Education (2001),* which says that all third level institutions should have at least *one*[34] disability officer in a permanent position.   Progress to date does need to be acknowledged.   DAWN, AHEAD, HEA are making a concerted effort to have full time disability officers in place in higher education in Ireland.

Short history of the group under study – students with disabilities in third level education

According to the National Disability Authority (2002, p.1) only a partial picture of the prevalence and impact of disability in Ireland is currently available. However, AHEAD (2007) estimates that approximately 10% of the Irish population have a disability.

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[34] Italics – mine - to emphasise the point that large educational third level establishments may need more than one disability officer to meet their remit around supporting students with disabilities.

Figures relating to higher education suggest that the number of undergraduates with disabilities has risen dramatically from 440 (less than 1%) in 1994 to 2,670 in 2005/06 (or 2.7% of the undergraduate population) and to 3,327 in 2006/07 (or 3.8%) (AHEAD 2007). Despite this growth in numbers, students with disabilities are more likely to leave school earlier than their non-disabled peers. This pattern of leaving school early has an impact on the participation and representation of students with disabilities at third level - 46% of people with disabilities left primary school compared with 18% of the overall population (NDA 2005, p.6). Participation in Higher Education is generally achieved following successful completion of second level education[35]. Higher Education is also an investment in every individual student's future (National Disability Authority 2005, p.1).

'The folk' in this study, had all successfully found their way through to third level education at the time of the research; they were following diverse courses. All were registered with the disability office at the time of the study.[36] Student ages ranged from 18 years old to 65 years old at the time of the data collection.

Conclusion

This chapter provides context to the study by providing an historical overview of aspects of disability, including models of disability. It is clear that there has been a journey to the reform of disability law/policy with the requirement that the disability officer has knowledge of such. The chapter draws attention to the inclusion of students' voices and my role as ethnographer is acknowledged. To situate the study further the next chapter reviews the literature in the areas of disability definition/concepts, models, legal/policy issues and the role of the disability officer.

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[35] Third level education in Ireland can also be accessed by mature students who have neither undertaken nor completed second level education. A number of access programmes exist also to allow for direct entry to third level institutions for persons from non-traditional groups, which includes people with disability.
[36] Registration with the disability office requires that appropriate medical evidence be produced from appropriate consultants where the disability is physical, sensory, mental health or chronic illness, or a copy of a psycho-educational assessment has to be provided (undertaken within the previous 5 years) in the cases of dyslexic students.

CHAPTER 2

Literature Review

Introduction

This literature review is provided to act as a backdrop from which to define and defend the research topic, while providing a context for the research. This is achieved by positioning the research topic within the bigger picture of disability thus demonstrating the requirement for, and the usefulness of this research study. As ethnographic method poses no hypothesis or research question this literature review is built by following a thematic trail, by addressing definitions, concepts and models of disability, legal and policy issues. The chapter also examines literature found pertinent to the disability officer role.

The literature review was undertaken using reputable sources; thus, to this purpose, academic and professional journal articles and books were searched, as were web-based sources.[37] Conference proceedings and personal communications were included also. The use of a critical perspective was employed to ensure that literature was reliable, by checking the author's credentials and publication accreditations. That information was up-to-date and not out-dated was important, acknowledging that some authors, no matter how long ago they wrote, have made on-going valuable contributions to the areas under review, e.g. Foucault (1995), Oliver (1990), Goffman (1959), etc. Original works were read for information and contextualization. The issue of bias in the literature read was defined as addressing the issue from all viewpoints, that the material be varied, not narrow or unbalanced.

Defining the areas for discussion in the literature review

The research issue driving the literature review is an understanding of the reality of the work undertaken by the disability officer, in a third level institution, in an Irish setting. Thus a major purpose of the literature review is to locate literature which examines the

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[37] The sources searched were listed in the previous chapter Background to the Study in speaking of the disability officer role.

everyday work of a disability officer, to describe the visible and the invisible processes of the everyday. In this undertaking the objectives of the study are also addressed in the literature review. As the main focus of the topic is that of disability, to begin the literature review with its definition/concept is pertinent. Decisions in relation to the definitions offered were reached by choosing those with most to offer in relation to the area being researched.

Definitions and concepts of disability

Wright and Randall (1975) state:

> Starting with definition is a rule which must be followed in the application of scientific method…The rule also applies, or should apply to those studies which comprise the social sciences.

> (Wright & Randall, 1975 p.1)

In reading through the literature to identify definitions of disability, it was evident that it depends very much on whom the commentator or author is and the purpose for which the definition of disability is required. Watson (2006 p.302) in reviewing *Disability: Definitions, Values and Identity* states that the "definition of disability is an endlessly fascinating subject to anyone interested in the study of disability." He adds:

> Hardly a month goes by without the publication of another text that seeks to define the problem. Much of the debate and conflict, for this is a very contested subject area, centres on the role of impairment and/or role of the body, and how it is viewed and theorised.
> (Watson 2006, p.302)

Watson's claim that there is on-going effort to define disability was borne out in the search around definition of disability. While a plethora of information around definition was found, much was 'recycled' – similar definitions ranged over the literature. This made it difficult to locate where a shift in emphasis occurred or to identify authors and commentators who had made significant contributions to the area of definition only. Often, the issue of definition was bound up with other elements of disability – definition of disability rarely stood clearly and alone. This contrasts with the issue of searches around other areas, for example, models of disability, where it quickly became apparent

that Michael Oliver had made a major contribution and this was confirmed by other authors, e.g. Terzi (2004) who opined that Michael Oliver had been a fundamental contributor by his theorizing of the social model of disability.

Definition and concepts of disability were found to be dependent on the particular area of interest of the author. Daly (2001 p.3)[38] focusing on impairment states that "the individual was impaired, not by his or her particular trait, but because her [sic] or she had been impaired from normal functioning by the constructed environment."

Toolan (2003 p.173)[39] offers a view where disability has been defined by filmmakers and he uses particular words to demonstrate this – disabled people defined as "buffoon, idiot, deviant, rarely real and always 'other'." No interpretation of the words Toolan applies is needed to explain that the words evoke a negative definition of disability. Berubé (1998)[40] posits that the definition of disability, like the definition of illness, is inevitably a matter of social debate and social construction. Linton (1998 p.1)[41] suggests that when examining human issues such as race, culture, sexual orientation, etc., disability is perhaps, the most unstable designation of them all. Berubé (1998) states that:

> Disability is the most labile and pliable of categories; it names thousands of conditions and varieties of impairment, from the slight to the severe, from imperceptible physical incapacity to inexplicable developmental delay.
>
> (Berubé 1998, Foreword to Linton, 1998)

In taking the thinking around 'definition of disability' a step further, Oliver and Sapey (1999) in citing Brechin and Liddiard (1981) point out that there may be as many as twenty-three different professionals involved with a disabled individual. They believe that they do not all use different definitions. They cite as useful Townsend's (1979) five broad categories: abnormality or loss, clinical condition, functional limitation, deviance

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[38] Daly espouses an interest in technologies and the environment.
[39] Toolan writes in this instance under his own description of 'activist'.
[40] Berubé describes himself as a scholar for the purposes for this extract.
[41] Linton adds a description of herself as a disabled subject.

and disadvantage (see Table 1). They concede that the definitions "are developed for specific purposes or situations ..." (p.35).

Table 1. Townsend's (1979) Five Broad Categories of Disability
(Cited in Oliver and Sapey, 1999)

Abnormality or Loss	May be anatomical, physical or psychological loss; it may refer to loss of a limb, part of the nervous system or of a sense of modality (e.g. deafness of blindness).
Clinical Condition	This refers to illness or diseases, which alter or disrupt physical or psychological processes e.g. arthritis, epilepsy, and schizophrenia.
Functional Limitations of Everyday Activities.	Inability, or at least restricted ability, to perform normal, personal or social tasks such as washing, dressing or shopping.
Disability as Deviance	Seeing disability as deviation from particular norms, the problem arises in specifying what those norms are and who specifies them.
Disability as Disadvantage	Refers to the allocation of resources and in the case of disabled people they often receive less that their able-bodied counterparts.

The category of disability as disadvantage broadens the concept of disability considerably, for it is not just those with physical impairments who are socially handicapped – so are illiterates, alcoholics, and one-parent families plus, perhaps, ethnic minorities and women. Gill (1994) examines the discourse on what it means when people say they are disabled but society does not define them as such, e.g. alcoholism, chronic fatigue, compulsive disorders, conditions that seem too insignificant or too voluntary to be real disabilities. Borderline conditions; possessing eyeglasses, a limp, the losses of aging - hearing and sight, have to be considered. Most people downplay these out of embarrassment or fear of social devaluation. It supports the argument (for some) of a 'continuum of disability'. It is used by others as their ticket to, for example, a parking space or priority treatment. Gill (1994 p.61) argues that the 'critical issue' in relation to disability is the affect on "life functioning … if it's disability enough to affect your life, it's also potentially visible." She argues that 'real disability' exists when society labels and marginalises the person, when the difference shows.

The definition of disability is broadened also when the inclusion of employability is found in defining a person with disability. Finkelstein and Stuart (1996) citing Gaff call attention to the definition used by a Convention of the International Labour Organisation which stated that

> … for the purposes of this Convention, the term 'disabled person' means an individual whose prospects of securing, retaining, and advancing in suitable employment are substantially reduced as a result of a duly recognised physical or mental impairment.
>
> (Gaff 1994, cited in Oliver and Sapey 1999, p.69)

Oliver and Sapey (1999 p.37) sum up the difficulty relating to the definition of disability when they state: "Thus there are a number of definitions of disability, none of which presents the whole picture or is the right answer ..." In looking to the international stage for input around definition of disability Oliver and Sapey (1999) offer the definition held by the World Health Organization (WHO).[42] The WHO defines disability from the perspectives of impairment, disability and handicap.

Table 2. World Health Orgnisation: Definition of Disability from the Perspectives of Impairment, Disability and Handicap (cited in Oliver and Sapey 1999 pp. 38-39).

Impairment:	"Any loss or abnormality of psychological, physiological or anatomical structure or function." Here we are dealing with parts or systems of the body that do not work.
Disability:	"Any restriction or lack of ability to perform an activity in the manner or within the range considered normal for a human being." Here we are talking about things people cannot do.
Handicap:	"A disadvantage for a given individual, resulting from an impairment or disability that limits or prevents the fulfilment of a role (depending on age, sex and social and cultural factors) for that individual." This is in relation to a particular environment and relationships with other people.

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[42] Imrie (2004) in reviewing the World Health Organisation's International Classification of Functioning (ICF) points out that theoretical claims and debates around the nature of disability are characterised mainly by perspectives that consist of mind, body and spirit as separate areas of human existence.

Social theory and re-definition of disability

Oliver (1990) refers to the UPIAS 'twofold classification' in his work to develop a social theory of disability. A social theory of disability, he suggests, must be located within the experience of disabled people themselves and their attempts to not only *re-define disability* but also to develop services commensurate with their own self-defined needs.

The Irish Foster Care Association in their defining of disability state:

> The term disabled is preferred to 'special' needs or 'handicapped' because it is the one being used by disabled people themselves within the Disability Movement. Just as 'black' was once a negative term, and was reclaimed by black people as a political identity, and a description of which to be proud, *disabled has been redefined[43]* in the same way.
>
> (Irish Foster Care Association, 1999 p.23)

Oliver claims the process of *re-definition* has already begun by disabled people who have dispensed with the intricacies and complexities of several definitions and instead propose the following two-fold classification:

> *Impairment* lacking part or all of a limb, or having a defective limb, organism or mechanism of the body;
>
> *Disability* the disadvantage or restriction of activity caused by a contemporary social organisation which takes no or little account of people who have physical impairments and thus excludes them from the mainstream of social activities.
>
> (UPIAS, 1976 pp. 3-4, cited in Oliver, 1990 p.11).

Oliver (1990) holds that "the above definition locates the causes of disability squarely within society and social organisation" p.11. It is clear from this statement that Oliver subscribes to the social model of disability. McDonnell (2003) says that "in educational

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[43] Italics – mine to draw attention to the Irish Foster Care Association's acknowledgement of the re-definition of disability in line with Oliver's claim of re-definition also.

discourse 'disability' is often taken to refer to a particular individual, intellectual or physical 'condition'."   McDonnell 2003, in relation to the UPIAS definition states:

> …disability constitutes a form of exclusion not only in relation to the physical environment but also in relation to social structures such as the economy, the legal system, health services, and of course, the educational system.
>
> (McDonnell 2003, p.28)

McDonnell (2003) speaks of the educational system, which is of particular interest to this study. In Ireland the Report of the Committee on Access and Participation of Students with Disabilities in Higher Education 1994, proposed a definition of disability[44] stating:

> A student is disabled if he/she requires a facility which is outside of the mainstream of the college in order to participate fully in Higher Education and without which the student would be educationally disadvantaged in comparison with their peers.
>
> (Report of the Committee on Access and Participation of Students with Disabilities in Higher Education 1994)

Various and multiple definitions and concepts of disability abound and much depends on where the search is focused as to content. It is clear medical definitions are to the fore with content leaning towards impairment and physical/sensory aspects of the individual. The informants in this study comply with a range of definitions of disability but they are not of consequence in this study. That the students are students with disabilities is the only concern of the research and that they are registered as such and supported is the main interest of the researcher.

Definition of disability in Irish third level educational settings[45]

In October 2005 discussions were initiated to reach a definition of disability for the purpose of data collection and funding within the third level education sector. Parties to the discussion were the HEA through the National Office for Equity of Access to Third

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[44] As will be seen in the next section this definition plays a major part in the now accepted definition of disability for the purpose of data collection and funding in third level educational institutions in Ireland.

[45] In reviewing the definition of disability in an Irish third level education context, it is important to outline the process by which the now accepted definition was reached.

Level Education (NAO), DAWN, AHEAD and representation from Access Officers.[46] Importance was attached to the fact that the definition should not be one based on a strictly medical model as the inclusion of learners with disabilities is not entirely linked to delivering services based on a student's 'impairment' but on addressing the social and cultural barriers faced by people with disabilities within the life of the college.[47]

Written submissions were made to the NAO by DAWN and AHEAD.[48] The equality legislation was to be the cornerstone of any agreed definition. The Equal Status Act, (2000-2004), the Employment Equality Act, (1998-2004), Education for Persons with Special Educational Needs Act, (2004) and the Disability Act, (2005) were the relevant pieces of legislation. The Equal Status Act (2000-2004) speaks of a medical definition of disability as does the Disability Act (2005). The Disability Act (2005) points to substantial restriction. Substantial restriction under the Act means a restriction which is permanent or likely to be permanent resulting in a "significant difficulty in communication, learning or mobility and gives rise for services to be provided to the person continually" (Disability Act 2005 Section 6). The Disability Act (2005) and the Education for Persons with Special Educational Needs Act (2004) refer to enduring conditions. Students with substantial and enduring restrictions, e.g. students who are quadriplegic, have graduated from third level courses. Substantial or enduring conditions need not prevent the participation of students with disabilities in third level education. Provisions of reasonable accommodations support the student in the educational environment.

The Equal Status Act (2000-2004), which applies to all higher education institutions, both public and private, defines disability by the use of medical terms.[49] The Act refers to the absence of a person's bodily or mental functions, including the absence of part of a

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[46] A number of Access Officers carry the disability remit in locations where there is no designated disability officer.
[47] See Appendix D for DAWN statement in relation to definition of disability.
[48] See Appendix C for submission made by AHEAD in relation to definition of disability.
[49] The Act (S.4) does state that all that is reasonable to accommodate the needs of a person with a disability by the provision of special treatment or facilities must be undertaken by the establishment if without such accommodation it would be impossible for the person to avail of the service provided by the educational establishment.

person's body, or the malfunction, malformation or disfigurement of a person's body, in other words - impairments. Chronic disease or illness is addressed by stating that organisms in the body likely to cause such outcomes be taken account of for definition purposes, allowing for disease and chronic illness to be defined as disability. Disability such as dyslexia is dealt with by acknowledging a condition or malfunction which results in a person learning differently from a person without such condition or malfunction. Mental health disabilities and their outcomes are included with a description of such disabilities as a condition, illness or disease which affects a person's thought processes, perception of reality, emotions or judgment or which results in disturbed behaviour. Such conditions, illness or disease includes a disability which exists at present, or which previously existed but no longer exists, or which may exist in the future or which is imputed to a person (Equal Status Act 2000-2004).

It is clear that the definition in the equality legislation is a medical definition, based on the medical model of disability, although there is no reference to specific diseases or impairments. In attending to the brief that a medical definition only was not desirable it appeared that a middle course could be steered by adopting the equality legislation, together with the inclusion of content from the Report of the Committee on Access and Participation of Students with Disabilities in Higher Education 1994 (definition given earlier in this section). In this way the social model was introduced into the deliberations. Addressing the issue of facilities in the location recognises that disability is socially constructed. That it is not lack of ability that is underpinning the under-representation of people with disabilities in third level education but rather the consequences of attitudinal and environmental barriers was acknowledged in the Report by the Committee on Access and Participation of Students with Disabilities in Higher Education 1994.

Having taken cognizance of reports, legal requirements and inputs from all parties concerned the definition contained in the Equal Status Acts (2000-2004) together with the content from the Report to the Higher Education Authority of the Committee on Access and Participation of Students with Disabilities in Higher Education 1994 was the agreed

definition[50]. Thus, the agreed definition of disability for the purposes of data collection and funding in higher education is based on a socially based model of disability, which also draws on equality legislation.

The model of disability to which disability officers subscribe is the social model, though the provision of evidence of disability[51] still remains rooted in the medical model. The social model is implemented by way of provision of reasonable accommodations which support students during their course of study, thus allowing access both to environment and course content. The models of disability that impact the work of a disability officer are the medical and social models in particular. These are the models that are examined in this review of the literature.[52]

Models of disability[53]

A search of one particular database, Blackwell Synergy, under the heading 'models of disability' yielded over nineteen thousand results. A quick search through these showed that the 'model' presented most frequently was the 'social model'. Reference to it ranged across the nursing, occupational therapy, medical, sociological, health, social science, political and policy literature. An article in the *Journal of Computer-Mediated Communication* was unexpected (Thoreau, 2006). This section addresses models of disability, outlining those currently in vogue.

Medical model

Pfeiffer (1996, p.157) starts from the view that those who perceive people with disabilities as "helpless, pitiful, charity cases in need of their selfless aid", and who consider that people with disabilities have some deficiency that is a burden, contribute to the medical model of disability. Pfeiffer states that Oliver (1995) rejects the medical

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[50] See Appendix D for further elaboration on the definition of disability as agreed.
[51] Evidence of disability as required to be submitted by students is addressed earlier in this chapter.
[51] The charitable model is detailed in the chapter - Background to the Study.
[52] The social/rights model is dealt with in the section on social movements in Chapter 1.
[53] The charitable model is detailed in the chapter - Background to the Study. The medical and social models are addressed in this chapter as the models currently most prevalent in higher education settings.

model which blames the victim. According to Kriegsman and Dorly (1999) the medically informed 'personal tragedy' approach naturalises impairment and disability.

Both Pfeiffer and Oliver are wheelchair users and always will be; there is nothing health care professionals can do to make them "normal" Pfeiffer (1996 p.157) states. They conceive of themselves as "different, but normal." Imrie (2004 p.287) suggests that the medical perception of disability "relies on a naturalistic conception of disability, that biology is at the root of impairment that, in turn, causes disability." He goes on to explain that for some "biomedicine is problematical for labelling disabled people with inappropriate, medical categories such a spina bifida and tetraplegic" and citing Brissenden (1986 p.21) notes that these labels "are nothing more than terminological rubbish into which all the important things about us as people get thrown away." Mulvany (2000) says that a number of disability theorists (Hughes and Paterson 1997, Crow 1996, French 1996, Shakespeare and Watson 1995) argue that to ignore impairments is to ignore the 'reality' of the lived experiences of people with disabilities. French (1996) says that the effects of pain, physical restrictions, loss of function and exhaustion can be as frustrating as abuse, stigma, ridicule and discrimination.

Thomas (1999), having lost a hand, says it constitutes impairment and does not cause disability. She states that people in power decide that due to the lack of a hand and being unable to carry out such tasks as hold a saucepan/spoon that she cannot be a care worker. The disability here, she claims, is in the denial of rights or refusal to assist in overcoming functional limitations, for example doing things in an unconventional way or not helping her to access instruments and technologies which would compensate for not being able to hold things normally. Thomas refers to herself as having 'impairment effects' not strictly disability. While referring to impairment, she ascribes to the social model when she speaks of being denied access to instruments and technologies which would offer her the possibility to engage in an occupation she desires.

These theorists call for an analysis of impairment to be included in any approach taken to disability. French (1996) points to four factors that play a key role in shaping a person's

experience of impairment: the point of life in which the impairment is acquired, the relative visibility of the impairment, the comprehensibility of the impairment to others, and the presence or absence of illness. Adjustment of the individual will depend on the above factors, bringing psychological factors into the equation also.

Psychological factors

Psychological elements cannot be overlooked in any exploration of the literature on disability. There is a huge literature in social psychology and psychiatry around the psychological problems faced by disabled people (Carter et al. 1999, Hentinen and Kyngas 1997, Ransom and Fisher 1995, Rettig and Athreya 1991, Eiser 1990, Hayes and Knox 1984). These authors refer to psychological sequelae, not only in relation to the individual but also to their families.

Illness and Injury

Kriegsman and Dorly (1999 p.388) say that "disability is indeed caused mainly by chronic diseases, both in the working age and in the elderly population" suggesting some support for the medical model. They go on to point out that a higher number of chronic diseases are consistently associated with a higher prevalence of disability and longitudinally with a higher incidence of disability. Tepper et al. (1997, p.556) focus on 'levels of disability' stating that a higher prevalence of disability is to be found in the elderly population – that due to the aging process we are all likely to be disabled. In the United States 35% of all persons with chronic conditions report a form of activity limitation. In the working age population, apart from chronic diseases, injuries are the leading cause of disability. Bury (1996) understands disability to mean a lack of ability to perform activities stating that there are approximately one hundred and twenty chronic illnesses that are the major cause of disability, e.g., arthritis.

The Social Model[54]

Marks (1997 p.85) gives a clear statement that "disability is the result of the interaction between environmental and social demands on the one hand, and the individual's capacities to satisfy those demands on the other" suggesting a leaning towards the social model. It is not unexpected to find that Oliver (1996) says that disability is caused wholly by social barriers, claiming that medical testing in the form of occupational therapy measures normal ranges for human beings. He claims there is no such universal measure – there is no norm of human structure, function or physical ability in the sense that activities that are the 'norm' in one society may not be in another; it is socially relative. An example would be foot binding in Japan. Gill (1994 p.61) agrees with activists who believe that 'disability is mostly a social distinction' – one that is triggered by some physical/sensory/mental/functional/cosmetic difference.

A move away from the medical model to the social model is seen in the supercedence of the International Classification of Functioning ICF (2001) over the 1980 original classification, the International Classification of Impairments, Disabilities, and Handicap (ICIDH). The tenor of the ICIDH was a medical one, which focused on the limitations of peoples' abilities. The ICF (2001) moves more in the direction of the social model by including reference to societal roles. Bickenbach et al. (1999) says that the ICF (2001) conceives that individual and social elements are integral to the phenomenon of disability.

Disability as process

Tepper et al. (1997) recognise that there are differing levels of disability. They hold that contrary to how it is usually treated in research and policy planning, disability is not necessarily a steady state, but a dynamic process. Verbrugge (1994 p.390) also supports the stand in relation to different levels of disability and suggests that the measurement of disability should be undertaken in such a way that levels of severity can be distinguished and that the use of equipment or personal assistance which reduces the disability should

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[54] The Social Model is dealt with more fully in the section on social movements – see chapter on Background to the Study.

be taken into account. The measurement of disability post the application of supports is obviously what is being promoted by Verbrugge (1994).

This approach could have implications for the disability officer's work with such measurement of disability being applied post the implementation of supports for students with disabilities. Disability officers, when carrying out needs assessments, take into consideration the impact of disability in relation to the undertaking of the particular course chosen by the student – the barriers are addressed and eliminated where possible (the social model).

Disability Officer Role

The title given to those in the role of disability officer differs, even in an Irish context, depending on which location or institution is being referred to.[55] The searches of the literature used all titles found and added that of disability advisor, prevalent in the United Kingdom.   These searches yielded results most often in the areas of educational establishment web sites, e.g., Universities, Institutes of Technology.   During these searches it became apparent that the title of disability liaison officer or disability officer/ adviser/advisor (both spellings were found) was the one used in Australia which reflects the titles used in the United Kingdom.

There is a dearth of literature relating to the role of disability officers.   However, if looked at from the perspective of beginning work in a particular area, then this study might be considered as a starting point in addressing the role of the disability officer in an Irish higher education setting.

One particular published work referred to the role of disability officers in Ireland in the context of education at third level in Ireland. This was a report on a survey carried out by AHEAD.   Disability officers and Access Officers in the Institutes of Technology contributed to the research in completing survey questionnaires. Of the 14 Institutes

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[55] Examples of titles found were: disability officer, disability liaison officer, disability coordinator, disability officer and coordinator.

surveyed all, with one exception, specified that there is a need to employ designated disability officers in the Institutes of Technology (AHEAD 2006 p.35).

Designated title: disability officer

No data were found relating to the work of disability officers per se and again only information relating to their existence in educational third level establishments was available. In searching the Irish literature the most relevant information was found in a document compiled by the Disability Advisors Working Network (DAWN) in 2002 entitled *Role and Function of Disability Service Co-ordinators*. The document outlines and explains the role of disability officers in Ireland. It is also the basis on which the role of this researcher rests.[56]

McCabe (2001) in a UK study entitled *Disability Officers in Higher Education* comes closest to addressing the role of the disability officer. Descriptions of the role used in the study help to contextualise this research study. McCabe acknowledges the consistencies and variations that abide in relation to the role of disability officers as experienced in the group she studied, using questionnaires with both quantitative and qualitative questions. The title 'disability officer' is attributed to the person with responsibility for the assessing and delivery of supports to students with disabilities. The delivery of such supports can be through third parties/services and may, in some instances, include guidance and advice.

Titles in relation to the role varied across the study, with the term 'adviser' seen as the least authoritarian, with 'coordinator' next and 'officer' seen as the most pro-active or hands on. The grade at which the post was held varied hugely as did salary levels and full-time/part-time status, with the vast majority of the disability officers located in Student Services. McCabe suggests that these elements probably reflect the confusion that some disability officers reported feeling about their status and responsibilities. McCabe's survey asked the participants to indicate, by marking a list of responsibilities, which responsibilities they held as part of their role as a disability officer. McCabe (2001

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[56] See Appendix A – DAWN document on Role and Function of Disability Officers.

p.22) holds that the items ticked by more than 85% of the respondents "could be taken as a blueprint for the typical mainstream disability officer duties." The duties agreed on were: advising academic staff, advising students with disabilities, delivering disability awareness training, developing institutional disability policy, keeping abreast of government legislation on disability, liaising with admissions tutors, liaising with disability organisations, liaising with other higher education institutions, managing a budget, publicising the disability service, producing information on disability issues for staff, producing information on disability issues for students. McCabe considers these results to be valuable as they contribute to the central issue of what constitutes the core role of the mainstream disability officer.

McCabe's study not only breaks down the list of duties but also addresses the feedback provided by individual disability officers about the main duties of their role. These were mainly under four headings: management, casework with students, technical, and special services. Respondents were asked to outline the person specification required for the role/post of disability officer. The Irish document does not address this aspect, concentrating on the elements of the role rather than the incumbent. The responses were overwhelmingly for graduate level of education and occasionally a professional qualification such as psychology or social work. Specialist knowledge covered diverse areas, for example, familiarity with higher education, grants, benefits, legislation, equal opportunities, disabilities and the issues they raise, local communities, dealing with the public, counselling, information searching, learning difficulties, managing change and finally technology and the Internet. McCabe (2001 p.24) in addressing the role of disability officer states that "it is fair to suggest that the role of disability officer as currently perceived by higher education is not one but several, rolled into one person."

Definitions and variations in the role of disability officer
Based on McCabe's survey results she says that it is clear that the number of job titles shows that there is still uncertainty about the role and its authority in the eyes of senior management, which concurs with the Irish document where several titles are also

attributed to the role. Disability officers' responsibilities cover a wide range of duties common to 85% percent of the respondents, with a smaller set clearly associated with service management, e.g., liaising with funding bodies, providing support services, purchasing equipment, managing a budget and reporting to senior management. McCabe suggests, based on survey results, that the role of a disability officer is isolated with over half of respondents stating that they were the only disability officer in their institution.

McCabe's recommendations include one that would see higher education institutions reducing the variety of roles currently placed on individual disability officers and creating a team of disability officers working within an Office for Students with Disabilities (OSD) supported by administrative and technical staff. Clarification and standardisation of the disability officer's role in terms of status, salary, etc. would be addressed also according to McCabe's recommendations. The creation of appropriate courses and qualifications to meet the professional needs of disability officers is also recommended together with supporting and encouraging networks between disability officers to reduce isolation.

In an Irish context, The Report of the Action Group on Access to Third Level Education (2001) speaks of the disability officer in stating:

> The Action Group recognises the central role of Disability Officers in co-ordinating institutional responses to disability. The appointment of Disability Officers also highlights the central role of the post in developing and implementing institutional policy and practice in the area of disability, as do the recommendations in a number of submissions to the Action Group for the appointment of additional Disability Officers.

> (Report of the Action Group on Access to
> Third Level Education 2001, 3.11)

The Action Group statement speaks of the disability officer role as one of co-ordinating institutional responses to disability, clearly allocating responsibility for policy and practice to the role. This suggests that the role is primarily a pragmatic one, as

responding to disability translates into the provision of reasonable accommodations within the institution setting. The allocation of responsibility for policy and practice might be construed as endowing a level of authority on the holder of the post and an expectation that particular levels of education and experience have been achieved.

Appreciation of and need for the role of disability officer is pointed to by the Action Group in its acknowledgement that submissions to the Group called for the appointment of additional disability officers. The Group, in Recommendation No. 42 (p.74) of its Report states: "The Action Group recommends that each university and institute of technology have a minimum of one full-time permanent post of Disability Officer" adding that students with a disability need full access and participation in areas such as admissions, examinations, career advisory services, information technology, library services, etc. The Group concede that additional resources may be required to provide such supports.[57]

The Action Group have, it could be said, by listing areas where support is required by students with disabilities given a 'menu of supports' which the disability officer is responsible for offering and supplying. This, as the Action Group also state, is matched with responsibility for policy and practice in the institutional setting. The work content and responsibility of the role (as outlined by the Action Group) is spread wide across the institution. The perception of the role is paramount in the carrying out of the duties mentioned. In addressing the work content of the role it is relevant to attend to the issue of whether or not the role might be a professional one.

Disability officer role as a professional one
Hurst (2007), in a conference paper[58] addresses the issue of whether disability officers are, in fact, professionals in their own right, stating that professions have a specialised

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[57] Financial resources to meet the provision of supports are provided through the European Social Fund (ESF) which is allocated on an individual student basis. The funding is attracted by provision of a needs assessment which is undertaken (in most cases) by a disability officer. It is the disability officer who takes ultimate responsibility for the needs assessment in signing the declaration as to content, together with the student.
[58] See Appendix M for a copy of the conference paper.

body of knowledge that grows as a result of research and experience. He draws a positive comparison with other professions, for example, lawyers and doctors, in relation to the autonomy that disability officers appear to have, suggesting that they have a degree of freedom to exercise judgement in their work (p.3). In relation to a code of ethics, Hurst (2007) declares that disability officers will be bound by codes of ethics put in place in their institutions. Hurst states that there are indications that the work of a disability officer is valued and bears some social esteem, pointing to the fact that a number of disability officers have been awarded honours by the Queen of England. The role of disability officers is ascribed. However, how they undertake to deliver on their duties and responsibilities is their own decision and so they might achieve the status of a 'good' or an 'effective' disability officer. Hurst (2007 p.5) suggests that how the role is performed depends on the individual taking it on.

Discussion and Conclusion

It is clear from the literature reviewed, that disability officers in Ireland work within an equality framework from a legislative perspective and from a social model of disability. The path followed by which the definition of disability was agreed for use in higher education settings, along with addressing data collection and funding mechanisms was outlined. Disability policy in Ireland formed part of the literature review with emphasis on policy impinging on students with disability.

The search of the literature around the role of a disability officer proved difficult because of the scarcity of literature in the area. The documents reviewed are useful, in that they do address some of the core elements of the role. The question as to a concise definition of the role remains vexed, as no literature offered such a definition of the role. The literature in fact, pointed to the varied aspects of the role and the almost impossible task of gathering the elements of the role into one coherent description. The role veers from perspectives of it as a management role to one of individual student focus, with lack of time to undertake all aspects of the role standing out as an issue.

It appears from the literature review that when taking the skills required for the role and the profile of the incumbent into account, that a disability officer in most cases, can make what she/he wishes to make of the role. This can be from fulfilling the basic prescribed functions to being a disability officer worthy of public acclaim - as in the cases of those honoured by the Queen of England. That the role has scope to bring one's individual best to it is beyond doubt, based on the evidence of the literature searched.

McCabe's (2001) recommendation to reduce the variety of roles currently in place and create instead a team of disability officers working within an Office for Students with Disabilities supported by administrative and technical staff is appealing. Such an approach could lead to a more concise definition of the role of disability officers. Such definition, in its making, would address education/qualifications, skills, personal profiles and abilities required to undertake the work of a disability officer. This, together with standardisation (at least to some extent) of the role in terms of status, salary etc, would go a long way to valuing the role. The role carries with it, as was seen in the literature review, a workload that is broad in range and deep in its commitment when undertaken fully. The issue of isolation in the role, which for now is addressed somewhat by membership of the National Association of Disability Officers (NADO)[59] in the United Kingdom and DAWN in Ireland, would also be addressed in the model McCabe puts forward. It is not simply the issue of isolation in the work that promotes membership of these groups but collegiality at a minimum and true friendship and care at its best. Disability officers empathise with each other and can truly understand the difficulties and satisfactions of the role.

The scarcity of literature relating to the disability officer role is problematic. If an understanding of the role is to be reached, relevant literature needs to be available. This study begins some work in researching around the role, particularly in Ireland. The methodology used to elicit information to gain an understanding of the role in this research is ethnography. The methodology is dealt with in the next chapter.

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[59] National Association of Disability Officers (NADO) has recently been renamed as the National Association of Disability Practitioners to reflect a membership which now also includes practitioners other than disability officers, e.g. Needs Assessors (as a particular practitioner role).

CHAPTER 3

Methodology

Introduction

The dual purposes of research - to explain and predict (Treece and Treece 1982) - apply to the research needing to be undertaken regarding the work of a disability officer. No research to date explains the work and without explanation, the secondary purpose of prediction is not possible. The issue of how best to carry out such research proved problematic, as disability officers are engaged in working with vulnerable populations, i.e. students with disabilities. In addressing the aim and objectives as set out for the research, it was identified at the earliest planning stages that the inclusion of the student voice was vital. Whatever methodology was chosen, it needed to allow for what Ellis and Bochner (1996 p.18) refer to as 'marginal voices'. This chapter addresses the methodology. In doing so, it gives the background to the choice of methodology, the reasons for choosing it and a short historical outline of the chosen methodology. The method used to undertake the analysis is dealt with in this chapter. Ethical considerations are also presented.

Research Statement (Aim)

To develop an understanding the reality of the work undertaken by the disability officer in relation to student support in a third level education institution in Ireland.

Objectives set out to meet the aim of the research

1. Examine the everyday work of a disability officer

2. Describe the visible and invisible processes of the everyday

3. Include the student voice and the disability officer voice

4. Use a reflective practice approach to serve as a 'method of enquiry' that allows for a way of finding out about self as well as the research topic

Background to choice of methodology

The choice of methodology proved difficult, for a number of reasons. Quantitative approaches, e.g. questionnaires, surveys etc., have a value in yielding quantitative (measurable) data that might offer opportunities to understand the everyday and the visible elements of the work (both objectives of the research); they do not, however, go far enough to give the rich data required to understand the 'invisible', those individual instances and moments which illuminate the bigger issues in the work process.

Initially, it seemed that an Action Research (AR) or a Participatory Action Research (PAR) methodology would be most suitable. Thomas (2000) points out that PAR takes place in the 'real world' and therefore it starts from the issues and problems that are raised in society, rather than from a research hypothesis. The PAR process involves all 'stakeholders'. The approach has value when considering widening participation initiatives. There is a "research relationship in which those involved are participants in the change process" (Hart & Bond, 1998 p.5).[60] Gibbon (2002 p.547) describes PAR as "a process whereby the participatory researcher is able to help develop a research capacity in others." Such methodologies met the criteria of involving the students as active participants in the research. It further appeared that Action Research would offer the aspect of 'reflection' as it is described by McNiff (1988 p.2) as "an essentially eclectic way in to a self-reflective programme." McNiff (1988 p.83) promotes the use of a diary admonishing the researcher to be "rigorous" about it. The self-reflection of the researcher was a desirable element in the methodology, given that no literature spoke of reflection on the work of disability officers in an Irish setting. It seemed, on reading the literature on AR and PAR that either methodology would be a suitable one.

Another option was possibly a methodology in one of the new paradigm approaches, e.g. co-operative inquiry. Reason (1988 p.9) speaking on what he refers to as, "the paradigm of co-operative inquiry" talks of "collaborative inquiry" stating that the "fully

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[60] A researcher I was open to any change(s) the research outcome might suggest regarding the support work involved in connection with students with disabilities in third level education.

collaborative model is the most challenging, both personally for those involved and as a contribution to the emergence of a genuine practice of new paradigm enquiry." Such an approach offered possibilities for full inclusion of the students in the research process – a priority in any methodology chosen for the study.

However, one major element had not been considered relating to the research methodologies examined to this point – the time required from students for input into the research process. On investigation, it transpired that student timetables showed programme contact hours often of twenty-five hours per week (twenty eight in the case of science programmes), with assignment and project work and some courses carrying a requirement for professional practice placements. Given these time commitments it simply was not feasible to pursue a methodology that called for full student participation. The requirement of a "collaborative relationship", which "underlies many formulations of action research's ideal" (Winter 1987 p.21) could not be met. As collaboration between researcher and students needed to be total (and not just tokenism), it was not a realistic possibility, given the time factors relating to the students. A search for a more suitable methodology was begun.

Rolfe (1996) speaks of a 'grounded practice' approach and on a first reading it appeared to hold many of the elements aspired to in order to meet the aim and objectives of the research. The following statement in particular appeared to encapsulate the approach being sought:

> …the type of action research which I have referred to as grounded practice conflicts with traditional scientific research in a number of ways. Firstly, it advocates a non-elitist approach involving small-scale projects carried out by practitioners themselves. Secondly, it results in nongeneralizable, personal knowledge, and more importantly, in changes to practice rather than to the generation of theory. And thirdly, it rejects the traditional, reductionist, scientific, objective model of research, in favour of a model that is holistic, humanistic and subjective.

> (Rolfe 1996, p.1310)

Rolfe is outlining here exactly, parameters that refer to the disability office – a small-scale project carried out by a practitioner herself, the disability officer. The data is considered to be non-generalisable, but leading to personal knowledge. The approach rejected the scientific model in favour of a model that emphasises a holistic approach – exactly the ethos of the disability office – an individualized, customized approach.

On further examination of the grounded practice approach, the issue of 'intervention' became problematic for the research methods needed for this research topic. No intervention was planned for the course of the research, which is not to suggest that interventions and changes might not occur post the research period. While it is true that any practitioner is aware of desirable change in her work situation, the aim of the research was to come to an *understanding* of that work. In gaining an understanding of the work a platform might be constructed for work that could be carried out at a later date in the area of change and transformation, but not as part of the research process.

 Further investigation of methodologies was required and an examination of social science approaches was renewed. A methodology was needed that would allow the disability officer to be the main protagonist, but allowing for the 'voice' of the students to be heard also throughout the research, without their having to input time or effort in any direct way. It was evident that a qualitative approach was the desired one.

Boas (1896) in his essay on 'The Limitations of the Comparative Method of Anthropology' speaks of how modern anthropology discovered that human society had grown and developed everywhere in such a way that it shares many fundamental traits in common. He asserts that the discovery implies that laws exist which govern the development of society and that they are applicable to our society as well as to those of past times and of distant lands. Boas maintained that as a result of the 'discovery' there began a public interest in anthropology and that where, before, the public saw anthropology as a means only of recording the customs and beliefs of strange peoples, it would now be perceived as a method of accessing the discovered 'laws' and their meaning which would "prove of the greatest benefit to mankind" p. 271.

The 'laws' that Boas refers to in this particular piece are those of ethics, but it shows that social science, the study of human society, can produce law-like statements (as does positivist methods). Social theories "must be explanatory rather than causal or predictive," - ethnography, although not positivistic is rooted in the concrete - "in what real people are doing and saying" (Davies 1999, p. 20).

Historical Background to Ethnographic Methodology

Social science established itself as a major branch of higher learning only during the twentieth century. It has a long and complex intellectual heritage, tracing back (with varying degrees of plausibility) to the philosophers and theologians of classical Greece and ancient India (Barnes 1979 p.27). Throughout the centuries thinkers and writers have pronounced on the characteristics of social life as they saw them, but it was not until recent times that systematic data collection for the real world began. Now, "ethnography tries to enlarge our sense of a human community" (Ellis and Bochner 1996, p.18). Prior to this, data were collected for administrative and fiscal purposes only. Even by the end of the nineteenth century the concept of objective fact remained, e.g. the facts about the poor were written about by their superiors rather than eliciting what the poor themselves had to say about their own conditions. During the nineteenth century also, theories of evolution and natural selection were put forward. These theories were a move away from the ruling theories of physics and chemistry, i.e. they were not mathematically precise. But the natural paradigm remained supreme well into the twentieth century. In the 1970's and 1980's post-modernists, post-structuralists and feminists challenged us to contemplate how social science may be closer to literature than physics" (Ellis and Bochner 1996, p.18). According to Tovey and Share (2000, p.359), although statistics and surveys can provide useful information, sociologists[61] aspire to a mode of research which is "perhaps more holistic and qualitative and can better capture the complexities of peoples' life experiences."

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[61] Sociologists can include ethnographers.

The methodological assumptions of nineteenth century anthropology were much the same as those of sociology. The elite, for purposes defined by the elite, fostered both branches of learning sociology and anthropology.

> The earliest detailed accounts of the social life of tribal peoples were provided by missionaries and travelers in the seventeenth century, and in the latter half of the eighteenth century colonial administrators began to add their contributions to the ethnographic corpus.

> (Barnes 1979, p.31)

In the nineteenth century learned societies were formed to promote the study of tribal peoples as an intellectual endeavour. It was not until the end of the century that academic anthropologists began conducting empirical inquiries on their own account. Throughout the nineteenth century the mode for ethnographic inquiry and anthropological analysis was the natural science paradigm. This was the time of the so-called 'armchair anthropologists' such as Sir James Frazier who received their information from missionaries in the field (Barnes 1979 p.32). In the 1880's scientists began to travel to study. The first academically affiliated field ethnographers such as Boas, Seligman, Haddon and Rivers were all grounded in natural science and although they 'modified their mode of inquiry to fit their new subject matter, the model remained essentially unchanged' (Barnes 1979 p.32).

The transformation in research methods is associated primarily with the work of Bronislaw Malinowski in Britain and Franz Boas in America.

> …development towards more intensive and long-term involvement with peoples being studied was transformed in the early decades of the twentieth century into the fieldwork based on long-term participation observation that has become so intrinsic a part of the making of professional anthropologists.'

> (Davies 1999, p. 69)

Addressing the question of how the anthropologist's ethnographic approach would fit with the planned research was an obvious next step. To elicit information around methodology, attendance at research seminars seemed the way forward. On completion of the seminars a decision was made to undertake this study using an ethnographic methodology. The decision thus made, research design was addressed.

Research Design

For the purposes of this research the question of being a disability officer and not an anthropologist was one that had to be resolved. The research was Irish based, undertaken with an Irish population and an Irish researcher (the disability officer), who could undertake ethnographic methodology, only within the role of a disability officer and for the purposes of the thesis. Did the history of the methodology allow for the approach to be used in such a situation? A "traditional" ethnography, that is, one that attempts to present fact and true analysis of foreign cultures (Beery 2001) was not an appropriate one. An acceptable way through to current day approaches was sought and found in the writing of Malinowski.

Malinowski (1939 p.xix) writing the Preface to Hsiao-tung Fei's (1939) work, *Peasant Life in China* states that it is a work done "by a native among natives" and that "if self-knowledge is the most difficult to gain, then an anthropology of one's own people is the most arduous, but also the most valuable achievement of a fieldworker." Malinowski put great emphasis on living among the people he and his students studied. Daily contact enabled them to collect concrete evidence about their "subjects'" lives (Davies 1999 p.69). The possibility of examining the ethnographic approach further seemed like it might be fruitful. The disability officer (as an Irish citizen) has almost daily contact with the students registered with the service (all students at the time of the research were Irish citizens) and the undertaking of fieldnotes as 'an observation carried on by a citizen upon his [her] own people' (Malinowski, 1939 p.xix) could allow a disability officer, as researcher, to undertake an ethnographic methodology. Given Malinowski's statement, it would not be a necessary element of the ethnographic methodology to undertake the fieldwork in some distant country, but clearly offered the opportunity to carry out an

ethnographic study 'at home,' in Ireland, in a service for students with disabilities, the setting of interest to this research.

Reading through 'The Savage Mind', by Claude Levi Strauss (1962) and 'Peasant Life in China' by Hsiao-tung Fei (1939) there is a wide use of tables and empirical data. While there is description of peoples' lives and references to collaborators and 'native' informants, with the very limited use of photographs and diagrams, there is a dearth of direct quotations from collaborators and informants. The efforts in these classical ethnographies to expunge the author from the texts are evident. This contrasts with a work written by Rhodes (2004) – 'Total Confinement: Madness and Reason in the Maximum Security Prison', where good use is made of direct quotations from prisoners and staff, together with drawings relating to conditions and emotions which were supplied to the author by 'inmates'. This approach is based more on a post-modern approach were the author's voice is clearly heard. It was clear that the change in ethnographic style from the 'traditional' mode to one of inclusion of many voices could facilitate the inclusion of the student voice and the disability officer voice – an objective to meet the aim of the research. The 'new' ethnographic approach would include all the voices, indeed it might be thought that the voice of the disability officer needs to be clearly heard as it would be difficult to understand the work undertaken by her without it. This allows for the disability officer's voice to be more visible, more central to the text in this research undertaking. But in doing so, the disability officer can undermine her own authority so that her "interpretations become simply one perspective with no superior claim to validity" (Fontana 1994, p.211).

The postmodern stance is taken from the point of view that there is no privileged explanation, no basis on which to judge one perspective more correct or truer than another; there are only perspectives (Davies 1999, p.15). Taking this approach, an objective of the research – to hear all 'voices' in the text - can be met. Fontana (1994) suggests the use of non-verbal material such as photographs and film, commodities, and poetry to extend the reader's understanding of the cohort under study. None of these non-verbal materials could be included as the confidential nature of the work of a

disability office precludes their inclusion - with the exception perhaps of poetry or drawings.

Ethnographic Explanation

The work undertaken in ethnographic research can provide explanation but not strictly causal statements. None of the explanations carry any statistical regularity. There is an element of the creative tension of critical realism to be felt as the production of explanation is offered without "flights of theoretical fancy" (Davies 1999. p.21). In seeking knowledge (by means of the use of ethnographic methods) there is often a forced re-evaluation of theories in the light of concrete experiences.

> The researcher must not impose any prior assumptions on the subject matter and should allow any theory or hypothesis to emerge from what is observed and recorded. It is in this that the great strength of ethnographic research lies.
>
> (McNeil 1990, p. 83)

Silverman (2001 p.45) says that ethnography puts together two different words: 'ethno' meaning 'folk', while 'graph' derives from 'writing'. Ethnography, he states, "refers, then, to social scientific writing about particular folks." McNeil (1990 p.64) states that ethnography means simply "writing about a way of life." Davies (1999 p.4) points out that the term ethnography is used "to refer both to a particular form of research and to its eventual written product." Webb et al. (2000 p.115) drawing attention to the anthropologist's tendency to be disposed to 'exotic data' acts as a warning to follow Silverman's (2001) statement about understanding the routine rather than what appears to be exciting. Such a warning helps guard against any disposition to record 'exotic data' as the main data of interest.

Ethnography as a methodology does not carry any specific theoretical underpinnings. Symbolic interactionism, critical reality theory, grounded theory, constructionist or subjectivist theories could be applied as the research process unfolds. However, as Bulmer (1969) states:

No theorizing, however ingenious, and no observation of scientific protocol, however meticulous, are substitutes for developing a familiarity with what is actually going on in the sphere of life under study.

(Bulmer 1969, pp.38-39)

The disability officer as researcher most definitely has a "familiarity with the sphere of life" in which she works. As "qualitative methods are used to identify the ways people behave and make meaning within natural daily life settings (Bartle et al. 2002 p.35) ethnography as a methodology is a very suitable one with which to undertake research into the everyday. It also allows for "the subjective world of meaning and value that directs individual effort and activity" (Lal 1995, p.424).

Determination of meaning is central to the ethnographic approach and hermeneutics is a tool that can be used in such determination. Hermeneutics as a method of explaining and translating, suggests the idea of addressing something that is in some way strange, separated in time or place, or outside of one's experience, with the purpose of rendering it familiar, present and intelligible. The hermeneutics of critical theory as present in Marx and phenomenology is not the one suitable to this research.

Further investigation into the ethnographic method upheld a sense that it was indeed the approach to undertake, as Giddens (2001, p.647) states that the ethnographic method can yield "richer information than most other research methods." As disability officers generally work within large organizations, there seemed to be a particular benefit to using this methodology. The particular benefit is based on the fact that "ethnographers can interpret what is going on without the judgmental overtones involved in pronouncing on what is 'wrong' and what must be done to remedy the defects – a process which is likely to raise as many defensive hackles as it is to alleviate the problem" (Pinder and Hillier 2001, p.211). Each investigative step confirmed that ethnography suited the proposed research – " … a process of gathering and thinking about data in relation to certain issues … a dialogic product involving colleagues, informants, friends and past theorists" (Bullock and Trombley 2000, p.286).   The 'certain issues' are included in documented

evidence or fieldnotes of the everyday work of the disability officer as well as 'the dialogic product' (Bullock and Trombley 2000) that unfolds over time with colleagues and informants. The recording of fieldnotes alone is not adequate to reaching an *understanding* of the work. To address the element of *understanding* in the research reflection is required. The aspect of 'thinking about data' is addressed below.

Reflexivity in ethnographic methodology

A method of finding out about self as well as the substantive issue of the research was looked for and a reflexive ethnographic methodology was deemed suitable to reflect this aspect of the undertaking. Davies (1999) offers a definition of reflexivity:

> Reflexivity, broadly defined, means a turning back on oneself, a process of self-reference. In the context of social research, reflexivity at its most immediately obvious level refers to the ways in which the products of research are affected by the personnel and process of doing research.

> (Davies 1999, p.4)

(Beery 2001) writing on the use of reflexivity in ethnography describes reflexivity as the incorporation of the author's personal feelings, emotions, reactions, and biases within the ethnographic text, which is commonly used by ethnographers to give their work personal relevance to retain their presence in the fieldwork (so as not to write themselves out of the ethnography, and as some critics claim, to establish their own ethnographic authority). Having read Renato Rosaldo's book exploring and analyzing the Ilongot people of the Philippines (he focuses on their head-hunting practices) and Dorinne Kondo's important and highly influential reflexive ethnography "Dissolution and Reconstitution of the Self: Implications for Anthropological Epistemology" Beery says that as a reader she found the reflexive nature of the work appropriate and even helpful. It is with this helpful outcome for the reader in mind that a reflexive aspect was included in the research design. There has been no attempt to mask the vulnerability of the ethnographer either by diminishing emotions or the integral role played by the researcher. In the words of Pinder and Hillier (2001, p.207) "…quantum mechanics demonstrated

that we are always a part of what we describe." Davies (1999, p.5) points out that ethnography draws its data primarily from the fieldwork experience, usually emphasises descriptive detail, and keeps before the researcher the requirement to note the mundane as well as the 'exotic'.

Interest in reflexivity, as a positive aspect of ethnography, has been growing among anthropologists since the early nineteen seventies. Prior to that, it was primarily regarded as a problem to be overcome, in keeping with the positivist orientation of those who originated and promoted the method of participation. From this earlier perspective the influence of the ethnographer was to be eliminated insofar as possible from the research findings. Although a new stance regarding the 'visibility' of the ethnographer is currently in vogue as the purpose of research is "to mediate between different constructions of reality" the researcher's own history has to be taken into account (Davies 1999, p.6). It means increasing understanding of the varying constructions, among which are the researcher's own constructions (Davies 1999, p.6). Ideally, Davies (1999) suggests, the research is a conduit that allows interpretations and influences to pass in both directions. There is a requirement to listen "*hard*, actively and effortfully" (Belenky et al. 1997 p.91) to bring this about while being cognisant of my own history and constructions, keeping in mind that "total reflexivity requires full and uncompromising self-reference" (Davies 199, p. 7).

Reflecting on issues such as reflexivity, self-reference and constructions brings up areas such as empowerment. Research with vulnerable populations cannot take place in any meaningful way without empowerment being taken into consideration. Empowerment results, according to Bartle et al. (2002 p.34), from "the interaction of people in micro and mesosystems within the macrosystemic context of sociopolitical institutions ..." They thus described in one sentence the setting of the research - micro system – the disability office within a macrosystemic context of a sociopolitical institution – the College itself. Based on the work of Bartle et al., which extended over seven years using an ethnographic methodology it was clear that empowerment of the students could find a place within the methodology. Empowerment of the student plays an everyday part in

the ethos of the disability office. Eliciting further conversations by using semi-structured interviews with students as part of the research process extends this empowerment by offering further opportunities for the student's voice to be heard. To locate a method to understand the content of the voices led to the step of addressing method and analysis.

Methods and Analysis
Armed with an understanding of the reflexive ethnographic methodology - by "inscribing patterns of cultural experience, giving a perspective on life" (Ellis and Bochner 1996, p. 16) - the methods to be employed to do so were addressed with interaction, note-taking, moralizing and writing included among them.

For the purpose of describing the undertakings regarding the methodology, Silverman's (2001) approach to examining methodological issues in conducting ethnography is used. These issues are: gaining access, finding an identity, defining a research problem, looking as well as listening, recording observations, and developing analysis of field data.

Gaining Entry[62]
The research setting is 'closed' in that it is an organizational setting – a disability office in a third level educational institution. An outline of both the service and the organization has been provided in an earlier chapter. Gaining physical entry was not difficult as the disability officer works in the office and reports to a line manager. The manager, when approached was both interested and enthusiastic about the research, recognizing it had a value for both the disability officer as worker and the students by way of possible changes/improvements to the work at a date when the research would be completed. The disability officer, having worked in the location for the previous two years and since the inception of the office had the advantage of no prior work arrangements or ethic to investigate. The manager had worked in her role also since the inception of the office and therefore a trust had been built up between both the manager and the disability officer. Both knew each other as people of integrity who worked with the best interests of the students to the fore. The access was overt; staff colleagues were

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[62] Gaining physical entry is dealt with here and access is addressed in the Ethical Concerns section later in this chapter.

informed at a team meeting before any research was undertaken and given an opportunity to ask questions.   All staff colleagues were agreeable that the research should go ahead. A letter was sent to students individually informing them of the proposed research.[63]

Finding an identity
Identity was already conferred by virtue of being in the role of disability officer. Colleague staff and students accepted this identity. Students would be unaware of the academic or working background of the disability officer and their frame is generally one of acceptance of the disability officer as 'supporter'.[64]

Gender in relation to the people being studied, according to Silverman (2001), may turn out to be very important in relation to how the researcher is defined and, therefore, what she/he finds out.   In several studies, informants were shown to say different things to male and female researchers (Silverman 2001, p.59).   It would be expected that this would hold true in this research also. The ethnographer had the dual identity of disability officer and researcher while in the field. As a female, it allowed for a shared gender with some informants and not others.   The use of a reflexive account in the methodology accommodates this reality and makes it visible.

Defining a research problem
Silverman (2001, p.61) states that data and their analysis will be partial, but this is not a problem (unless the researcher has made the impossible claim to 'give the whole picture').   This statement has proven to be a very supportive one in that it allows for description and explanation of certain phenomena and not others.   The choices were made by deciding which phenomena would most answer the research question – reaching an understanding of the work of a disability officer. Silverman (2001, p.611) points out that the initial stages of the research can hold the difficulty of every issue seeming fascinating, each aspect appearing interconnected and each piece of reading only adding further ideas (and suggesting further reading). His advice is to "celebrate the partiality of

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[63] Copy of the letter attached in Appendix G. The letter is in accessible language and format. There were no requirements in relation to alternative formatting such as Braille.
[64] Finding of a survey undertaken with students registered with the disability office in 2003.

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your data and delight in the particular phenomena that they allow you to inspect … and to note that the whole picture is not going to be possible" (Silverman 2001, p.61).

Looking as well as listening – recording observations

Silverman (2001) suggests treating what the researcher *sees* as data[65]. Silverman places emphasis on the rooms, the buildings, their decoration, or indeed lack of it, "in such a room … without anything needing to be said, we know that what goes on must be taken seriously" (Silverman 2001, p.63). Observation calls for personal skill and sensitivity according to Robson (2002 p.315) who says that "the observer is the research instrument." Where possible, Robson (2002) suggests that notation of observations is best made at the time of the observation – this can be in any format (short/cryptic) that allows the ethnographer to write up the fieldnotes later.

Data collection

In the reflective ethnographic approach to research everything, including what is seen, heard and observed is data; however Silverman (2001, p64), warns that it is not possible to report everything. Fieldnotes, as the primary research method offer the main source of data collection. Semi-structured interviews and 'conversations with a purpose' (Clarke 2001) are supplemental primary options. Tape recordings, acceptable as a primary source of data collection, can be considered too intrusive in student meetings as data can be collected in unexpected locations like the student canteen, corridors, library or wherever the disability officer happens upon students in informal settings. Semi-structured interviews are a common tool in the reflexive ethnography approach. Documentation is a secondary source of data collection, e.g. student files, government and agency documentation. It is salient to note that student file-notes, which can come from sources/staff other than myself, supplement fieldnotes and offer another layer of information. Other desktop research materials can also be used as secondary research tools.

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[65] Italics – Silverman's

As the fieldnotes are written, issues raised in them are dealt with. This formula is already followed by disability officers in their everyday work. When writing reports of student meetings, if disabilities or related issues are not fully understood, the disability officer needs to locate the necessary information/theory to inform her/himself. This can involve meeting 'experts' in various fields contact with medical staff or appropriate agencies.

Analysis Method

The framework chosen for the analysis is Michael Agar's (1985) protocol. The search for the method was short-lived. On initially reading around Agar's protocol his addressing of the issue of breakdown in understanding held an interest for me given that the aim of this study is related to understanding.

Ethnographic Language as employed in using Agar's (1985) protocol

Ethnography is based on intensive personal involvement born of the requirement to "learn about a world … by encountering it firsthand and making some sense out of it" (Agar 1985, p.12). The ethnographer, according to Agar (1985) offers a public presentation of a coherent view of a 'humanscape' that is new to the eyes of the reader.[66] Viewing this humanscape and its social actions requires a language with which to describe them. This is what an ethnographic language is for. A decision was required in relation to the use of ethnographic language in the analysis that would allow for the transmission of information from the ethnographer to the reader. To achieve this end, the language chosen follows Agar's ethnographic language – see Table 3.

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[66] The 'humanscape' in this study is the disability officer and students with disabilities in a third level institution in Ireland going about their everyday work in the setting – see Ethnographic Analysis and Understanding Chapter for a detailed account of the "humanscape".

Table 3. Overview of Agar's (1985) Protocol as used in the Ethnographic Analysis

Breakdown "Breakdowns occur, when available schemas, either serendipitously or through forced effort fail to make sense of action" (Agar 1985, p.36).		Mandated	Researcher sets out to create an understanding of terms used by informants which are unknown to the ethnographer.
		Occasioned	Comes up unexpectedly when doing ethnography. The breakdown is not intended by the ethnographer. The ethnographer is surprised.
		Derivative	The result of attempts to apply schema that cause further breakdowns.
Strips	A strip can be broken down into segments.	A piece of bounded phenomenon encountered during ethnographic work. A strip can be derived from observation, conversation, interview, archive or literary text.	
	Segments can be broken down into utterances.		
Schema		A general way to talk about the resources available to the ethnographer to understand phenomenon.	
Resolution		Moving from breakdown to understanding (involves the employment of critical thinking, reflection, use of literature, checking with informants and discourse with others).	
Coherence		Understanding of the ethnographic phenomenon encountered. Transformation in understanding.	

Ethnographic Understanding

Understanding is key to this study. Agar (1985, p.16) says that "emphasising the *understanding*[67] of situations that have occurred rather than the *prediction*[68] of the value

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[67] Italics - Agar's
[68] Italics - Agar's

of one variable given the knowledge of the values of others" is the work of ethnographic analysis. Ethnographers, he states "… are less interested in what comes next and more taken with understanding what just occurred", adding that: "This understanding occurs in a variety of ways, although all of them involve a connection between something said or done and some larger pattern"(Agar 1985, p.16).

When the ethnographer experiences an encounter where understanding of it is not available to him or her because of their tradition,[69] Agar's approach describes this as a breakdown:

> When different traditions are in contact, an ethnographer focuses on the differences that appear. Expectations are not met: something does not make sense; one's assumption of perfect coherence is violated. For convenience, the differences noticed by an ethnographer are called breakdowns.

> (Agar 1985, p.20)

The central role of breakdowns is in bringing out problems for ethnographic attention; they signal the violation of the researcher's assumption of perfect coherence. The breakdown can be interpreted, according to Agar (1985, p.21), as "a departure from what the ethnographer expects, 'a lack of fit' between one's encounter with a tradition and the schema-guided expectations by which one organises experience."[70]

Breakdowns are described by Agar (1985) as falling into two categories: the mandated breakdown and the occasioned breakdown. In a mandated breakdown the researcher sets out to create an understanding of terms used by informants unknown to her/him which require conscious effort on the part of the ethnographer to understand. Agar's (1984)

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[69] Tradition is understood as: existing terms of reference available to the ethnographer for understanding phenomena.

[70] For me, a departure from what I expected, resulted in my tradition - my resources for understanding - not being robust enough to fully understand a statement made by a student in relation to the work of a disability officer. The next chapter Ethnographic Analysis and Understanding deals further with this lack of understanding, referred to as a breakdown in Agar's (1985) protocol.

study of truck drivers is a good example of mandated breakdowns.[71] Agar (1985), states that the occasioned breakdown can occur just once during the course of an ethnography or may occur on several occasions, each time creating an occasioned breakdown.[72] An ancillary type of breakdown exists – a derivative breakdown. It can be encountered during the process of addressing either a mandated breakdown or an occasioned breakdown. There can be multiple derivative breakdowns, as they are the result of attempting to apply schema that cause further breakdowns.[73]

When a breakdown occurs, something must be done about it. Agar (1985 p.21) refers to the process of moving from breakdown to understanding as one of resolution. Attempts at resolution can involve discourse with others.[74] This process towards resolution can be iterative and continues until resolution is reached. Broeker (2007), speaking of Agar's protocol, states that resolution occurs through the application of *schemas* to strips, that is, when the resources available to the ethnographer to fully understand the student statement eliminates the breakdown.[75]

Resolution, which relies on logic of question and answer, in turn leads to coherence. The journey to coherence is one of initially choosing a piece of bounded phenomenon – a strip, applying a schema to reach understanding of the strip (this step may need to be taken multiple times), the use of question and answer logic to reach resolution, which in turn offers coherence – understanding of the phenomena encountered.

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[71] Agar needed to understand the terms that truckers use in their everyday work, while communicating with each other by two-way radio, or in person. He, therefore, had mandated breakdowns and addressed them in his study by setting out to gain an understanding of the terms as used by the truckers themselves.
[72] The breakdown in this study is one that falls into the occasioned category – it was unexpected and the ethnographer was surprised. The breakdown occurred on one occasion only, but was so strong that it became the bounded phenomenon, which in turn made up the strip that is the main focus of the analysis. This is dealt with fully in the Ethnographic Analysis and Understanding Chapter.
[73] Derivative breakdowns are considered to be of less importance than either mandated or occasioned breakdowns.
[74] In my own attempts at resolution a discussion with my line manager (who shares my tradition) in relation to the research resulted in an opportunity for me to check understandings as I progressed through the process. The discussions offered me opportunities to clarify my thinking by hearing myself talk through my understandings and receive feedback in the moment.
[75] In this study the achievement of resolution allows for new knowledge acquired through building schema(s) to be added to old knowledge already held by the ethnographer, resulting in understanding being reached by the ethnographer.

Strips, segments and schemas

Strip, segment and schema are words employed in Agar's protocol and defined earlier in this section. They are described in Table 4 in relation to their use in the analysis.

Table 4.   Strip, Segment and Schema (Agar's (1985) Protocol

Strip	A piece of bounded phenomena encountered during ethnographic work (in this study it is a student's comment during an informal interview).
Segment	A section of the strip lifted out for analysis (the segment used in the analysis is: "you listen, you care".)
Schema	The way to talk about the ethnographer's (my) resources; in order to understand the student statement (the strip).

Strips

The process of analysis begins with the selection of a strip. The use of strips can be applied to the informant's (in the case of this study, a student's) accomplishment of everyday life. Strips are under the control of the ethnographer and the group. Strips can be considered *broad* when entire strips are used, but they can be segmented for finer narrower focus.   These segmented pieces of a strip are referred to as *segments*. Segmented coherence can be sought in this way, for example, a one to two hour interview can be used as a strip, and then divided into topical segments.[76]

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[76] In this study, the focus of the analysis is a *segment* of a larger interview strip. The segment, "… you listen, you care" has been lifted out for particular focus. Another approach is to take part of a single interview as a strip, and each utterance within it as a segment.

Schemas

Initially, resources available to the ethnographer may be limited, or not be robust enough, thus requiring a need to source alternative resources which provide new ways of looking and seeing, in order to come to resolution. The term schema is currently in vogue in several academic disciplines. Agar (1985 p.27) chooses to use it because "they refine our understanding of how knowledge *changes*[77] and knowledge change is what resolution is all about."

Building Schemas

When building schemas, raw material comes both from 'the folk'[78] and the ethnographer. Agar (1985) suggests that such raw material can come from diverse sources. A complex schema might be put forward by an informant/student and this can be incorporated into the ethnography. The ethnographer might construct a schema based on bits and pieces heard or seen. Agar allows for a dash of insight and intuition[79] on the part of the ethnographer within the ethnographic process.   Theory can be drawn on to construct a schema that has nothing to do with anything ever said by informants, even though it might be linked in explicit ways with the strips that they performed (Agar 1985, p.45).[80] Agar (1985 p.45) points out that schemas are usually the accomplishment of the ethnographer.[81] In the accomplishment of schemas, inferences are embedded at the heart of the work. "The concept of inference represents the idea of linking up knowledge, whether constituted from memory or from interaction with the world" (Agar 1985, p.35).

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[77] Italics – Agar's.

[78] The use of the term 'the folk' is one used in ethnography to denote the group under study. In this study this group are students with disabilities.

[79] Such an allowance offers me a freedom around understanding and interpretation within this study which I might not otherwise have claimed.   I come to the matter of insight and intuition from a subjectivist position, which often describes 'knowing' as grounded in bodily sensation, typically what "feels right". From this perspective truth is "personal, private, subjectively known or intuited" (Belenky et al. (1997) p.54).

[80] In this study I have used a dash of insight and intuition particularly during times of reflection whilst in the process of building a schema to apply to the chosen strip which was segmented.

[81] This is not always the case. In this study, the schema is my accomplishment as the ethnographer, but it is important to point out that discussion with others, for example, several informants, and my work colleagues, also took place to check my understanding – these discussions are outlined in the Ethnographic Analysis and Understanding Chapter.

Bunching of inferences is what schema are all about. Nodes (of which inferences are made up) may be actions, states, persons, goals, or objects. In their implicit form inferences simply assert a link between any two (Agar 1985, p.36). Usually an inference used to make sense of some act will be tied together with others giving rise to a schema.

Resolution occurs by finding a schema that can be applied to and which illuminates the strip without a breakdown occurring. Such resolution may include a new way of looking at existing theory/knowledge. "Resolution is the process of tinkering with inferences and schemas until coherent understanding is achieved" (Agar 1985, p.36).

The outline of Agar's (1985) protocol given here is to give background in relation to the decision to use it as the analysis method and to lay down the required information relative to its deployment. In the ethnographic analysis and understanding chapter Agar's (1985) protocol is returned to again. In that chapter detailing of the protocol is evident as the analysis moves from start to completion.

Reflection on writing

Moon (1999) points to four levels or depths of reflection; level one is purely descriptive writing; level two is writing with some reflection; level three is writing with some description but focused with particular aspects accentuated for reflective comment; and level four is writing where description only serves the process of reflection.

It is to be anticipated that a short time is required to achieve skill at level three. With skill achieved, level four can be adopted. Level four shows clear evidence of standing back from the event and there is a mulling over and internal dialogue. Taking a meta-cognitive stance, level four allows for a critical awareness of one's own processes of mental functioning including reflection. Motives of others are taken into account and considered against those of the writer. There is recognition of emotion and prior experience (Moon 1999).

Level four acknowledges that there is learning to be gained from the experience and points for learning are noted. That personal forms of reference can change according to the emotional state in which it is written, the acquisition of new information, the review of ideas and the effect of time passing are also allowed for.

Validity, Reliability and Generalisability

To address the issues of validity, reliability and generalisability many publications were read to gain insight into the areas. The search in the area with regard to ethnography seemed to yield little in comparison to other methodologies, in particular positivistic approaches where a large number of publications undertook lengthy discussions around the areas and dealt with 'triangulation' of methods as means of proving these elements in the research.[82]

Davies (1999) writing about reflexive ethnography, states regarding validity:

> Ethnographic methods may produce valid knowledge without complete participation and total acquisition of local knowledge by ethnographers so as they honestly examine, and make visible in their analysis, the basis of their knowledge claims in reflective experience.
>
> (Davies 1999, p. 92)

Chesney (2001) contends that for readers (of ethnographies) to accept the research as valid, they must be able to "scrutinize the integrity and philosophy of the researcher so that the findings are trusted" p.128. To achieve validity Chesney encourages the researcher to be honest, open and to acknowledge changes over time and with experience and that to hide such knowledge behind an "unspoken veil" or in other words, not to lay it open for scrutiny is to deny its presence, which constitutes a gap in the research. An approach to address the issue of validity through transparency in this research undertaking is the use of reflexivity.

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[82] In relation to qualitative research Sparks (2001 p.548) supports the stance taken by Morse (1999 p.717) when she warns that "turning our backs on such fundamental concepts as validity could cost us dear". She suggests, "Think. Reconsider. Undo." Whittemore et al. (2001 pp 534-535) writing on the same theme suggests that what is most important concerning validity is "the use of optimal methodological techniques and to critically present the research process in detail."

Writing on the aspect of reliability in reflexive ethnography Davies (1999) states that

> Reliability, both within and between ethnographic studies, must be re-interpreted to incorporate a recognition that the reflexivity intrinsic to ethnographic research does not permit or even make desirable the superficial consistency that a classical positivist position would dictate.
>
> (Davies 1999, p. 93)

Empirical generalization allows for the findings of a study to be generalized to other cases. In ethnography, generalisability, while highly desirable, is to be sought in terms of theoretical, rather than statistical inference (Davies 1999, p.93). Generalisability from this perspective was alluded to earlier in this chapter when examining the possibility of law-like statements being applicable to social research.

While ethnographers do not claim generalisability in the same way as those working in positivist research areas there is a case made by De Laine (2000 p.207), that qualitative researchers who write of themselves in texts are sometimes "linked by roles to others in shared activities and in relationships of various kinds." This is a claim that could be put forward in relation to this research topic. 'Shared activities' could be read as support provision within disability offices at third level institutions in Ireland, while 'relationships of various kinds' could include those that exist between disability officers in those offices, as disability officers come together on a frequent basis around professional and support issues. Sharing of the research outcomes may well contain elements of transferability, thus offering disability officers some understanding of the role.

Ethical Concerns

Ethnography, as method, does not facilitate being in a position to give full information as to how the research will proceed. All of those spoken to offered their agreement and showed an understanding that the full course of the research path cannot be fully laid out

in advance. Clarke (2001), states, "…principles of ethics have to be considered at every stage of the research process." Such principles addressed in the research are:

1. Informed Consent
2. Confidentiality
3. Reciprocity[83]
4. Power and rank issues
5. Beneficence

Informed Consent

At the initial stages of the study, students registered with the disability office were informed about the research being undertaken. The letter sent by post to inform the students of the research is attached in Appendix G. This 'informing' also extended to staff colleagues who work in the disability office. I outlined my planned research to them, at a team meeting, and to each staff member employed since then on a one to one basis. The line manager (to whom I report) was fully aware of the planned research and was supportive of it, recognising the gains to the disability officer as worker and to the disability office as the office supporting students with disabilities. Ethical issues were further addressed with a presentation to the staff of the department where the ethnographer was registered for research purposes.[84]

A level of rapport has been built up over the years with the 'core group' of staff, which allows for forthright questioning of me by them and affords me the opportunity to be open and honest with them regarding what is to be gained by me (a Master's Degree) and by the disability office (a possible impact on the everyday work of a disability officer post the research). As we share confined physical space, the work is understood by the staff in the area, as they can observe the day-to-day workings of the role of disability officer at close quarters – with the exception of student interviews, needs assessments and confidential interventions which are undertaken in private.

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[83] "Reciprocity implies mutuality and the opportunity to share something with another or "others" (Clarke2001, p.164).
[84] See Appendix F.

It was my aim where and when appropriate to remind others of the research I was carrying out but as Clarke (2001 p.162) points out, "… the notion of informed consent is problematic within field research, a situation where, it is not always possible or indeed feasible to interrupt activity to tell the researcher's identity and purpose to one and all."

Confidentiality

Students were invited, in the letter sent to them, to contact me if they wanted to discuss any aspect of the research. Any student not wishing to be included, even where confidentiality and anonymity are offered, would have that request respected. Cain (1998 p.162) states that "the point of confidentiality is to protect privacy and to erect a barrier against possible embarrassment, and that, where anonymity ensures this, no breach has occurred". I acknowledge that ensuring the omission of information around any student, if requested by him/her would not be an easy task. To further ensure anonymity students will not be named or identified but will be given pseudonyms as a means of 'sheltering the participants' in the account of the work (Williamson and Prosser, 2002 p.590).

Reciprocity

The 'gain' to the researcher in carrying out this research is a Master's Degree, but the disability office, and hence the students registered with the office, will also gain. Students have been introduced to ethnography as a research methodology. Account is taken of their views, the researcher listening "*hard*, actively and effortfully" (Belenky et al., 1997, p.91). Possibly, changes will be made in the everyday work of the disability officer impacting student supports in a positive way.

Power and rank issues

Couser (1998, p.338) states that "having power or rank over someone is not the same as overpowering that person, of course: the latter is a pitfall that may be evaded." Avoiding such pitfalls is part of the practice of a disability officer and trust is a main tool in doing so. Cain (1998 p.159) says that trust is fundamental, "to trust another person with private and personal information about yourself is a significant matter." When a student registers with the disability office such trust is required on his/her part and the response of the disability officer is one of professional and personal trustworthiness. This being the case,

the issue of 'power or rank' is dealt with on a continuing basis between student and disability officer. As the research is an ethnographic methodology nothing extra was required of students and/or the disability officer. While undertaking the role of ethnographer, the disability officer self continued to engaged in the everyday work of a disability officer. Students continued to access supports and the disability officer managed their delivery as before. Therefore, throughout the research timeframe the everyday power and rank issues remained as they always had been.

Beneficence – the principle of 'do no harm'
The issue of beneficence or the avoidance of malificence is a consideration in any study, but most particularly in one such as this, where it deals with 'vulnerable populations'. The policy of the disability office, and therefore a policy subsumed by the disability officer (the researcher), is one of a holistic approach to the student, where individual and customised responses to the student and their needs are paramount. Given this approach, it is already established practice in the everyday work of the disability officer to follow the ethics of beneficence and to 'do no harm'. This approach was amplified during the study to keep awareness of this element to the forefront of the research. Kleinman (1999 p.77) holds that "ethnographic description begins with a respectful understanding of local categories, local narratives and local practices." His notion of 'ethical deliberation' was in constant focus for the duration of the study. Cain's (1999) 'principle of respect', which requires that all information acquired be treated responsibly and with discretion, was invoked. The basic professional obligation to be trustworthy stood.

Access
Accessing the students was undertaken by: initial letter explaining the planned research.[85] Follow up telephone calls were made.[86] Following Latvala et al.'s (1998) model[87] the

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[85] The letter contains an offer to have the student contact me and to meet solely around the issue of the research if they so wish. The letter is phrased appropriately to allow dyslexic students to come to an understanding of the content. See Appendix G.
[86] To students who are at the high support end of the dyslexic continuum or students with visual impairment to ensure that the content has been read sufficiently well to be understood and to ask if a one-to-one meeting is desired by the student.
[87] According to Latvala et al. (1998 p.29), privacy is "the protection of a person's integrity and the protection of an individual's or family's secrets that became known to the investigator during the research process."

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researcher signed a written Declaration on Confidentiality[88] and Privacy. As an added layer of protection re confidentiality and privacy the Research Supervisor also signed a Declaration relating to confidentiality and privacy although this is not called for in Latvala et al.'s model.[89]   It was a requisite that ethical clearance be obtained from the College Ethics Committee. On the foot of a submission followed by interview of the researcher, the Ethics Committee granted ethical clearance for the study.

This chapter has dealt with methodology in some detail tracing the historical background of the chosen methodology – ethnography. Moving from the history of ethnography, the methodology as used in this study was examined and found to be a post-modernist approach, allowing for the inclusion of emotion and the visibility of the author throughout the ethnography. The inclusion of the student voice was pointed to.   The analysis method, Agar's (1985) protocol, was described giving explanation of the ethnographic language used in the analysis.   The chosen ethnographic language is returned to further in writing of the undertaking of the analysis and allied to this is ethnographic understanding, in the Ethnographic Analysis and Understanding chapter.

In order to have data to analyse, in ethnography fieldwork is undertaken. While in the field data are gathered by way of fieldnotes. Brief descriptions of fieldwork and fieldnotes were given earlier in this chapter. Building on those descriptions further, the next chapter deals with fieldwork and the collection of data.

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[88] Confidentiality is attributed Cain's (1998 p.159) meaning. He defines confidentiality as "information entrusted by one person to another with an express understanding that it will not be divulged."
[89] See Appendix H for sample Declarations.

CHAPTER 4

Fieldwork - the lived personal ethnographic journey

Introduction

The conclusion in the literature review pointed to the fact that there is a paucity of literature relating to an understanding of the role of a disability officer in higher education in Ireland, and that it was safe to come to such a conclusion. In the methodology section ethnography is presented as the most suitable method for this study. Fieldwork is the term applied to the work undertaken in the setting in which the ethnographer is located for the purpose of the research.

This chapter addresses fieldwork as an ethnographic process. Fieldwork requires the physical presence of the ethnographer in the field "we cannot divorce our scholarly endeavours from the bodily reality of being in the field" (Coffey, 1999 p.68). The reality of being in 'the field' can mean that the ethnographer as researcher can be located in a variety of settings. Hammersley and Atkinson (1995 p.80) refer to fieldwork settings: villages, towns, inner-city neighbourhoods, factory shop-floors, deep-shaft mines, farms, prisons, churches, universities etc. Coffey (1999) says:

> Fieldwork takes place in a variety of social and cultural settings. we use the term 'the field' to refer to a heterogeneous group of locations and contexts. Everyday life as an area of social enquiry makes the boundaries of observation and analysis almost limitless.
>
> (Coffey 1999, p.39)

The 'field' for this study was primarily the disability office in a higher education setting in Ireland. The field, from time to time was also whatever location the disability officer found herself in, for whatever purpose, on any particular occasion within the demands of her work. Examples of these other locations would be corridors, campus restaurants etc.

The group under study was students with disabilities in the setting. The student voice, in relation to the work of a disability officer is considered to be vital. That student voice is allowed for in the fieldwork by virtue of data collection. The 'emic' emphasis[90] was primarily offered by students. The fieldwork experience is described in this chapter under headings of access, method, self in the field, collection of data, and exiting the field.

Access **[91]**

The location for the study, a higher education institution, might lead to the false assumption that those in the location, students and staff, were familiar with the research methodology. Hammersley and Atkinson (1995 p.81) draw attention to the fact that even in a setting where there is familiarity with research, "… there may be a serious mismatch between their expectations of the researcher and his or her intentions". Physical access was not problematic, (being already in the role of disability officer), ethnographic method was not well understood – if at all – by students in particular. This was understandable, as a number of students were commencing higher education at the start of the study. Part of the access requirement was to give information and explanation in relation to the methodology being used. This was well received and a level of unexpected interest was shown in the method. One student was willing to "be your guinea-pig" (Fieldnotes, September 2004) and seemed disappointed that nothing in particular was required to be undertaken by him. Another student [92]took pen and paper from me and gave me a very useful lesson on deafness, together with his full permission "to use it in the research" (Fieldnotes, November 2004). [93]

For me, as researcher, there were no access issues relating to discomfort, physical or emotional and no extra personal safety issues in relation to the research. Although I was to research in a familiar setting my sense was that it would lead to *some[94]* understanding

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[90] Letting informants offer their personal interpretations and meaning of events, (Wolcott 2001, p.19).
[91] In the Methodology Chapter attention was drawn to the issue of access and also the approach to the ethical requirements was explained.
[92] This encounter is detailed in the Ethnographic Analysis and Understanding Chapter.
[93] The drawings and text are included in Appendix I.
[94] Italics – mine, for emphasis.

of the work of a disability officer and allow students to have their voice heard in the process.

Fieldwork Model

The familiar field I found myself in – the disability office did not lend itself to using a model of 'the ethnographic stranger'. Coffey (1999 p.22) says that "it is difficult … if the field site is a familiar one." The model of 'heroic ethnographer' confronting an alien culture did not fit either, as it is now, according to Coffey (1999) untenable - it does not reflect much of what ethnographers do and no 'heroics' were required of me, no dangerous voyages, no researching in difficult physical terrain etc. My work role dictated the model. My research role was, by dictate, one of participant observer, with "an active and situated place in the field", Coffey (1999) p.37. As "the hallmark of participant observation[95] is long-term personal involvement with those being studied" (Davies 1999, p.71) this criterion was met in undertaking my everyday work. As Gubrium and Holstein (1997 p.141) state: "I've been there, the participant observer likes to put it, seen what actually happens, and this is the way it is." As a participant observer I have been there, almost every day for the course of the study, I have seen what actually happens and from my perspective I can state 'this is the way it is'.

Relationships in the Field - students

As "ethnography is based in and depends on social interaction" (Davies, p.75) I, as researcher found my field setting offered such social interaction in abundance. All students who agreed to be included in the study were already known to me, some for several years.[96] Those in their final year of study had been interacting with me for over three years, while others were first year students at the time of the study. The students had agreed to allow me to use our interactions as part of the research process.

First time entrants to higher education needed an extended input of time, particularly around explanation of method and confidentiality issues. This 'extra' level of input and

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[95] Participant observation is dealt with in the Methodology Chapter and later in this section.
[96] I took up the position of disability officer in 2001.

time also benefited me, as it gave me multiple opportunities to explain my process, thus embedding it in my own thinking. I sensed that an increase in trust followed these encounters. According to Arnold and Boggs (1995) trust means a person is consistent and can be relied upon.

Relationships in the field - staff

Relationships with staff were and are of a solid and reciprocal nature and issues relating to their introduction to the research are dealt with in the methodology chapter. In the field, these relationships continued to be those of work colleagues, with similar visions held by all of us in relation to the work. Team meetings allowed for formal interaction and tea and lunch breaks frequently continued the work of both disability officer and researcher informally. The level of collegiality is extremely high in the environment and therefore interaction is easy.

All personnel allied in whatever way with the disability office or student support work were considered to be in the field, whether visiting the College or remotely located as is the case with agency personnel, for example, National Council for the Blind, Deaf/Hear etc. A disability officer works with agencies, Government Departments and Authorities, Psychologists, Medical personnel and whomsoever is involved in any way with supporting students with disabilities in the educational setting. All, for the purpose of the research constituted the field.

Participation and Observation in the Field

My participation in the field was defined by my work as a disability officer. Nothing extra was observable as a result of being a researcher. The 'everyday' continued to be just that, from the perspective of onlookers and students. It was in fact, particularly stated in the consent information given to students that they would not have to undertake anything extra, that the research would not interfere with the work undertaken with them in any way. Some students did, however, ask how the research was going and as I had suspected offered further information in the role of student informants. Students went

about their own everyday work, were needs assessed[97] and supported as anticipated and expected. The students behaved no differently, to my observation, because research was in train.

For me, on the other hand, a considerable amount changed, particularly in relation to the issue of observation. I found myself with heightened awareness for the initial month or so, exhausting myself from extreme alertness. Such alertness seemed to be a requirement;

> … all fieldwork, regardless of the degree to which one is an observer or participant, requires an awareness and an ability to intuit what is hidden, to grasp implicit meanings etc.

> (Wichroski 1997, pp.265-226)

I exhausted myself in observing, feeling that I should miss no opportunity to do so, lest it be of importance. As I reflected on this, I took stock of my behaviour in the field. I made adjustments to my observation 'technique' in as much as I ceased being so desperate in my quest 'to intuit what was hidden' (Wichroski 1997). The fieldwork became more manageable. I took observation opportunities as I found them, in corridors, in canteens and car parks – wherever interaction took place relating to the work of a disability officer and thereby, the research itself, but it rarely was less than all consuming.

Wichroski (1997) argued that:

> ... by adopting a research stance appropriate to the groups being studied – that is, by moving from observer to participant and back, stretching our capacities, using our emotions, working actively with those barriers that confront us – we may learn more *from* those very obstacles than if they had never presented themselves.

> (Wichroski 1997, p.266)

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[97] Full information on needs assessments is given in the Ethnographic Analysis and Understanding Chapter.

Adding a reflexive stand to my previous reflection, *I* [98] seemed to be my greatest obstacle. I needed to manage the participant observer role better, which really meant that I needed to manage myself better. I planned 'down-time' from the research, the relentless reading and writing – the 'full-on' participant-observer approach, which I now recognise as that of the novice researcher, especially the enthusiastic and committed one. Participation and observation began to be interwoven with the everyday– as indeed it always had been - with a rhythm I hadn't noticed before. I had felt stressed and pressured and on investigation, found that how the participant observe role had affected me, as both researcher and person was valid within the ethnographic process. Coffey (1999) offered support in her statement:

> It has long been recognised that ethnography has a biographical dimension (the observing and telling of lives). Increasingly, the autobiographical has also been identified as a key element of the task and writing of ethnography. This identification has established the personal narratives of fieldwork as legitimate ethnographic writing.

> (Coffey 1999, p.17)

My personal experiences would be put to use in the writing of the ethnography and perhaps offer something in understanding the work of a disability officer.

Self in the Field

Disability officer – status

"Knowing where people fit within a social structure" is, according to McIntyre (2006 p.115) "crucial to everyday life." Use of McIntyre's (2006) terminology around occupation allows that my *occupational* status is that of disability officer. Within that status is the *achieved* status of having completed studies considered appropriate to the occupational status of a disability officer. My occupational status was the same in the field, with the additional status of researcher. Both in my occupation and in the field, I also carried the social and family *ascribed* statuses in relation to age, race, being a daughter etc. A disability officer has no obvious status symbol in relation to occupation,

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[98] Italics – mine, for emphasis

for example, no uniform, no name badge. She/he appears as her/his self.   It is only by telling who we are[99] that people can know our status. McIntyre (2006 p.115) says that there is a level of comfort when people can easily identify each other's status. As the disability officer role is not well understood it minimises that comfort level.

Van Maanen (1988 p.5) proclaims boldly that "the self is the key fieldwork tool" and Wichroski (1997 p.267) expands the statement by citing Khleif (1974 p.396) that 'in many ways the fieldworker *is* the research instrument; that is, the observer is part of the observed."   Reinharz (1997 p.3) questions why the role of the researcher in the field is the concern in much of the literature and not "the researcher's *self*", and proposes that we "bring the self to the field and create the self in the field." These selves, the 'brought' and the 'created' are, Reinharz (1997 p.4) claims, relevant to the people being studied, they shape or obstruct relationships and hence the knowledge that can be obtained. A further claim is made – that in adopting a framework where ethnographers learn how they are perceived, then fieldwork will contain the elements of "what the researcher became in the field" and "how the field revealed itself to the fieldworker." Using this framework it is important to be aware of who the researcher is *not* in the field.

The 'self' that I brought to the field was *not* an ethnographer arriving in an exotic location for the first time. I had no difficult choices to make in relation to where I would live, (which village) with whom (social standing within the group) or if my language skills would serve me well. Examining Reinharz' three major groups my 'self' on entering the field looked like this:

> Research-based self: not sponsored, being a researcher, being a good listener, being a person who has given feedback, being someone who is staying.

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[99] I find myself 'telling who I am' on almost every occasion when I'm asked questions relating to my occupation. There is also the need to 'tell what I do'. In the field this still held true and appropriate explanation of the role of researcher was included.

Brought self: being a mother, having relatives, being a woman, being a wife, being Irish, questioning religious values, (but not spiritual ones), being a disability officer, being in my 50s, being a singing enthusiast, being a daughter.

Situationally created self: being a resident, (not a temporary member), being a worker, being a friend, and being a disability officer.

Making my own of Reinharz'groupings I am almost completely in tandem with her descriptions of herself. This is a useful exercise, as she researched in a kibbutz (in a setting where being Jewish she too fitted the role of marginal native).[100] The labels she applies to herself are based on those identified in her fieldnotes (she, no doubt is more than the list suggests). Whilst I admit to her being *younger* than me, a *dance* enthusiast, an *American academic*, *Jewish* and *not staying*, it offers an approach to identifying who the 'self' became in the field. It has a goodness of fit with Wasserfall's (1997 p.154), idea of the 'learning self' in relation to reflexivity, in that the learning *about* self is relevant in a reflexive ethnographic approach. I felt the interweaving of my 'selves' keenly. I empathised with Coffey (1999 p.30) who described "[How] By actively participating in the 'everyday' life of the setting, I found it impossible to divorce my fieldwork self from my other selves". Alongside the marginal native self I brought to the field I added the one of 'insider'. I realised in the field that I could find comfort in such a status and found myself resonating with Bartunek et al's statement:

> … the knowledge insiders are thought to possess, knowledge unavailable to outsiders because it rests in shared experience, special interests and relatively unique problems shared by the group …

(Bartunek et al. 1996, p.1)

Being an insider (by virtue of being the disability officer) and marginal native (by virtue of my own experience and exposure to disability issues) led me to appreciate that I had access to information and experience around the work I was endeavouring to understand that no outsider 'coming in' could possibly know in the same way I did.

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[100] See Personal Framework for the Study where I support my claim as a marginal native.

The insider, marginal native and the personal self I brought to the field appeared physically no different to the public eye than the self I presented the day before the commencement of the fieldwork. I dressed no differently than usual while in the field. This meant that on most days I wore my everyday clothes, relaxed in style and chosen with comfort in mind. This is intentional on my part in order to appear relaxed with students in particular. However, there were occasions when I was required to present a professional 'body' as Coffey (1999) refers to it, when meeting other professionals and agency personnel etc. I do not engage much in "overt body impression management" (Coffey 1999, p.67). Having been a full-time student myself in 2000, I still have a sense of what as a student I felt comfortable wearing and I've taken note of what students in general wear currently and thus usually align myself more with the student than what Coffey (1999) refers to as professional.[101] I went about the data collection as part of the fieldwork as my 'usual' disability officer self.

Data Collection

As outlined in the methodology section, in the reflexive ethnographic approach everything, including what is seen, heard and observed, is data; however, Silverman (2001, p.64) warns, that it is not possible to report everything.

Data collection were undertaken in several ways. In the everyday work of a disability officer, student interviews are de rigueur. Interviews are required to carry out needs assessments and to plan individual supports. These interviews, which guarantee confidentiality to the student, are considered as data, in as much as the disability officer has access to and is aware of their content. In the interests of confidentiality and ethical considerations there are no transcripts of these interviews offered as fieldnote extracts[102]. Describing the interviewing techniques/approach that I employ as a disability officer is

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[101] In discussion my supervisor and I wondered whether I could possibly be a relaxed professional. Does being one militate against being the other? Are they necessarily mutually exclusive? The initial question needing to be answered is whether or not as a disability officer I occupy a professional role. This study answers that question – see Findings and Discussion Chapter.
[102] What could and could not be reported from fieldnote transcripts is addressed also in the chapter on Ethnographic Analysis and Understanding.

not to generalise the interviewing processes of all disability officers. It might, however, be expected that there could be as many methods/techniques employed in such interviews as there are disability officers. Hammersley (1983 p.113) says that "the interviewer must be an active listener" and it is the case that as a disability officer my experience in interviewing students with disabilities, particularly at times of needs assessing, calls for active listening. This could be cut considerably (and what follows too) by commenting on what Hammersley, Ellis et al. suggest in relation to interviewing and how you could as a researcher differentially use your skills as a disability officer when gathering data from interviews.

To take an attitude that the 'way to interview' – even for research purposes – must conform to some theoretical underpinning or framework has not sat easily with me (unless in relation to survey type questionnaires). I consider my approach to be successful, based on the information I glean from interviews.

Having trawled through the literature I found the nearest 'fit' in Ellis et al.'s (1997) work, 'Interactive Interviewing: Talking About Emotional Experience.' While it is not a complete fit, there are many aspects that I can identify with comfortably and would point out, that as all people are individuals, so too are all interview experiences unique - for both parties. I suspect that no matter what 'technique' is used, if honesty were to prevail, such techniques are often abandoned in favour of what 'works' in the particular situation.

Interviewing technique is not the only factor to be considered in successful interviews. Communication is vital and for some people with disabilities this can pose problems around accessibility, e.g. those with a hearing impairment. Issues of accessibility in relation to interviewing have not been an issue to date, as no student registered with the disability office is an Irish Sign Language user. A number of hearing impaired students do lip read and disability officers are familiar with the process of interacting with students in the particular cohort.

It might be expected that interviews between a disability officer and a student in higher education would follow the traditional lines: a hierarchical interview situation where "interviewers reveal little about themselves, aloofly ask questions in one or two brief sessions, and little or no relationship with respondents" (Ellis et al. p.122), but this is not necessarily the case.   That it might not be aligned to the therapeutic approach, might also be expected, but as intervention is *usually* a requirement and change is *sometimes* a requirement[103] it is obvious that elements of the therapeutic interview might be found. The interview between a disability officer and a student is not bound by rules relating to therapist and client, though of course it is bounded by professional approaches and considerations. Looking at interpretivist approaches where self-disclosure is encouraged on the part of the researcher, Ellis et al. in citing Bristow and Esper, (1988) come closer to the mark when talking about "promoting dialogue rather than interrogation" p.123. Therefore the approach to the interview (meeting) with the student might be considered to fall into the category of interactive interviewing, even if not wholly fulfilling the remit.

Telephone calls and other contacts for example, e-mails, contacts with students, staff, Government Departments, agencies, parents, schools, etc., form a large part of the everyday work of a disability officer. Where these offered something of interest they were written up in the fieldnotes whilst also held as data in the appropriate files in the disability office. Attendance at meetings, seminars and conferences are also considered to be data for the purpose of the study.[104]Any offering considered appropriate and falling within the ethical guidelines was written up. Frequently, conversations with students or prospective students were held in locations outside the office environment and these too were data. Awareness of the Data Protection Act and Freedom of Information Act was kept to the forefront when considering what to include as data.   Such awareness is already carried by the disability officer in the day-to-day work of the role.

Staff agreed that I could tape several of our meetings and gave me permission to use the content as data for the research.   An unexpected addition was a conversation recorded

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[103] Italics-mine for emphasis

[104] When I met disability officers, conference speakers etc., it usually resulted in additions to the fieldnotes. Such meetings often offered other opinions on which to reflect in relation to previously written fieldnotes.

with a disability officer who was exiting the work at the time of the research. Knowing of the research it was agreed that we would talk about the individual's experience of, and reasons for leaving the post. While this study is not addressing issues of disability officers outside of the study setting, this encounter was an everyday work experience of the ethnographer as disability officer and as such it was recorded as data.[105]

Fieldnotes

> Fieldnotes describe places, people and events. They are also used as textual space for the recording of our emotions and personal experiences.
>
> (Coffey 1999, p.119)

In starting to write, as outlined in the methodology chapter, Jenny Moon's approach to writing was useful. Indeed the initial writings were quite descriptive but a little uninteresting. However, after a little time and with more effort, a definite move in the direction of asking questions of and pondering answers in relation to fieldnote contents took over. Emerson et al. (1995 p.27) suggest that the fieldworker should not omit strong personal reactions in the fieldnotes. Denial of such reactions is not to be fostered. In reflecting, it is important to take account of the fact that such reactions are unique and may not be shared by others in the setting.

Coffey (1999) suggests fieldnotes can have different roles, one public, the other private. They are often kept physically distinct as; descriptive and analytical notes, and personal diary/journal. I organised my fieldnotes in this fashion, but not because it is "indicative of the uncomfortableness we feel about including the personal as part of the fieldwork process" (Coffey 1999 p.57) but because I found it a practical approach. When exploring the issues of rigor and validity I discovered that "one of the strengths of ethnographic enquiry is the real involvement of the fieldworker in the setting under

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[105] This conversation or extracts from it, did not form part of the writing up of this study. The fieldnotes were gathered at the time when it was not known to the ethnographer as to what would be useful or not for analysis. It is however, an example of how an enormous amount and variety of data can be gathered when undertaking ethnography. It is also important to point out that during the time of the study and since its completion a number of disability officers have left posts – this individual is not therefore singled out in any way that might impinge on anonymity.

study" (Coffey 1999 p.36) and noted that the interplay of the personal and work tasks should be engaged with both from their "practical and emotional production" (Coffey 1999 p.57). My desire to be authentic could be met by "placing the biographical and narrated self at the heart of the analysis" which "can be viewed as a mechanism for establishing authenticity" (Coffey 1999 p.117). To establish authenticity by placing self at the heart of the analysis, self must first be visible in the fieldnotes, thereby eliciting data to come to an understanding of the role of a disability officer. Making the self visible can also be viewed as "a strategy for a more reflexive practice" and ensures that as researcher I am not culpable of 'silent' authorship – writing the text without a visible presence – thereby working against the spirit of contemporary ethnography (Coffey 1999 p.127-133). In writing my fieldnotes in the first person, with other voices - as attention shifts between self and others - I wrote what I saw, experienced, and remembered from my perspective. This is justified in this study, as it allows the audience to see incidents through the 'insider' researcher's eyes" (Emerson et al. p.53). This visibility of self offers insights into the everyday work of a disability officer.

Daily fieldnotes routine

I undertook daily 'jottings' in a notebook using a form of shorthand called Pitmanscript. I was self-taught – from a manual - in this shorthand method where in a previous role, reports needed to be undertaken with speed. It now proved very valuable, as my jotting was, in effect, for the most part in code. In the 'jottings', however, it gave me a sense of security that even in what might be termed 'open' writing situations I could use the shorthand. It also meant that if anything ever went astray there was an inbuilt code to be cracked before anyone else could access the content. I kept these jottings with me and transcribed them in the evening onto my laptop at home, thereby keeping a log. As I typed, I added my own thoughts, in a separate paragraph, often stopping, having written a particular piece and reflecting on it. While this was very time-consuming, it offered me the opportunity to reflect on practice in a way not possible in the busy locations that make up my work environment. When the collected data were written it was put in a fireproof 'strong box' with a lock, which became known as 'the locked box'.

Emotional labour in the field

Emerson et al., (1995 p.27) suggest that the fieldworker should not omit recording strong personal reactions in the fieldnotes. Feelings should be registered, stepped back from and "the experience used to increase sensitivity to the experiences of others in the setting." While I agreed with their point, I felt that I had some rights to my own feelings, those that belonged to me only and not shared or experienced by others in the setting. I did write them up which allowed me to think them through and in many instances, dissipate them. Frequently, my frustrations remained. As Emerson et al. (1995) suggested, the difficulties experienced by me in the writing led to reflection around the difficulties experienced by dyslexic students. Content at an emotional level might not necessarily be their difficulty, but I was sensitised to their difficulties.

I experienced my own difficulties with the writing, when in reflective mode in particular, finding it impossible to write anything without giving thought to the content, the context and the questions that arose. While theoretical perspectives and understanding were not necessarily apparent, sought or reached during the writing phase, they did come to mind, often with thoughts of possible further work that might reveal meaning and understanding. For me, reflection was carried on also as I wrote. Descriptions of events were difficult to hold in mind alone, without my fleshing them out with my emotional responses. This for me was particularly necessary if the content was difficult, if it was anger or sadness provoking. I was loath to leave the writing without reflecting, for my own sake. In probing deeper it was always fruitful for the student too; I understood their needs better. The outcomes echoed Clarke's statement:

> The inclusion and documentation of emotion in the production of knowledge and in feminist epistemology is achieved, *inter alia,* by showing the synergism between emotion, observation and the development of new insights, and by demonstrating the need for theory to be self-reflexive.
>
> (Clarke 2001, p.98)

While the process of writing up the jottings took place most evenings, there were several occasions when I just could not set to it. Thus my fieldnotes have entries like, 'writing

difficulties'– again, when I wrote quite a number of pages outlining how I felt, how difficult it was to reflect, and how this was really like working two jobs, one in the daytime and one in the evening. Each time when I wrote about how I felt, I was able to go on with the typing, even if, at times, the write up was thinner. However, exceptional time frames existed, when it was necessary to type my interview.

The encounter which yielded the fieldnote that later became the focus of the analysis in this study took place in January 2005. A statement made by a student, Seth, during that encounter was unexpected. Seth said:

> I've been to loads of people in my life but they never listened
> They never understood, you listen, you care.

Fieldnotes, 20th January 2005

I found myself not only reflecting on the experience but contemplating its meaning as one that might impact not only on my working life but on my understanding of my role of a disability officer, and of course, by extension the research.

Exiting the Field

For a disability officer, who does not resign during the research, the field remains as a place of work. For me the timeframe of the study stands out as a particular time in my working life. I have been left with a sense that though I visited no exotic location I did 'go somewhere'. I had lived my ethnographic journey right on my own doorstep as it were. The fieldwork brought with it a sense of the work being extended almost into space, that my time would never be personally mine again. Reflecting on the time of my data collection in the field and my participant-observation role in it, Wolcott's (1994 p.289) statement rang true: "the least touted feature of field research has been its potential for involving researches so totally that it has a profound effect on their lives."

The timeframe for the collection of the data was outlined when initialising the study and students/staff were informed that the period designated to data collection was the

academic year 2004-2005. Several people, both staff members and students made references to the research throughout that time, but I would suggest that not one of them could have given me the completion date, as it was understood from the start that I would not be exiting the work even though the data collection in the field would be completed on a particular date. Therefore, because of my continuing to work as a disability officer in what was the field for a full academic year, no preparations for a final day were required. I continued my everyday work but with an awareness that although the data collection was completed the fieldwork was not over. That would only be the case when the last word was written.

Conclusion

This chapter explored fieldwork as an ethnographic process. Access and the attendant relationships in the field were examined. The multiple identities of the researcher as ethnographer were looked at from the perspectives of the brought self to the field and who the self became in the field. Aspects of the ethnographer as insider and marginal native who undertook the research as a participant observer were given attention. Data collection and the routines around fieldnotes were described, together with the emotional labour in the field. Exiting the field, where the ethnographer continues in the role of disability officer was addressed. The chapter demonstrated that my experience of fieldwork as a researcher illuminated my role as a disability officer.

CHAPTER 5

Ethnographic Analysis and Understanding

Introduction

The methodology chapter dealt with Agar's (1985) protocol from the perspective of its use as a method for the analysis. That chapter also addressed ethnography as a research approach at some length. In this chapter I, as ethnographer, grapple with understanding and implementing Agar's (1985) protocol as the framework for the analysis. In tandem with this, I tackle the matter of ethnographic understanding.

This chapter refers to the theoretical framework for the analysis within the description of the reality of the analysis as undertaken. An overview of listening is given in this chapter as listening is pivotal to the analysis and understanding of the segment which is the focus of the analysis. The story underlying the segment is told. How the understanding of the segment is achieved, tested and agreed is also dealt with in this chapter.

The Reality of the Analysis as Undertaken

In reading the fieldnotes for the purpose of the analysis, a problem presented around what could be written about, given the informants' content. For some time, it appeared that little phenomena of interest could be used as strips without facing dilemmas in relation to what the literature spoke of as negative publicity, organisational politics, etc., when researching in large organisations, together with matters relating to confidentiality and anonymity (Wolcott 2001, Van Maanen 1988, Agar 1985).[106]

This section offers the selected strip, which was segmented. Schemas were built and applied, with paths taken towards resolution and coherence. The strip that is core to the

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[106] In looking at what could be written about, Seth's statement remained in my mind as a possible strip. My thinking focused more and more on the fact that the breakdown needed resolution and coherence. In the reading and re-reading of the fieldnotes the possibility of using the statement as a strip came to the fore. On reflection and over time the decision to do so was taken.

analysis was selected because it 'stood out' (Wolcott, 1995), offering a unique statement from a student with a disability around the subject of listening.[107]

Listening as a function of the everyday work of a disability officer

Active listening (face-to-face contact with the individual) is a dynamic process, whereby a person hears a message, decodes its meaning and conveys an understanding about the meaning to the sender (Arnold & Boggs 1995, p.202). In the communication process active listening is as important as talking. Defensive listening takes the form of ignoring or immediately rebutting a complaint, reacting to it as though it were an attack. Non-defensive listening is the ability to listen past the anger, to hear the main message. The most powerful form of non-defensive listening is empathy (Goleman 1996, pp.145-6).

Milton (2000 p.53) speaks of benevolent listening, listing its characteristics as: non-interrupting[108] the absence of advice or comparisons,[109] empathy[110] and the absence of judgment.[111] Burton (2002) says compassionate listening involves hearing the story of another while withholding judgment and maintaining appropriate boundaries.

'Listening for' plays a part where the listener is listening in a caring capacity. My experience as a disability officer suggests that it is possible to align what a nurse listens for (Arnold & Boggs, 1995) with what a disability officer listens for – see Table 5.

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[107] As stated in the introduction to this chapter, an overview of listening is first offered. Listening as part of the every day work of a disability officer is attended to, with excerpts from fieldnotes and examples from the research setting.
[108] Non interruption is allowing the other person reach the end of their idea.
[109] Someone's lived experiences are unique and belong to them.
[110] Empathy is the capacity to be truly interested in someone, the way they live and what they feel.
[111] The distinction must be made between judging someone's behaviour and judging the person themselves.

Table 5. What the Disability Officer Listens For
(Based on Arnold & Boggs (1995 p.211) – What a Nurse Listens For)

Content Themes Communication Patterns	What is not being said as well as what is being said?
Discrepancies in content, body language and vocalisations	The student's preferred representational system.
Feelings, revealed in a person's voice, body movements and facial expressions	The disability officer's own inner responses.

Listening is a function of the disability officer's role which blankets the everyday work, both the visible and the invisible. Adapting Arnold and Boggs' (1995) table of *Phenomena of Concern in a Psychosocial Assessment* (see Table 6) it is possible to present a table (see Table 7) to explicate a core function of the disability officer's role, that of needs assessing students with a disability.[112] The list on the left of table 7, relating to disability needs assessment mirrors that of Arnold and Boggs, (1995) (Table 6), which suggests that some aspects of assessments carried out by nurses and disability officers have common elements – at least in the areas of psychosocial assessments and disability needs assessments.

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[112] They are presented one following the other for ease of comparison.

Table 6. Phenomena of Concern in a Psychosocial Assessment
(Arnold and Boggs (1995)

Comfort/ pain	Spirituality
Growth and development	Psychosexuality
Perception	Self-concept
Psychological state (mood, level of anxiety)	Self-esteem
Stress	Family/ social relations
Security/ trust	Sociocultural attachments
Communication	Suicide assessment
Mental status (orientation, cognition)	Teaching/ learning needs

Table 7.   Phenomena of Concern in a Disability Needs Assessment
(Based on Arnold & Boggs (1995) - Phenomenon of Concern in a Psychosocial Assessment)

Comfort/Pain	Previous/Current Supports (if any)
Growth and Development	Impact of disability on course of study
Perception	Extra Requirements attached to the course of study e.g. fieldtrips, placements
Psychological state (mood, level of anxiety)	Appropriate evidence of disability Learning support needs
Stress	Assistive technology and IT abilities
Communication	History of previous education
Mental status (orientation/congnition - in certain cases in a disability assessment)	Supports required in the present setting Personal data/other information

It is evident from the phenomenon of concern relating to the undertaking of a disability needs assessment that listening is a core requirement on the part of the disability officer.[113]

As needs assessment interviews are a major function of the disability officer role it can be demonstrated that listening is core to the work of a disability officer. This listening role is demonstrated further in the next section which addresses meetings the disability officer engages in as part of the everyday work.

Meetings the disability officer engages in as part of the everyday work
Meetings with students occur on a daily basis in the work of a disability officer. Many students with disabilities 'get on with it' when the practical solutions around their supports have been put in place, contacting the disability officer when something needs to be changed, for example, extra support factored in to the support mix or when their circumstances have altered in some way. Some students request frequent contact – often not stated verbally but implied by the fact that they knock at the office door, ring or meet me in the corridor and ask can they come and talk to me. Often, they do not outline why they want to meet me at this point in the contact, but I will always agree to meet a student as soon as is possible within the demands of my diary. Students tend not to use the word 'urgent' in their requests for a meeting. Detection that the request is perhaps urgent is achieved on my part by attending to the student's 'clues' that 'say' the matter is urgent, such as the language and the tone of voice used by the student. "Active listening is a skill for recognising and exploring [students'] clues" (Lang et al. 2000, p.222). Not all meetings are necessarily of the type that calls for patience and encouragement on my part to engage the student. The following scenario, taken from the fieldnotes, is a good example of such an everyday engagement with a student.

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[113] The work of needs assessing calls for: closed questions, where a yes or no answer suffices - the goal is to elicit information/facts, open ended questions, where the answer is open to interpretations and concerns - goals and values can be elicited in their use. Circular questions can be posed, which focus on the interpersonal context of the student's disability, giving information around family interactions and involvements (Arnold & Boggs, 1995).

The encounter took place in my office. It was the first day of a new academic year. On meeting the student, a young male, who walked languidly into my office unannounced, with the backpack on his back hitting the door with a loud thud, I asked, addressing the student by name:

> D.O.: Hi, how are you? Did you have a good summer?
>
> Isaac: I was working on the buildings with my uncle for the summer, t'was great.
>
> D.O.: That was a great bit of experience for you. Did it help to make the theory on your course more understandable?
>
> Isaac: Yeah, I worked hard though, now I can see why it's important to have the bit of paper like. I'm goin' back again next summer, the uncle said I did a good job.
>
> D.O.: That's great. Is there anything we need to have a chat about around your supports for the coming year?
>
> Isaac: No, it's all grand. I just wanted to let you know I'm back … touch base like.
>
> D.O.: Right so, you know where I am.   I'll be in touch by phone about a meeting early in the semester just to see how things are going with you.
>
> Isaac: Right so, see ya.

He left the office, banging the backpack on the door again.

Fieldnotes, September 2004

Such meetings are relaxed and usually around telling me something that has happened in their work lives, or their personal lives, e.g., that someone got married in their family, had a baby, general chitchat[114] type of interaction.[115]

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[114] Kennedy (2002 p.716) speaking of her study on patient care states that "chatting about everyday things was a strategy aimed at making patients feel at ease and equal in the relationship."

[115] It is giving time to these small interactions on a frequent basis that I believe builds up trust and rapport, making further exchanges possible and easier than they might otherwise be, both from the student perspective and mine. My work colleague David shared similar thoughts also at the time I checked my understanding of the student statement with him.

Self-disclosure of the disability officer when meeting parents and students

An insight into a) the content of meetings with students b) meetings with students and their parents/others is offered to give a flavour of the everyday listening aspect of the disability officer role. The issue of self-disclosure of the disability officer is addressed also in this section.

Student disclosure is to be expected in exchanges between any disability officer and a student. The issue of self-disclosure during meetings, on my own part, as disability officer is one that required reflection. As part of this reflective process during the research, I read Beach et al.'s (2004) study[116] to examine my own practice. I do, from time to time, disclose minimal amounts of information about myself. Always, in line with Beach et al.'s study it is in relation to reassurance. This reassurance is most often aimed at parents of students, where the student is about to embark on third level education. I meet with the prospective student with a disability, and with whomsoever the student wishes to bring along to the meeting. This is usually a family member, or the entire family. I believe the inclusion of family or friends helps the student and family feel more relaxed about the upcoming experience of third level education. I sense from their questions and statements that they are concerned, as it might well be the first time the prospective student has left home or been away from parental care for some length of time.

Disability officers need to be aware of the role of the family in the life of a young student who perhaps until very recently has been in the category of 'child'.[117] Often, students with disabilities at third level educational institutions as young adults, together with their parents are in a phase of transition from pediatric care (up to age eighteen years) to adult care in relation to their disability. Rettig and Athreya (1991) point out the changes extant at this stage: changes in type and level of support, change in decision making and consent

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[116] Beach et al.'s (2004 p.915) study addresses issues of boundary violation in relation to self-disclosure of doctors to patients. They describe self-disclosure as empathic. They hold that their study results confirm that reassurance is a mainstay of self-disclosure.

[117] Becwith (1990) says it is self-evident that parental input forms one of the most critical components of the child's development and emotional world.

process, marked reduction in family participation and reduced tolerance and sensitivity to the psychosocial issues of disability. The disability officer needs to acknowledge that parents, perhaps, are in this transition stage alongside the student. Beckman (1996) says that in using active listening the practitioner establishes a relationship between her/himself and the family that is built on respect, non-judgmental attitude and empathy - what amounts to a caring relationship. The use of active listening on the part of the disability officer in meetings with students and families would be expected to have a similar outcome.

In interacting with families the disability officer is cognisant of the varying family constitutions. Frude (1991) says dysfunctional families may have extremely permeable or impermeable outer/inner boundaries. Those with an impermeable external boundary derive few benefits from their environment and may refuse offers of support or treat those who offer help as intruders. Some families are too open. They show little self-determination and have a poor sense of identity. They come to rely on outside help too much and retain little privacy.[118]

On meeting me, parents state that they now have a 'face' to identify as supportive, adding that they are now 'more relaxed about the whole thing'. As mentioned, part of getting to this point, I believe, is reassurance. For parents in particular, some small amount of appropriate self-disclosure on my part, e.g., that my own daughter has a disability, is frequently met with a visible relief that I know and can empathise with their experience as a parent. Sometimes the prospective student will ask if my daughter went to third level and they appear reassured when I tell them that she did, and successfully too. An extract from the fieldnotes around a meeting with parents is offered here as an exemplar.[119] At the end of the meeting, as is often the case in my experience, parents voice their concerns on a more personal level as an extract from the fieldnotes shows;

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[118] In meeting families, the disability officer draws on all three areas of knowing: received knowing – accepting authority as a source of truth, (*medial evidence*) subjectivist knowing– defining truth as personal (use *of gut-feeling and intuition in particular*) and procedural knowing – use of systems and methods for knowing (*theoretical and factual information*) (Goldberger et al. 1996, p.94).

[119] The occasion was a meeting with parents (mother and father) and a sibling of a prospective student who had just been offered a place on a course for the upcoming academic year.

Mother: I'm really worried, I hope she'll be alright, she's never been away from home before. Do you think it'll be alright?

D.O.:   Well, the practical solutions around the supports that we've identified today as helpful will be put in place and we're all agreed on these, aren't we?

Father: Yes, it all sounds like everything will be ok, it's great to know what can be put in place and now that we've met you and can put a face to the name, well …. that's a great help.

Fieldnotes, April 2004

Mutuality as an element of such meetings is evident, as agreement is reached around the issues under discussion between the parties, whether it is students alone or meetings with parents /friends and the student.[120]

Listening by the disability officer in meetings often requires awareness around the elements Rogers (2004) draws attention to: avoidance of evaluation, judgment, approval or disapproval. Listening presented as significant in the strip chosen for analysis. The selection of the strip is now addressed.

The story underpinning the selection of the first strip

The selection of the strip(s) is a major function of data analysis toward ethnographic understanding. The strip, with its resolution and coherence shows "how the single case fits into some larger scheme of things by giving context" (Wolcott 1995, p.137). It is relevant in ethnography to tell the story behind the single case and how that single case was the subject of the breakdown, which led to the strip (subsequently the segment) that is core to this analysis.

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[120] Arnold & Boggs (1995 p.112) say that where mutuality exists it implies a "dynamic partnership characterised by respect for the autonomy and value system of the other." Rogers (2004 p.330) points out that the major barrier to mutual interpersonal communication is "our natural tendency to judge, evaluate, to approve or disapprove …" Rogers (2004 p.333) offers the antidote to such evaluative tendencies which prevent good interpersonal communication. He says that real communication occurs and the evaluative tendency avoided when "we listen with understanding."

Seth was a young student with a mental health disability who met with me every two weeks – an agreement we both came to together in an earlier meeting. Seth agreed difficulties had begun to present themselves – modules failed and falling behind on coursework due to unwillingness on his part to attend lectures and undertake the required set pieces of work, e.g., assignments and projects.

Seth was eighteen years old when he commenced his third level education and registered as a student with a disability. During our first meetings he appeared reserved, sometimes withdrawn, rarely initiating interaction. He would sit with his eyes averted, twisting his fingers round each other. Having a mental health disability had proven extremely difficult throughout earlier schooling and was again proving problematic for him. While undertaking his course there had been some behavioural difficulties and agreements had to frequently be made between us in relation to the completion of his coursework. With a high intelligence, he always seemed to enjoy challenging me and on one occasion when I revealed something I knew in relation to a behavioural problem of his, which a staff member had reported to me, he replied:

> S: So, is it a fascist regime you run here then?
>
> Fieldnotes, September 2004

I admit to being taken aback somewhat at the time by this remark. I went on to point out that the report to me had been made with the best of intentions, for his safety. The staff member who reported the incident was concerned about him, I told him, and had informed me as someone who might be in a position to offer some support to him. We discussed the possibility of counselling which he had been very resistant to, previously. Seth gave an undertaking to think about counselling further and to let me know his decision. We then moved on to our planning of his work.[121]

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[121] I reflected on the incident immediately after he had left my office and I felt satisfied that he had understood that the intention in the reporting of the problematic behavioural incident was around supporting him. I had a suspicion also that there was a sense of humour lurking somewhere in Seth.

My meetings with Seth were about keeping the coursework up to date, with him outlining at each meeting what his working status was at the time in relation to the coursework. Together we plotted and planned a schedule to which he agreed to keep for each upcoming two-week period. This was achieved more or less consistently by Seth.

It is not a usual remit of the role of the disability officer to meet and plan work with students in this way; it is the role of learner support tutors.[122] I had endeavoured to locate a support tutor who could meet Seth's needs. He also needed to be worked with in a quiet environment where other students were not present. The efforts to locate a tutor were unsuccessful.[123] One person approached about undertaking the work with Seth stated: "The challenge would be too great; I don't feel I have enough experience with the problems involved" (Fieldnotes, October 2004).

I made the decision to undertake this work with Seth myself, as I had the experience, knowledge and training (and knew Seth well at this stage) to offer the support he needed. When I conveyed this decision to him and asked what he thought about it he replied: "Mm, that's fine with me" – followed by silence – (Fieldnotes, September 2004).

This was the point from which our work together started in earnest. Each meeting built better rapport and I sensed at last a willingness in Seth to more or less fully engage with me as a disability officer and as a person. A shared vision (his and mine) of his graduation, which we often talked about, was the driving force for his desire to succeed. He did not seem particularly interested in the work he might undertake later in life, but he perceived his graduation day as a significant milestone for him. To graduate with his peers became of immense importance and was the motivation when modules had to be repeated alongside the on-going coursework.

It was from this background that Seth made what was a unique statement, clearly and unambiguously. On the particular day when he made his statement, he arrived at my

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[122] Learner support tutors are employed as disability office staff. Their role is to support students with disabilities in their learning, by means of structured support around planning, organisation of work etc.
[123] I did succeed in locating a suitable tutor for one year of Seth's course.

office at the appointed time for his usual 'catch up' two-weekly session, entering slowly and a little hesitantly as he usually did.[124] This time he seemed a little more willing to engage.

In earlier meetings when Seth spoke of his history of mental illness and his difficulties he usually muttered and had difficulty with eye contact. I began by asking how things were going.[125] We then moved on to working on the computer together. He demonstrated a piece of work he had completed.[126] It was not necessary for me to know the content of his work in order to support his planning and organising, which were his problem areas – his work content (based on results) was excellent. We worked to a master plan and at each session 'ticked the box' around what had been achieved and examined what needed his attention next.[127] To wind up the sessions with Seth I generally went back to a chitchat type of conversation. Seth always enjoyed comment on his clothing and indeed frequently invited such. On the occasion of the session in which the statement was made he asked:

Seth: What do you think of the colour of my top?

D.O.: I think it is a really nice colour and it looks good on you.

Seth: What about the jacket?

D.O.: You mean the colour or the style?

Seth: The colour.

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[124] In this case there was no requirement for me to watch for what Browne (2004) describes as 'pain behaviours' as the student was not in any physical pain due to his disability (a mental health disability). How the student 'looked' was something I observed as he frequently would not make eye contact or he shuffled along, often I had learned from experience an indicator of his mood.

[125] I engaged Seth in small-talk. We agreed several times on issues. Such agreement, Browne (2004) says creates rapport.

[126] As my computer literacy is not strong and this was his area of interest I usually asked naïve questions, to which he gave me detailed answers in a very proficient manner and with what I perceived as pride.

[127] Seth derived a sense of satisfaction from 'ticking the box' and would, in phone calls to me as follow-up, refer to being almost ready/ready to 'tick the box'.

D.O.: The colour is good, it goes really well with the top – see how you can see the two colours coming together there at the top?

Seth: It's good alright.

Then, quite suddenly, he stated:

Seth: I've been to loads of people in my life but they never listened, they never understood, you listen, you care.

Fieldnotes, 20th January 2005

I felt immediately the impact of the statement. I admit to replying only "I'm glad you feel that". I did not pursue it further, perhaps because I was taken aback by such a direct statement from Seth, given that this was not his usual way of interacting. I then said:

D.O.: Well, give me a ring if you have any further questions about what we covered today.

Seth: I will.

D.O: Bye, see you soon.

Fieldnotes, 20th January 2005

Seth went on his way, leaving me with a statement I needed to examine further. I did not realise fully at the time that I had just experienced the moment of breakdown. Immediately on his departure I did not have time to think more on the statement. I noted the contents of the meeting quickly. It did cross my mind from time to time throughout the day as something I would reflect on fully that evening.

During the writing up of the fieldnotes/reflection, I deliberated on the numerous times I had written about Seth, even prior to the time of the collection of data. I recorded the difficulties not only I experienced with him but also times when others had reported issues to me. I reflected around our encounter earlier that day. I had not asked Seth

anything in relation to listening or caring. It formed no part of our work together in reference to his coursework; the subjects of listening and caring were not mooted or addressed in our meeting. Where the ethnographer is surprised and the statement is not intended are the hallmarks of an 'occasioned breakdown' I noted. In the endeavours to eliminate the breakdown an opportunity to discover new knowledge would exist, perhaps leading to outcomes that could impact on the everyday work of a disability officer. I wondered what theories, if they existed, might illuminate the statement. I needed, as ethnographer, to explore the statement for understanding. To do this it was necessary to take the step of applying Agar's (1985) protocol to move from breakdown to resolution to coherence by applying schemas.

To use the statement as a strip for analysis, and apply a schema(s) to it in order to achieve resolution and coherence required starting at step one[128] by lifting it out from the data. This necessitated a review of the data for analysis. What follows next in this chapter is a description of how I undertook that review.

Reviewing the Data

In reviewing the data for analysis it was essential to keep in mind that this was an exercise in public reasoning from strip to coherence. This suggested that there should be a flow of information, written informally, to allow readers to follow this reasoning. To allow for such a flow, Agar's (1985) protocol is set out in this section of the chapter by first outlining the selection process of the strip and then presenting it. Explanation of how I reached the decision to segment the strip for analysis is offered. Following on from this decision the application of schema(s), leading to new knowledge that in turn leads to resolution and then to coherence is described[129].

To assist in the planning and the sequencing of information, a large whiteboard was employed, where I drew up an outline of the data review. All data analyses were

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[128] See Table No. 3 in the Methodology Chapter for a description of Agar's (1985) protocol
[129] Keeping my decision to write in accessible language to the fore, the language used in describing the analysis process is intentionally informal.

undertaken in my home, where fieldnotes[130] had been stored in a locked box. Using space in my home for the task of the analysis allowed me to spread paperwork out and to take breaks as required without having to reassemble the paperwork on each occasion of my data analysis.

The review of the data commenced with a re-reading of the complete data as compiled from the fieldnotes.[131] The use of white paper was chosen to allow for their manipulation, using colour to identify usable sections.[132] As the data were reviewed, the relevant pieces were highlighted in colour; green for data that would form part of the corpus of data which contained possible strips and pink for data that might be usable. Notations in the margins using green or red colour were made to draw my attention to sections on each page that held possible strips, e.g., where students had mentioned issues or used words relevant to listening and caring. I had in mind at this point that these were the words that would be focused on in relation to the building of schema for understanding. These notations were rated as to usefulness by being given a number, one to three. Yellow stars (drawn by me) at the top of any given page denoted that the possibility of a strip existed in these particular pages. I had decided at the outset of the research that I would not use a computer to assist in the analysis. The 'hands-on' manipulation of the paperwork method I used falls into what Agar (1985 p.65) described as "the usual old fashioned ethnographic way."

Lifting out the strip for analysis

The data were first searched by date for the sheet containing the data that would become the proposed strip. The date was indelibly stamped in my mind, Thursday, 20th January, 2005. I had also marked the date at the time with a 'sticky tab' in my diary, which read 'date of possible breakdown'. The A4 sheet was taken from the appropriate data folder, simply entitled 'Fieldnotes'. The section on the page was highlighted in green, given the number 1, and a yellow star was drawn on the top of the page.

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[130] Fieldnotes have been dealt with in full in the Fieldwork Chapter.
[131] These had been typed on to A4 white paper.
[132] Having tutored dyslexic students, the use of colour to draw out and highlight pieces of relevant information embedded in text is an ability I have honed. The data were reviewed and highlighted with the appropriate colours.

The strip was further explored and while the whole strip (broad focus) is used in the story of how the informant/student made the statement from which I identified the strip, I thought it best to examine if segmenting it would allow for a narrower focus in the application of a schema. Reflecting on the encounter/meeting with Seth, I realised that my surprise at the time of the meeting most certainly had centered on Seth's comment "… you listen, you care". I easily came to the conclusion that my initial thinking on the matter of using this strip was correct and that marking it off into segments was perhaps the most useful way forward.

The decision to segment the strip

I examined the complete strip: "I've been to loads of people in my life but they never listened, they never understood, you listen, you care" (Fieldnotes, 20th January 2005). I realised that as I listened to the statement as Seth had said it, my surprise was peaked at the last section "… you listen, you care". This was perhaps because it referred to me with the use of the word 'you'. I understood this, at the time and subsequently on reflection, to relate to me as a disability officer. My 'ethnographic intuition'[133] prompted me to select the section of the statement "… you listen, you care" as a segment. Therefore, the segment offered for analysis is "… you listen, you care". I did not perceive this as two segments as there was a clear connection between the two elements of the statement "…you listen, you care." Having heard the tone in which Seth made the statement I was certain the connection was intended. Therefore, I treated the section "… you listen, you care" as one segment. What I sought was coherence of a particular segment. The specific segment was built and validated by the informant/student as unique, meeting Wolcott's (2001) provision for the offering of a unique segment for analysis.

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[133] Such ethnographic intuition is allowed for by Agar (1985) in the application of his protocol.

Lifting out supporting strips from the data

The data were then read further to discover if other utterances, segments, or strips similar in tone or content could be found and attributed to other informants or others in the field under study. This was done using the colour highlighting approach. There was no expectation as to what might be found when embarking on this element of reviewing the data. To expand the review of the data, additional words[134] were included; empathy, attention, words that resonated with Goleman's work in the areas of listening and care. Pragmatically, at this stage a number of 'in-trays' were put in place to hold the selected fieldnotes according to content. They were marked 'for use' and 'not perceived as useful right now'. Further in-trays were used for any relevant information discovered in the fieldnotes, for example, anything related to listening or caring. To expand the list of words that could be trawled for yet further I used a thesaurus to locate such words.[135] I included those words in the search of the data.

Application of my self-guided schema

Having decided on the segment for analysis, my first task was to apply understanding to the segment from my own tradition. My schema-guided expectation was that as a disability officer I carry out particular prescribed tasks.[136] These can be understood as the mechanics of the role. When the breakdown was occasioned, my difference in understanding was around whether the undertaking of such tasks met the student's need to understand listening as caring (an affective element of a role) and therefore, the student's perception of the disability officer role as a caring one. My questioning around this difference centered on the fact that the work of a disability officer includes student meetings. What takes place at these meetings is for the most part in the area of the invisible everyday work of a disability officer. In my fieldnotes around the visible/invisible work of a disability officer I reflected as follows:

> It often occurs to me; what would people tell me if I were to ask them
> what a disability officer does? They would probably say that I give out

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[134] In the initial review of the data the words listening and care had been searched for.

[135] In relation to the word 'listen', a listing included: attend, heedfulness, attention, thought, and awareness. The word 'care' showed synonyms, which included: serious attention, heed, with the use of 'care for' and care about' including: feel concern or interest, feel liking, affection, regard.

[136] These prescribed tasks are detailed in the chapter – Background to the Study.

laptops, that I arrange supports or that I meet students in order to apply for funding for them. Indeed that is true, but these are such minimal aspects from the point of view of the underlying invisible work.

<div align="right">Fieldnotes, 1st October 2004</div>

Further reflection on the matter of the mechanics of the role of the disability officer led me back to consider that whilst listening is a requirement in the implementation of such tasks, listening when meeting students moves the listening requirement into a somewhat different sphere. The notion of active listening sits in the affective element of the role – the idea of 'presence' – 'the being with' as opposed to the 'doing to'.[137] In this way, interest and a sincere desire to understand is conveyed to the person. This affective element is frequently part of the invisible work undertaken by a disability officer.[138] To build a schema to resolve the difference required delving further into the invisible aspects of the everyday work by addressing the listening and caring utterances contained in the segment.

Building a schema to apply to the segment

I had applied my existing schema and found it inadequate in reaching full resolution of the breakdown. A more robust understanding was needed to explicate the segment fully and totally eliminate the breakdown. New knowledge was required through which what was said by the informant/student could be more completely understood – to bring about resolution and reach coherence. To elicit this new knowledge, I went to the literature that addressed listening and caring. As this literature is vast, having read through diverse approaches,[139] I sought an author/commentator who dealt with these areas concisely. Having attended a Psychological Society of Ireland Conference (2002) where Goleman's work around emotional and social intelligences was discussed, I decided to investigate its possible use in this research. Having read his works I decided they would be useful in building a schema to apply to the segment.

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[137] This is referred to by some in the caring literature as the ability to remain physically, spiritually and emotionally attuned to a student's communication and being (Noddings, 1984).

[138] Leiserson (1998) says that skilled care in her work as a physiotherapist has remained largely invisible and it is difficult to defend when the emphasis is on the aspects of the work that can be counted.

[139] In the initial stages I looked at the work of Buber, particularly his work *I and Thou*. The content, which I thought initially promising for use in this research, was on examination not aligned with my requirements in building a schema – it was for my purposes, too esoteric.

The use of Goleman's work

Goleman's work (2006, 1999 and 1996) is based on the research of John Mayer, Peter Salovey, David Caruso (who posit emotional intelligence as mental ability) and Reuben Bar-On, researcher in emotional intelligence since the early 1980's (Newman, 2002). Emotional intelligence is the acknowledgement and understanding of feelings in ourselves and others, and then appropriately responding to them.

Goleman's work in the areas of emotional intelligence (1999, 1996) and social intelligence (2006) argue that our view of human intelligence is far too narrow and that our emotions play a far greater role in our lives than we think. Neuro-sociology is the science underpinning the approach that demonstrates how our brains are primed for meaningful connectivity with each other. This meaningful connectivity interested me as a possible way of building a schema to apply to the segment.

Listening and the link to caring

The main thrust of my exploration in the areas of listening and caring was to search for a trail that might lead from one to the other. After much reading around areas such as empathy, rapport, listening, emotional synchrony, attachment, care and caring, there was indeed an exciting period when the search yielded a satisfying outcome. The simple diagram below shows the circular and iterative process that supports an understanding that listening leads to care.

LISTENING

CARE

EMPATHY

RAPPORT
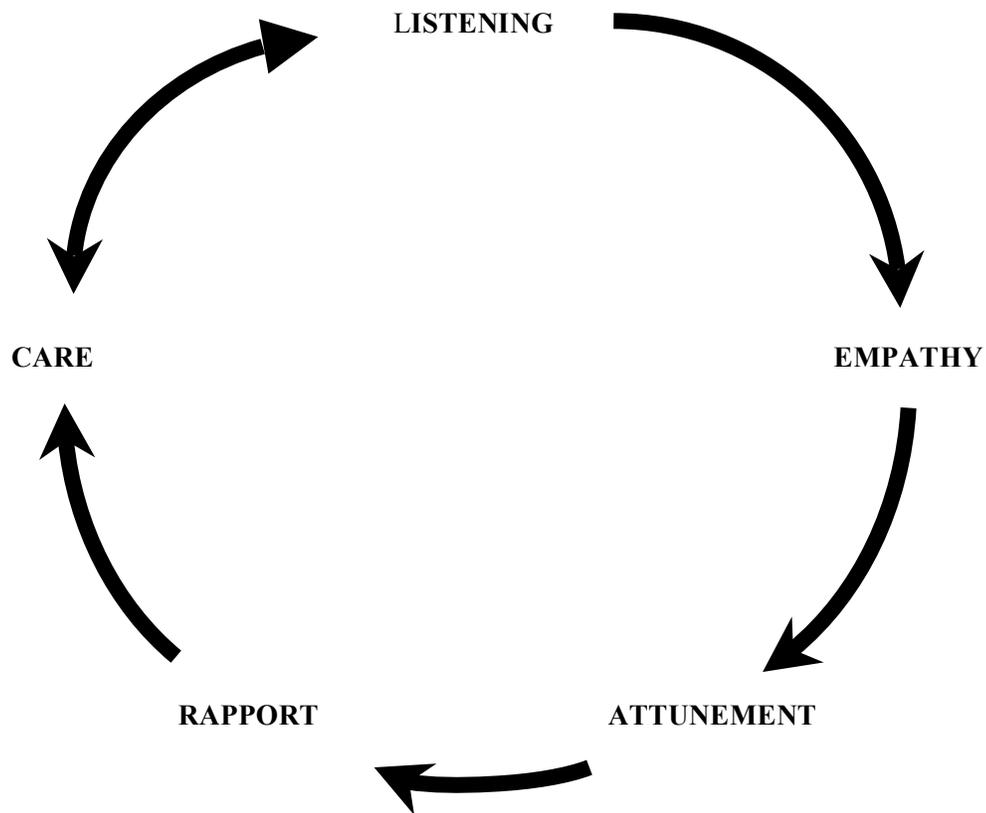
ATTUNEMENT

Figure 1. Stages leading from Listening to Caring – an adaptation of Goleman's (1996) stages of Emotional Intelligence

It can be seen from Figure 1 that the movement from listening through empathy, attunement, and rapport, to care is an iterative one. When care (caring) is achieved this results in a return to active listening again - as an element of caring - and so the process begins anew. Having created Figure 1, my next undertaking was to investigate each stage, making the connections between each, thereby building a schema to apply to the segment to illuminate understanding of it.

According to Goleman (1999 p.176) listening[140] well is the key to empathy. Empathy is actually *hearing the feelings*[141] behind what is being said. Paying attention when listening is active listening. Active listening has the following components: facing each other, making eye contact and sending the silent cues that let the speaker know that he/she is being heard [142](Goleman 1996, p.266).

Empathy

Empathy, as the ability to know how another feels is a component of emotional intelligence.[143] Empathy can be tested by having someone read a person's feelings from videos of that person's facial expressions.[144] In my readings around empathy the word feelings came to the fore again and again. It was no surprise, therefore, to discover that the word empathy is from the Greek 'empatheia' which means 'feeling into'. The roots of empathy can be traced to infancy with the ability being enhanced later in life (Goleman 1996, p.98).[145] [146]

Empathy and the link to attunement and rapport

The key to intuiting another's feelings is the ability to read non-verbal channels: tone of voice, gesture, facial expression and the like. Empathic ability is built on emotional self-awareness which requires the taking into account of one's own strengths, weaknesses and seeing oneself in a positive but realistic light. Empathic people are more attuned to the subtle social signals that indicate what others need or want (Goleman, 1996). Empathy

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[140] An overview of listening has been given earlier in this chapter.

[141] Italics – mine for emphasis.

[142] The encounter in which the student made the statement that became the strip took place in my office. Meetings with students there are held with the student and me sitting facing each other. No desk intervenes and we sit quite closely together.

[143] Emotional intelligence can be measured with the Multifactor Emotional Intelligence Scale, MEIS; Mayer, Salovey and Caruso, 1997, (Lam & Kirby, 2002).

[144] Goleman (2006 p.142) also acknowledges that "Empathy can be used as a tool for manipulation" saying that it frequently manifests as pseudoempathy. Goleman suggests that we may have "natural safeguards" against artificial empathy. We can sense when empathy is not sincere.

[145] Infant empathy was also reported on by Goleman in an article in the New York Times; Researchers Trace Empathy's Roots to Infancy. *New York Times, 13th March 1989.*

[146] Goleman (1999) says that the evidence for the existence of empathy in infants and toddlers contradicts the view offered several decades ago by Jean Piaget, who contended that children could not feel empathy until they had achieved cognitive abilities that allow for seeing things from another's perspective, around age 7 or 8.

differs from sympathy, which denotes feelings for the general plight of another but there is no sharing of what the other person is feeling. When the emotions of another person are met with empathy, accepted and reciprocated, a process called attunement is elicited (Stern 1998). Attunement gives the tacit sense of a deep rapport - a co-ordination of moods, stemming from the capacity for empathy. Goleman (1996 p.102) states, that the emotional synchrony is unstated and outside conscious awareness, adding that in therapist/client relationships, where emotional synchrony exists, the client may bask in the sense of being deeply acknowledged and understood. Acknowledging Goleman's statement that such synchrony is outside conscious awareness, I nevertheless can state that for my part I have experienced encounters with students where I felt acknowledged and understood, as discussed in the next section.

Emotional Synchronicity – an everyday example

In the following scenario I, as a disability officer, was offered an opportunity (during the fieldwork) for emotional synchronicity with a student of long-standing where both the student and I had met many times prior to the time of data collection for this research. Joshua was a student with a hearing impairment.[147] In discussing this research with him one day he said:

> Joshua: Ask me anything you like. I'll fill you in.
>
> D.O.: Will you explain to me what having a hearing impairment means for you?

<div align="center">Fieldnotes, 14th October 2004</div>

In answer to my question Joshua reached across to the desk, took pen and paper and drew for some time, not speaking much, only glancing in my direction from time to time. It struck me as he drew and wrote that it was a comfortable exchange, though I actually said nothing but followed his drawing and writing. This was a different listening role for me, a learning one, given in a very practical way. Joshua shared information around Deaf, deaf, hearing impairment. For him, this was subjectivist knowing – defining truth as

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[147] The past tense is used here as Joshua had graduated at the time of writing this section.

personal.[148] On reflection I realised that these are the type of exchanges that are part of the invisible everyday work of a disability officer, students from whom much is learnt and with whom emotional synchrony, based on deep rapport is experienced. Reciprocity, where "any knowledge gained either directly or indirectly that indicates a positive outcome for the other" (Crigger 2001, p.620) was also at play.

Empathy, rapport and the link to caring

Goleman (1996 p.285) states that "empathy leads to caring." To establish the iterative process from listening to caring,[149] rapport - a co-ordination of moods - is a required step. Rapport, based on empathy is, according to Goleman (1996) *the root of caring.*[150] Thus, in describing caring as "feeling with another", Goleman (1996 p.104) makes a direct link between empathy and caring stating that "the link is when another's pain is one's own." If empathy and caring are directly linked,[151] and empathy and listening are also directly linked (empathy opens the way to real listening (Goleman 1996 p.285)) then it is safe to state that listening is a primary component of, and indicative of, caring.

I had built a useful schema to apply to the segment "… you listen, you care". The understanding that listening can be understood as caring and that such an inference can safely be made using Goleman's emotional and social intelligences framework was tenable.

Challenging the built schema

Addressing counterargument/contradiction in relation to the schema was a necessary undertaking. Reflection led me to surmising that if active listening is not possible or impaired then the process that leads on to care is not initiated. If immovable barriers exist, that interfere with active listening then my schema would not be rigorous enough.

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[148] The drawings and written explanations as given by Joshua are included in Appendix I, with his full permission.
[149] As shown in Figure 1. Stages leading from Listening to Caring.
[150] Italics - mine
[151] Goleman 1996, p.285 states "empathy leads to caring."

I returned to the literature on listening and caring to explore what authors/commentators might offer. In addressing the issue of listening, that of caring would be answered. If the first step in the process (active listening) proved untenable then the final link in the process (caring) could not be achieved. Therefore, I concentrated my search on the issue of listening.

Levenson and Ruef (1997 p.55) state that the achievement of high levels of physiological synchrony (where one person mirrors the physical movements of another) and emotional rapport, (that leads on from active listening, through the link to empathy) may not always be the province of good relationships. They speak of evidence of "high negative affect reciprocity" in studies they carried out with married couples in unhappy marriages. While, they say, spouses know exactly what the other spouse is feeling - empathy, which springs from active listening; they do not act on that knowledge in a constructive way. Aligning caring as "an intentional human action …" (Arnold & Boggs 1995 p.108) with Goleman's (1996) statement that "empathy leads to caring" (p.285), it can be demonstrated that whilst empathy (initiated by active listening) can be achieved (as suggested in Levenson and Ruefs' year studies) it does not necessarily lead on to caring. I needed to apply this understanding to the disability officer/student dyad to check my schema.

It is pertinent to point out that the relationship between a disability officer and a student is a working relationship of short duration and not a personal one – not a 'social tie'(Arnold & Boggs 1995, p.42) as in a marriage/love relationship. It is to be expected that some student/disability officer relationships will be problematic from time to time, but this would not, I suggest, lead to 'negative affect reciprocity' as found by Levinson & Ruef (1997). There may be times when either disability officer or student is not happy about a particular situation/issue, but this can, in my experience be worked through satisfactorily. The remit of the disability officer includes creation of solutions to such situations/issues in the best interests of the student. This requires, it might be suggested an increase in active listening, not a lessening of it. Out of such listening, empathy is achieved, but does it lead on to caring on the part of the disability officer? My schema is applied to a

segment which states "… **you** listen, **you** care"[152] – the 'you' in the segment addresses me as a disability officer. Therefore, in relation to applying my schema to the unique segment I need only address the issue of whether or not active listening on my part as a disability officer leads to empathy, out of which care is born. Reflecting on such an understanding, my decision was that the schema I built and applied to the segment under analysis was rigorous enough and resulted in resolution and cohesion.

Empathy avoidance – a possible barrier to active listening

To ensure the rigor of the schema further I explored what (if any) conditions might prevent active listening. Shaw et al. (1994) addressed empathy avoidance in a study where the participants were required to *listen*[153] to an interview. Taped interviews (taped with the 'person in need' were in two categories: low impact (non-empathy inducing) and high impact (empathy inducing). In low impact interviews 'needs' were presented in a relatively objective manner whereas in the high impact interviews needs were presented in an emotional manner, leading the listener to imagine how the person in need feels about what he is going through and how the situation affects his life. "It is designed to play on listeners' emotions causing them to become empathically aroused" with a view to seeking help from the volunteer for the person in need (Shaw et al. 1994 p.881). It was predicted in the study that when people are aware in advance that they will be asked to help and that the financial or emotional cost would be high, fewer would request to *listen to*[154] the empathic version of the interview (participants were given this choice). Shaw et al. (1994) suggest that most people are aware that feeling for another in need (empathy) evokes motivation to help that person (care). Shaw et al. (1994 p.886) state: "This awareness, in turn, leads to a desire to avoid these empathic feelings in order to avoid incurring the costs of helping." Reflecting on the study in relation to the work of the disability officer and whether or not the research held meaning around empathy avoidance for them, I decided it did not.

Anxiety – a possible barrier to active listening

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[152] Bold – mine for emphasis
[153] Italics – mine to underscore that listening was the approach used by the researchers to elicit empathy.
[154] Italics – mine for emphasis.

A particular difficulty that might lower the ability of people to listen actively and as a consequence reduce empathic ability leading to care is that of anxiety. Anxiety is a vague, persistent, and uncomfortable feeling of impending doom (Arnold & Boggs 1995, p.125). Mild anxiety can actually increase active listening skills and moderate anxiety can be overcome with appropriate support reference. (Arnold & Boggs 1995, p.117). Therefore, listening is not interfered with at mild/moderate levels of anxiety; severe anxiety, on the other hand, does interfere with listening (Arnold & Boggs 1995, p.117).

On reflection, I decided to examine whether anxiety in a disability officer might lead to an elimination/decrease in listening skill and thus, caring. Any disability officer experiencing anxiety at the severe level would need to seek help, as not only would listening skills be affected in the work situation but her/his personal life would be affected also. Anxiety in relation to the disability officer would be addressed in professional supervision provided to disability officers. Therefore, it would not be expected that a severely anxious disability officer would be working, but be in the process of being supported in an appropriate manner her/himself.

Alexithymia – or non-empathy

The opposite of empathy (stemming from active listening) is alexithymia - where the person is unable to know or put into words what they feel themselves; they lack self-awareness (Goldman, 1996 p.51). If the capacity for empathy, which builds on self-awareness, is not available to the person, then caring cannot be an outcome. When I reflected on this aspect of my challenge to the schema, I found that as the segment under analysis "… you listen, you care" was directly aimed at me, I could discount alexithymia in my case. I would, however, have to allow that, no matter how unlikely it might appear to me, there could be instances where a disability officer might be alexithymic. In allowing that alexithymic people could be in the role of a disability officer the connection was not strong enough, or likely enough, to cause me, from my perception, to abandon my schema.

Thus, having built the schema, challenged it for contraindications/contradictions and found it to be rigorous, I applied it. It was my understanding, as ethnographer, of the segment "…you listen, you care." I had discovered the new knowledge I needed by using Goleman's work to inform ethnographic insight that brought about resolution, leading to renewed understanding of the segment (coherence). There was, for me, a goodness of fit. The core of the schema was that Seth understands being listened to well by the disability officer as demonstrating caring on behalf of the disability officer. This perception was supported by other students and work colleagues on checking my understanding with them.

Addressing the student need to perceive the disability officer role as a caring one

My existing schema around the disability officer role was that it was, in the main, a pragmatic one.[155] That a student of the disability office might need to perceive the role of the disability officer as a caring one was, for me, a breakdown. A schema was needed to reach resolution and coherence. Goleman, says that people who are empathic are more attuned to social signals. Such signals, he says are indicators of what people need or want. This approach seemed to answer my desire for understanding, as people attuned to social signals are, according to Goleman (2006) better in particular work situations, such as the caring professions. Goleman (2006) says that for those in the helping professions,[156] the skill of deep listening numbers among their top three abilities. Disability officers, as a major aspect of their work demonstrate deep listening. This suggests according to Goleman's (2006) description that the work of disability officers is caring work and perhaps fits the profile of a helping profession. In taking time to listen, he says, those who are attuned to social signals achieve rapport, which leads on to caring (Goleman, 1996 p.117). Thus, it can be demonstrated that the link between listening and caring has been made and is paramount amongst those who work in the caring professions.

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[155] The pragmatics of the role have been addressed in the Background to the Study Chapter.
[156] Goleman named physicians and social workers as examples of caring professions.

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Goleman (2006) posits that those with good social intelligence[157] are empathic and are good social analysts.[158] Good knowledge of how others feel facilitates rapport, which leads to care. Based on this aspect of Goleman's work[159] it seemed to me that aligning the disability officer's role with caring work was plausible. Deep listening is found in those likely to be in the caring professions (Goleman, 2006) and listening can be understood as caring.[160] By use of deduction it can be stated that when a disability officer engages in such listening the student need to understand listening as caring, and hence the disability officer role as a caring one, is met. The building and application of the schema to the breakdown provided me with the new knowledge to reach resolution and coherence in the matter of the student's need to perceive the disability officer role as a caring one.[161]

Understanding of the analysed segment – supportive evidence
In adhering to Agar's (1985) protocol for ethnographic understanding it was necessary to check if other students/informants/others in the field held similar or related views to Seth in relation to the content of the segment. I again trawled the selected strips and reflective writings. The purpose was to offer an opportunity to have further student voices heard in relation to the coherence of the segment analysed. This was done to strengthen the understanding of the segment and to demonstrate that others shared in the inferences involved in the statement "…you listen, you care" as analysed, which led to resolution and coherence. The extracts from the fieldnotes are offered with a simple explanation as to their content and context and how they support the analysed segment. In choosing the

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[157] Goleman (2006 p.11) defines social intelligence as: "a shorthand term for being intelligent not just *about* our relationships but also *in* them." (Italics – Goleman's).

[158] Good social analysts possess the ability to detect and have insight into peoples' feelings, motives and concerns.

[159] Goleman (1996) attributes listening as leading to empathy, which leads to rapport, which is the root of caring.

[160] Listening understood as caring has been demonstrated referencing Goleman's work earlier in this chapter.

[161] Sakiz (2007) in a study exploring the relationship around perceived teacher affective support developed the *Teacher Affective Support Scale*. Of interest is the inclusion of listening and caring as elements of affective support. Their inclusion on the *Teacher Affective Support Scale* lends further rigour to the schema around listening as caring and adds clarity to the issue of the affective element in the disability officer role.

extracts I also searched for those that referenced the visible and invisible aspects of the everyday work of a disability officer as experienced by me.[162]

The first scenario relates to a meeting I had with a student, Jacob.[163] I noted in my fieldnotes on the occasion of our first meeting:

> I found myself very aware of not staring at him and at the same time asking questions that were pertinent. Jacob made it very easy for me, telling me everything about the situation and indeed stated that he gained some comfort and relief in talking about it. It is easier (for me) when students open up themselves and don't require too much talking on my part because I feel sometimes that that's quite intrusive.

> Fieldnotes, 4th October 2004

That Jacob expressed he felt some comfort and relief in talking about his situation demonstrates, I suggest, that he felt listened to. My desire not to talk too much in such circumstances is indicative of allowing the student to speak as much/as long as seems necessary to hear their story and to 'hear' their feelings. Using my intuition, I suggest that Jacob did infer that being listened to meant that he perceived that the disability officer cared.

Students are frequently distressed when they arrive to meet a disability officer and it has always been my contention that distressed students need to be listened to carefully and given space to address the issues causing them distress. It is a frequent occurrence in the everyday work of a disability officer to meet students who are distressed to varying degrees. The following extract from the fieldnotes demonstrates a level of distress in a student, which called for deep listening and caring.

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[162] The notes have been edited for readability and kept to the core point being alluded to in each case. They are from fieldnotes produced in one semester only, to give a sense of the everyday flow of work around listening in the role of a disability officer and to ensure that 'hyper-eventful' (Wolcott, 1995) reporting is avoided.

[163] Jacob had severe facial disfigurement. At the time to the write up of the study surgery will have alleviated this situation, therefore, anonymity of the student is protected.

Naomi, a mature student arrived in a state of distress at my door.   She broke down during the conversation and spoke of pain. She became very emotional and tearful and when I suggested counselling she agreed it would be useful. There and then I made an appointment. She kept saying:

> Naomi: I don't know why this is happening to me now, at this stage of my life, I never felt like this before, I've never cried about it like this before.

Fieldnotes, 7th October 2004

Behind this short extract from the fieldnotes were almost two hours of listening. This is a good example of invisible work undertaken by the disability officer, requiring good listening skills.   Dealing with distressed students is a common occurrence. I wrote in my journal:

> Students in crisis are being sent more and more [to me, as the disability officer] – often they have difficulties relating to anxiety/depression/emotional issues or not coping at some level. This is the correct approach from the point of view of those sending them to me, but it is eating into the days and each day brings enough work for that day and so administrative work is always piling up.

Journal, 9th November 2004

Reasons for contact with the disability officer can range over a number of areas, e.g., financial difficulty as the following scenario shows.

> Ruth arrived at my door in tears, saying she could not afford to go to the doctor as her maintenance grant had not come through.[164]

Fieldnotes, 5th December 2004

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[164] On investigation, Ruth had not been in college on the days induction of first years had taken place. She did not know where to turn for help and in the end made her way to me.

In both of the above extracts from the fieldnotes the students initiated the visit and arrived distressed, needing to be listened to, perceiving the role of the disability officer to be one of support/caring. I believe these instances infer that a visit to the disability officer will result in a caring approach and a helpful outcome. Such outcomes are brought about by first actively listening and then employing empathy which leads on to caring.

Not all listening to students is a positive experience for a disability officer. I chose to use the following extract to demonstrate that the listening is often difficult. Abraham arrived for his meeting with me and was very aggressive and very demanding.

> Abraham: I don't know why you encourage mature students with disabilities to come to college if you're not going to give them everything they need when they're here.

> Fieldnotes, 7th October 2004

This interchange called for non-defensive listening by putting aside the self, making an effort to hear the main message from the student and listening for the feelings behind what was being said.   Goleman (1996) points out, that empathy deteriorates when one's own feelings are so strong that they allow no physiological harmonising but simply override everything else.[165]

Agar's (1985) protocol for ethnographic understanding allows that the ethnographer's understanding, if possible, needs to be tested against that of others[166]. In the interest of rigor and trustworthiness I undertook this aspect of the protocol. I interviewed two students, one in my office (following an everyday support review) and the other, by

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[165] It is not an easy task to listen actively with someone who is aggressive and demanding. The issue of sending silent cues that the student is being heard becomes more difficult when the student is shouting. The demands on the disability officer as written by Goleman to remain calm and receptive (Goleman, 1996) are quite high in these type of situations. Such situations around listening well arise more frequently than might be thought and again are invisible components of the disability officer's work.

[166] Suitable others in the case of this study are students/informants and work colleagues.

request, in a campus restaurant.[167] The students were selected by me because they both are excellent at 'telling it as it is'. They each had differing disabilities; Judith was a dyslexic student, the Esther is a student with a mental health disability.[168]

On meeting Judith I briefly went through the approach to the analyses and the story behind the student statement which became the segment: "… you listen, you care". I then said:

D.O.:   I think I understand that a disability officer needs to listen attentively to students and hear the feelings behind what the student says and that that shows the student that the disability officer cares. Do you think I'm right that that is what the student was saying when he said, "… you listen, you care"?

Judith: Yes, I think you are right – for me it was the same. I felt you listened to me and that showed you cared about how I felt about my dyslexia. As you know, it's bad and I felt that you somehow understood how I felt even though you are not dyslexic at all.   I always felt that you understood how it was for me and how I felt when I was at school and was told I was stupid because I couldn't learn.   I really appreciated that I never felt that way with you, you found out what I was good at and worked with that.   That made me feel in control of what I did and I felt then that there were things I could do well.

D.O.:   I wrote in my fieldnotes that I did things like meet students and applied for funding and sorted out supports and did things that are administrative and managerial. Did you see that as the disability officer's main role?

Judith: I think it is part of it, a bit like a mother at home, she has to do the day-to-day management things too, but it's not the core.   The core part is caring, I think it's the same for

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[167] The student was an ex-student, continuing to study in the evenings. As she was working during the day time she requested that we would meet during her lunchtime.
[168] The past tense is used in connection with Judith, as she has now graduated but was a mature undergraduate in the academic year 2004-2005 and had given consent in relation to the research at that time. She again gave her consent that the information garnered by me in the interview could be used in the ethnography.

disability officers like you, the core part **is**[169] about listening and caring.

D.O.: I think I understand from what the student said that students might see the disability officer as a caring role, a caring professional, do you think I'm right?

Judith: I would always have seen you like that. Even from talking about the research at the start with you I can see so well that the work is the important thing to you and trying to improve things. That this is a Masters for you is not the important thing for you, sure it isn't? I think you care so much about the work and the people. I have always seen you as professional so that makes you a caring professional as far as I'm concerned. I think a lot of students would see it that way.

Fieldnotes, 27th February 2008

What Judith said confirmed my understanding, post the application of schemas, to the student statement "… you listen, you care."

At the meeting with Esther I outlined the encounter with Seth,[170] and what had been my experience of it.[171] Esther agreed to give me her input.

D.O.: I understand that when the student said "… you listen, you care" that he perceived that in listening to him I displayed that I cared. Would that be your understanding?

Esther: I would always have seen the disability officer – you – as someone who listens and you make it easy to discuss things and as you know I don't want to talk to people about my problems. You seem to know that about me and you make it easy for me to talk – I feel you listen and because you make it easy I see that as caring. I would agree that I see the fact that you listen well as caring.

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[169] Student emphasised the word.
[170] I referred to Seth simply as a student.
[171] I related my experience as a 'breakdown' (in Agar's language) and gave explanation of his protocol to those I spoke to in relation to my understanding of the student statement.

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D.O.: Do you feel, as a student, that it is a component of the disability officer role to care or is it enough to do what might be seen as the managerial aspects of the role, you know, like applying for funding, arranging supports, all that?

Esther: I really don't think much about those at all. I just know that like now you will organise the things we have discussed and get back to me about it. But this is what is important to me, that you are available and that you don't rush me I can take my time when I'm with you. I see part of your job as being a bit like a counsellor – things are confidential and I can really talk about my problems with you and get things sorted out. I would think that all disability officers must be like that – the person is really important. I expect that you all have training in some way and I think that disability officers know about disability and mental health problems and can fill in others about them.

DO.: Do you see the disability officer role as a caring professional one?

Esther: A bit the same as a nurse or a counsellor maybe. You're dealing with people all the time. I definitely see it like that.

Fieldnotes, 29th February 2008

It is evident that Esther concurred with my understanding of both the statement made by Seth and that the disability officer role is perceived by her as a caring role, thus allying herself with Judith's remarks and my understanding of the segment "… you listen, you care."

Checking my understanding of the segment with work colleagues
I checked my understanding around the statement made by Seth with work colleagues[172] all of whom were aware of my research. I asked them if they thought that a statement, made by a student that says "… you listen, you care" was understood by them in the way I had come to understand it. They each stated that for them a statement like that would

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[172] I took the opportunity to check my understanding of the student statement post the application of the schemas with my work colleagues during lunch. This is not a verbatim report per se. I took the opportunity as I found it and was not ready to take jottings at the time. I did write them up immediately on my return to my office.

mean the same, that listening and giving attention to someone in listening to them, is caring and they would interpret it that way in their own lives. All agreed that the work each of us undertakes has an active listening element.

David, (a work colleague with a remit that requires a listening role) said that when he meets someone, student or staff member, he stops himself from thinking about where he should be next or how he is fixed for time. He engages with the person and waits for them to terminate the contact. He believes that in giving himself in the listening he is demonstrating caring.   He added that frequently he meets people for perhaps more than an hour and later meets them "in passing" for perhaps only five minutes. Those five minutes are built on the previous meeting where he believes rapport has been established and the five minute meeting can, as a result, deliver real results for both of them.[173] David felt it was not the "metrics of industry" by which we measure outcomes in our work though pragmatic elements do apply.[174] I was satisfied that this group of colleagues had endorsed my understanding of Seth's statement.[175]

In seeking to undertake this ethnography with integrity I did consider the need to problematise Seth's statement as a potential manipulative statement.   Hein (2003) critiquing Goleman in an Internet article led me through a link entitled *The Dark Side of Emotional Intelligence.* The article began: "Most writers, researchers and consultants in the field of emotional intelligence (EI) typically promote only the "good side of it" (p.1). Hein (2003 p.1) lists what he found in relation to what he describes as "emotionally intelligent, yet emotionally abused and neglected teens." Manipulation by the teenagers to get what they wanted was listed as a prime outcome (Hein 2003).

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[173] We agreed that listening as caring often does not produce immediate measurable outcomes and discussion led us to agree that as the growth of the individual does not end with the meeting, we can only let the person go, to go on growing and we never know exactly how this moves on, but we may have played some small part in such growth.

[174] David's interpretation of the 'metrics of industry' is one where measurement is applied to outcomes of the work e.g. how many units can be manufactured in an hour.

[175] It is a limitation of this aspect of the research, that we did not have time to explore the issue of the student perception of the role of a disability officer as a caring one.

I reflected that Seth was little more than a teen when he made the statement. On further reflection on the encounter I decided that his tone of voice at the time seemed sincere. My experience of him was one of honesty, if sometimes by his own description "silly". I discounted that I was dealing with the dark side of emotional intelligence in relation to Seth.[176]

Conclusion

Evidence for listening leading to caring in the work of a disability officer has been offered, together with understanding of the student need to perceive the disability officer role as a caring one. The breakdown was addressed and eliminated, by the building and application of schemas to the selected segment.[177] New knowledge was added to old knowledge.[178]

Further support for the ethnographer's understandings was offered by way of additional fieldnotes confirming the 'listening as caring' role of the disability officer and the student need to perceive it as such. Additional student voices were included, together with those of work colleagues.[179] I submit therefore, that resolution leading to coherence[180] has been achieved. In the chapter that follows, the findings resulting from the analysis will be reported on and discussed.

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[176] At least in relation to the statement that was the focus of analysis in this study.
[177] The schemas were examined for contraindications and/or contradictions.
[178] The old knowledge constituted the ethnographers existing schema for understanding the segment.
[179]This was achieved by way of checking with them that my understanding, as an outcome of building the schemas in relation to the student statement "… you listen, you care" was aligned with their respective understandings.
[180] Coherence – new understanding.

CHAPTER 6

Findings Discussion and Conclusion

Introduction

The analyses of the data were undertaken using an adaptation of Agar's (1985) protocol for ethnographic understanding. In doing so, the intention was to move from breakdown to coherence, which was successfully accomplished. From coherence sprang understanding relative to the questions that were core to the breakdown: can listening be understood as caring and is the student need to perceive the role of the disability officer as a caring one? In achieving coherence - new understanding – these questions were fully answered. The answers to the questions constitute the findings of this study.

Findings of the study

The application of Goleman's work (2006, 1999, and 1996) in the areas of emotional and social intelligences led to an acceptable and satisfying path that demonstrated an iterative process of connection from listening as an initial step, to care as the final outcome. Understanding of each step: listening, empathy, rapport, care (caring) was achieved using Goleman's (2006 1999, and 1996) work. Based on analyses, effected through the building and application of schemas to reach resolution and coherence as required by Agar's (1985) protocol, it is safe to state that a finding of this research is that: listening can be understood as caring (listening axiologically as caring). The student need to understand the disability officer role as a caring one has been supported by the use of fieldnotes (along with Goleman's interpretation) where a number of students with disabilities, either by direct comment or by inference, present such an understanding. It is, therefore, a finding of this study that in the unique setting of the study, the student need is to perceive the disability officer role as a caring one. Both findings were challenged by the inclusion of reflection/investigation by the ethnographer on aspects/issues that might gainsay the findings. Evidence to undermine the findings was not considered strong enough to negate them. Therefore, the findings stand.

Agar (1985) calls for further validation of the findings of research undertaken using his protocol by checking the ethnographer's understanding against that of others. To meet this requirement others in this study were students and work colleagues.[181] These students and colleagues were asked whether or not they agreed with my understandings of the findings of the study. All agreed that their understandings were aligned with mine in the case of listening understood as caring and the student need to perceive the disability officer role as a caring one. Thus, Agar's (1985) suggestion in relation to further support for the understanding reached by the ethnographer was adhered to. This, according to Agar (1985) validates the research findings further.

It is of interest to note that in the perception of the disability officer role to be a caring one, the use of the term 'professional' was used by some students. The term professional also came to the fore when Hurst (2007) addressed the role of the disability officer.[182]

Discussion

This section initially reviews the study;[183] it offers a précis of the undertakings of the study as well as insight into the ethnographic role, thus, keeping the author visible throughout the process. The aim of the research is then revisited. The substantive issue of ethnographic understanding of the role of the disability officer is rooted in understandings achieved relating to listening axiologically as caring and the student need to perceive the disability officer role as a caring one. An understanding of the everyday work of a disability officer is explored and a conclusion reached.

An overview of the study

In early 21st century Ireland, increasing numbers of students with disabilities are taking up third level education options. This trend has led to requirements for support for

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[181] Reports of these discussions are given in the Ethnographic Analysis and Understanding Chapter.

[182] The paper delivered by Hurst (2007) is reviewed in the Literature Review Chapter and a copy is supplied as Appendix M.

[183] My supervisor described this stage in the ethnographic endeavour as the time when the ethnographer in the 'field back here' takes cognisance of and describes what happened in the 'field back there'. This acknowledges the continuation of the fieldwork as on-going until the last word is written.

students with disabilities at third level. Prior to the mid 1980's in Ireland, such support, where available, was usually offered by existing staff members in educational institutions taking on the additional task in tandem with their existing role (e.g. academic, administrative). The Universities began appointing disability officers to posts in the mid 1980's. The creation of disability officer posts came later in the Institutes of Technology. The approach was similar in the United Kingdom - up to the early 1990's "disability support duties were frequently attached to some existing post on a part-time basis" (McCabe 2001, p.18).

The 1980's was also the timeframe in which the disability movement(s)[184] emerged birthing and nurturing the social model of disability, with a rights model the focus of further struggle. Through the disability movement in particular, the voice of people with disabilities was being heard and with the voices of disabled intellectuals included - Oliver, Shakespeare, Toolan, Barnes, Pfeiffer and Morris - the inclusion of the voice of those with disabilities was considered, to greater or lesser degrees, to be important in decision-making around group and individual cases and in disability related policy.   In this study the inclusion of the student voice was paramount – the ethnographic moment was provided by a student and it was a student statement and student need that was core to the analysis.

The field - multiple roles

As disability officer, researcher and author of this study, I was acutely aware of the multiple roles carried by me during the time of the research. I considered myself as a marginal native[185] and possessing what Weber (1946) refers to 'verstehen'. Furthermore, my experience as the parent of a student with a disability allows me to empathise with parents of students with disabilities and allows me to offer them some reassurances based on mutuality. As a parent of a student with a disability I have insight into the frequent everyday struggles that require surmounting in individual cases and an appreciation for the role of disability officer which stems from such lived experience.

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[184] See Background to the Study for further information on the disability movement(s).

[185] This claim is dealt with more completely in the Background to the Study in my Personal Framework for the Study section.

The field – emotional work

Much of my reflection was laden with frustration, leading to a deep inquiry of issues that the research presented.[186] Realising that I was a naïve researcher and hence would make mistakes, I attributed my over-reflection to this, and felt the better for it.

Using insider researcher's eyes offered a natural unfolding of experience in the everyday work of a disability officer. Keeping an 'eye on the job' and an 'eye on the research' was sometimes more difficult than I had expected. My trustworthiness as ethnographer is rooted, for me in an honest account of my time and my reflections in the field. I would not meet this remit without reporting that I often questioned myself as to whether I would act as I did if I weren't undertaking the research; for example, did I sometimes strive harder to understand the student's perspective, did I question student's more closely than when outside of the research process? I suggest that perhaps sometimes I did, but it resulted in advantaging the student and added a layer of interest in the everyday work for me that I submit kept the work interesting and my energy for its undertaking high. Rather than seeing this interweaving of emotion as a struggle, I embraced it as a useful and insightful tool in the deployment of the role of a disability officer and researcher.

Meeting ethical requirements through the ethnographic process

As outlined in the methodology chapter the search for a suitable methodology was hampered by the fact that the research group is described as a vulnerable population.[187] Ethical considerations led to my understanding that such groups are currently considered to be over-researched (National Disability Authority 2005)[188] There was a possibility that in gaining an understanding of the everyday work of a disability officer, a platform might be constructed for work that could be carried out at a later date in the area of

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[186] In the initial stages of the research I reflected too frequently and too deeply, resulting in feelings of being overwhelmed. I wrote more than once in my fieldnotes that it was not unlike having two jobs, one during the daytime and one at night.

[187] The initialising of the study is explained fully in the Methodology Chapter.

[188] My understanding in this area was reinforced by attendance at a conference where such ethical considerations were the theme (National Disability Conference, Dublin, 2004).

change and transformation toward an enhanced service by the disability officer, but not as part of the research process itself, while in the field.

Fetterman (1989 p.9) says that the best reason to leave the field is having enough data collected that describes the culture or problem convincingly and to be able to say something significant about it. With enough data collected, an occasioned breakdown experienced, described and resolved the substantive issue of the research - to understand the everyday work of a disability officer - now requires some further analysis. In the next section of the discussion this task is undertaken.

Understanding the everyday work of the disability officer

It is evident from the descriptions of the role of the disability officer within third level education given in the literature review[189] that the mechanics of the role are to the fore. In the study *Disability Officers in Higher Education* (McCabe 2001) 85% of respondents agreed on particular duties of the role; advising academic staff, advising students with disabilities, delivering disability awareness training, developing institutional disability policy, keeping abreast of government legislation on disability, liaising with admissions tutors, liaising with disability organisations, liaising with other higher education institutions, managing a budget, publicising the disability service, producing information on disability issues for staff, producing information on disability issues for students. McCabe (2001 p.22) holds that agreement between 85% of respondents on this aspect of their study "could be taken as a blueprint for the typical mainstream disability officer duties." The results of the survey and McCabe's contention that these results are evidence of the typical mainstream disability officer duties further enhances the notion of the role as visibly task oriented. The listing of the duties of a disability officer by DAWN (2002) includes similar descriptors of the mechanics of the role found in McCabe's (2004) study. Perhaps with the exception of the element of advocacy (DAWN 2002) all other duties listed are highly visible aspects of the role of a disability officer.   The disability officer

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[189] The duties and responsibilities that attach to the disability officer role both in Ireland and the United Kingdom have been outlined in the Literature Review.

role I fill, advertised at time of recruitment (2001)[190] lists the disability officer duties. It is evident that the mechanics of the role, e.g. provision of supports to students and staff with disabilities constitutes the visible work. Taking the disability officer role (duties and responsibilities) as outlined by the respondents in McCabes' (2001) study and the DAWN document, which outlines the role and function of the disability officer; it is clear that the responsibilities of the role as stated in the Report of the Action Group on Access to Third Level Education (2001) are embedded in both. The Action Group Report recognised the central role of the disability officer in co-coordinating institutional responses to disability which included issues of policy and practice. The effective delivery of role of disability officer (based on the evidence produced in this study) calls for a broad skill-set. It is clear that there is some agreement in relation to certain visible elements of the role.[191] This research is of interest because it uncovered an invisible affective element of the role – listening axiologically as caring and the meeting of a student need to perceive the disability officer role as a caring one.

The uncovering of an affective element in the everyday work of a disability officer

When disability officers (McCabe 2001) were asked to "Briefly outline the person specification required for your post" just over 50% of those who responded to this question included descriptors that were affective in tone.[192] Five respondents specifically mentioned counselling skills. In this study, one of the respondents, Esther,[193] likened the disability officer role to that of nurse or counsellor. Disability officer respondents in McCabe's (2001) study referred to interpersonal and/or communication skills as requirements in the work of disability officers. It is evident from this that disability

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[190] Copy of duties of the disability officer at the College in which the study took place is attached as Appendix J.

[191] Agreements on the particular elements agreed on are dealt with later in the chapter.

[192] The descriptors were: experience of counselling work, interpersonal and communication skills, interpersonal skills and experience in counselling, good communication and sensitivity, guidance/counselling skills, oral/written communication skills, professional qualification e.g. social work, communication, demonstrate understanding, experience in counselling/good communication, communication/influencing/interpersonal skills, good interpersonal skills, counselling, interpersonal skills, meeting the needs of students with disabilities.

[193] One of the students interviewed re the checking of my understanding of Seth's statement and the student need to perceive the disability officer role as a caring one.

officers themselves acknowledge and promote an affective element to their role and that interpersonal skills/communication is identified as a major component of their work.

Communication skills/interpersonal skills were specifically mentioned by nine respondents[194] as a desirable person specification of a disability officer. When disability officers spoke of 'interpersonal skill' as a 'Person Specification for the Post of DO' they identified active listening as an element of the role (McCabe 2001). "Active listening is an interpersonal skill …" (Arnold and Boggs 1995, p.202). The acknowledgement by disability officers themselves of the requirement for active listening to be in the skill set of a disability officer is, I contend, of major importance in understanding the everyday work of a disability officer.[195] In drawing attention to the role of active listening as a requirement for the disability officer role, the respondents in McCabe's (2001) study also offer some support to the findings of this study. Needs assessments and reviews where some of the work is visible, but a major portion is invisible, particularly when a student's personal need/difficulty is part of the conversation, call for active listening. In all such meetings active listening is required by disability officers, not only to elicit information, but to gain understanding of any difficulties that are disclosed and to 'hear' the student's feelings. Such listening understood as caring is a finding in this research. That it of importance in meeting student need is critical.

It is easy to identify that as a disability officer I am required to listen in practically all aspects of the everyday work of the role. Where the metrics of industry are the elements of the role being undertaken at the time, listening does not always have to fit the 'active' listening frame.[196] I acknowledge that where the work relates to advising or liaising, it could call for active listening, especially when the work is with academic staff or disability office staff.[197] Communication with students, on the other hand, nearly always

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[194] In McCabe's (2001) study.

[195] When addressing the matters of ethnographic analysis and understanding I drew attention to the areas where disability officers listen in their everyday work. Examples were given of such active listening, for instance in the carrying out of needs assessments and review of supports meetings.

[196] See Ethnographic Analysis and Understanding Chapter for a full description of active listening.

[197] Disability office staff and academic staff frequently seek advice/input in relation to students with disabilities, and active listening can be necessary to give the most appropriate support to the staff member.

calls for active listening. It is a finding of this research that listening is linked to caring –

an affective element of the disability officer role. I review here student input which

recognises this affective element of the work.

When I asked Judith if she saw the disability officer's main role as an

administrative/management one she replied that the role is:

> a bit like a mother at home, she has to do the day-to-day management
> things too, but it's not core. The core part is caring; I think it's the
> same for disability officers like you, the core part is about listening and
> caring.

Fieldnotes, February 2008

In her statement Judith recognised and named affective elements of the everyday work of

a disability officer, even using the description 'day-to-day'. Likewise Esther stated:

> You seem to know about me and you make it easy for me to talk –I feel
> you listen and because you make it easy I see that as caring. I would
> agree that I see the fact that you listen well [actively] as caring.

Fieldnotes, February 2008

David, mentioning the metrics of industry, acknowledged that pragmatic elements do

apply to the role of disability officers, adding "…but there is a broader picture where

listening as caring is applied daily and outcomes may not be measurable." As in Judith's

case, David asserted that the listening as caring aspect of the role is applied daily and the

'non-measurability of outcomes'[198] suggests that such outcomes are part of the invisible

element of the everyday work of a disability officer.   I suggest that Seth's statement

inferred that I listened not just on that one occasion but that I listened often - making the

listening part of the everyday invisible work of a disability officer. An objective of the

research in understanding the role of the disability officer was to examine the everyday

work. It is clear from what students have said in the fieldnotes that actively listening is

part of that everyday work, they have stated that they perceive it to be so.   If this

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[198] David's statement can be found in the Ethnographic Analysis and Understanding Chapter.

listening is considered by students to be core to the role then disability officers need the time required to do such listening – well and actively in the everyday work. Given the duties and responsibilities outlined in relation to the work earlier in this chapter it is clear that time is a scarce commodity for disability officers. The time to actively listen, although an invisible element of the work will need to be made available to disability officers as it has been demonstrated in this study that it is necessary to do so to meet student need as analysed from a student statement.

Seth's statement is supported by other students and work colleagues.[199] Based on reviewing the literature, together with student and colleague statements, I posit that listening understood as caring is an affective invisible element of the everyday work of a disability officer.

In listening, the first step is taken in the iterative process from listening to care.[200] Ipso facto, as a disability officer I demonstrate care through that iterative process. Therefore, it is possible to state that to understand the everyday work of a disability officer it is necessary to acknowledge that the work has a major affective invisible element, which is operationalised by listening axiologically as caring. It can also be proposed that students[201] perceive the everyday work of a disability officer and therefore the role, as a caring one.

The everyday work of a disability officer as professional work
In listening to students describe the role of a disability officer; the word professional has been presented. It seems cogent in the discussion of the everyday work of a disability officer to address this aspect of the work. I purposefully inserted the word professional in my interviews with both Judith and Esther. This, I felt would give each of them the opportunity to declare against the use of the word if they thought it were not a suitable

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[199] See Ethnographic Analysis and Understanding Chapter.
[200] See Ethnographic Analysis and Understanding Chapter for a full description of the process.
[201] In the unique location where the study took place.

one.[202]   Their replies are of interest to the idea of professionalism in the everyday work of a disability officer. When I spoke with Judith she answered my question[203] by stating:

> … I have always seen you as professional so that makes you a caring professional as far as I'm concerned. I think a lot of students would see it that way.

<div align="right">Fieldnotes, February 2008</div>

Esther in reply to my question stated:

> A bit the same as a nurse or a counsellor maybe. You're dealing with people all the time. I definitely see it like that.

<div align="right">Fieldnotes, February 2008</div>

It seems reasonable, based on the review of the literature to examine the possibility that disability officer's work as caring work might be professional work.

Defining the characteristics of a profession

Table 8. The Defining Characteristics of Professions according to Hurst (2007)[204]

Specialist body of knowledge	This knowledge grows as a result of research and experience
Specialist knowledge passed on to new recruits	The training process is often lengthy and takes place in specialist institutions/organisations.
Monopolistic control of entry	Frequently specific registration criteria have to be met
High levels of autonomy in the way the work is done	
Autonomy within a code of ethics	
Services sought by clients who choose their contacts when special expertise is required	
High status and social esteem	Reflected partly in levels of remuneration

Hurst (2007) suggests that work needs to be undertaken to "… develop the role of disability officer to make it be more obviously a profession" (AHEAD Conference, May

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[202]One reason I chose to interview Judith and Esther was because I knew they would speak their minds and challenge anything they did not agree with. I have experienced this characteristic in both of them.
[203] See Ethnographic Analysis and Understanding Chapter.
[204] Only Hurst's (2007) defining characteristics of professions are addressed in this study, as his paper made direct application of these named characteristics to the disability officer role.

2007). To heed this call an examination of the requirements for professionalisation is vital.

In relation to a specialist body of knowledge,[205] Hurst (2007 pp.1-2) points out that as the disability officer role is relatively new the body of specialist knowledge is only starting to develop. He acknowledges that disability officers hold specialist knowledge about a range of matters relevant to policy and provision for students with disabilities, stating that it has been built up through personal experience and sharing through conferences and networking.[206] DAWN members share knowledge and it is grown further amongst them. Disability officers, whose disability services employ larger staffs, offer support and encouragement to those disability officers McCabe describes as 'sole traders'. Knowledge through research is also a requirement of this characteristic for professionalisation of a role. It is only now that disability officers in Ireland are researching with a view to putting their work into the public domain, e.g. this study will be one such piece of research, together with research currently being carried out by disability officers undertaking the post-graduate Diploma in Educational Studies – Disability Needs Assessment[207] where a research thesis is a requirement for programme completion. Such research will add to the growth of specialist knowledge held by disability officers. I suggest that the dearth of research is not because of any inability or disinterest in its undertaking but that time militates against it.

In this discussion I have drawn attention to the disability officer's role being many rolled into one. McCabe's (2001) study supports this approach by describing the disability officer role as a 'one-man-band' or 'sole trader' model. In my fieldnotes I have written of lack of time; "… if someone could be available to do the administrative work it would give me more time with students one-to-one"; "… it's taken two days of non-stop administrative work … I'm torn between meeting students and getting the administrative

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[205] A specialist body of knowledge is a characteristic of a profession.
[206] DAWN is the main network of disability officers on the island of Ireland.
[207] This has been mentioned in the Literature Review.

work done … I'm anxious to be available to meet them [students] when they can get over

to see me ... I still feel I want to be available to them [students] as much as possible."

Lack of time continues as a theme through my fieldnotes. I propose that the research agendas of disability officers will not be moved on unless there is progress in relation to increased resources and infrastructure. McCabe's (2001) recommendation concurs in recommending the need for a fully resourced Disability Office.[208] I am aware that most disability officers suffer from time constraints that are extreme. Therefore, the characteristic relating to specialist knowledge is one where Hurst (2007) acknowledges that such knowledge exists with disability officers. I propose that the gap in the research component is located in the lack of time in the disability officer's work life.

A further characteristic of professionalisation is that of passing on to others the specialist knowledge in a training process that is often lengthy and takes place in specialist institutions/organisations. Hurst (2007 p.2) says that "it seems rare to find anybody whose career intention is to be a disability officer." I agree with the statement. Training to date for disability officers has been by way of seminars, conferences and personal decisions around what electives are considered necessary/useful in implementing the role. In relation to the professional characteristic of monopolistic control of entry, qualifications/registration and working practices, it is the case that no registration body exists with which disability officers are required to register.[209]

Hurst (2007 p.3) states that "it appears they [disability officers] have a degree of freedom to exercise judgment in their work." This goes some way in meeting the requirement of the characteristic of professions as having a high level of autonomy in the ways in which

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[208] Disability Office as a service model attracts capital letters in this ethnography.

[209] Although no registration body currently exists, acknowledgement of DAWN members proficiency is provided by the influence they have at tables where disability issues in third level education are paramount. In the literature review a detailed account is given of DAWN's role in advising/communicating with the Higher Education Authority (The National Office for Equity of Access to Higher Education) in relation to the issue of definition of disability and data collection. DAWN also works closely with AHEAD, educational settings, communities and agencies.

work is undertaken. That this autonomy be exercised within a code of ethics is an additional characteristic of professionalism. DAWN, in recognising that each disability officer works within the code of ethics of their particular institution, has set in train the examination of this issue with a view to drawing up a specific Code of Ethics within which disability officers will work.

It is possible that disability officers currently undertaking the post-graduate programme in Trinity College will offer their services on the open market, i.e. to clients. It is reasonable to suggest that they will be qualified to do so when graduated from the current programme. In this way the characteristic for professionalisation which addresses the issue of services offered by a professional will be addressed.

High status and social esteem – reflected partly in level of remuneration as a characteristic of professionalisation is answered on behalf of disability officers by Hurst (2007 p.4) when he states: "Occasionally there are indicators that the work is valued and bears some social esteem." He gives as example: a small number of disability officers have been awarded honours by the Queen of England. I suggest this is of more import than such an example at first suggests. Overall, in the United Kingdom there is a small number of disability officers - McCabe's study consisted of sixty one participants. Given that numbers of disability officers are small in number to begin with, to have a "small number" of a small number awarded honours, is strong evidence, I suggest, of recognition of the role. Hurst adds that a manager of a disability service in Wales won the title 'Woman of the Year 2006'.

Hurst (2007 p.4) claims that "overall the indications are that disability officers cannot claim to be a profession in the purest sense." I accept, there are what might be described as 'gaps' within the characteristics for professionalisation. However, I would point out that those referred to by Hurst (2007) are aligned with disability officer roles in the United Kingdom. In Ireland, disability officers individually, and collectively as DAWN members, are addressing the outstanding elements; training, autonomy, specific code of

ethics.[210] In the undertaking of such work, I submit, the time taken to do so will yet again leave disability officers with less time, which is already a scarce commodity in their everyday work. The undertaking of research by disability officers, I suggest, is the domain most likely to be negatively impacted.

I contend that the perception of the role of disability officers as a professional role is important. It has been pointed out in this study that where the disability office role lies within the hierarchy of the institution is pivotal, and that where it lies varies from institution to institution. I agree with Hurst (2007) that the professionalisation of the role might lead to a better understanding of the work of a disability officer. Such an understanding might provide for a suitable place in the hierarchy of the institutions which could have direct impact on supporting students with disabilities. As findings of this research are that listening can be understood as caring and there is a student need to perceive the disability officer role as a caring one, the findings should not be simply ignored. Having heard the student voice, it now needs to be acted upon. I suggest that one way forward is the professionalisation of the disability officer role. In such an achievement the needs of students with disabilities, including affective support elements, could be more fully met.

The role of a disability officer has emerged only recently. It has not been the subject of much discussion in the literature. However, a conference in Dublin, May 2007, saw speakers in the plenary session address the role of the disability officer, exploring the possibility of 'the disability officer as a professional'. It was held by Hurst (2007) that the disability officer role overall did not have sufficient indicators to claim to be a profession in the purest sense. He did, however, suggest that at this time the disability officer role could be described as a 'semi profession' but did not state what the definition of this is.

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[210] It is planned that in instigating a Code of Ethics, addressing the issue of registration will follow.

Conclusion

The aim of this study is to understand the everyday work of a disability officer, examining the visible and invisible components of the work. The ethnographic journey to meet the aim, provided the ethnographic moment in which Seth made the statement which became the segment for analysis. Seth's need to perceive the disability officer role as a caring one (or perhaps a caring professional one) was also addressed as part of this study.

Working with fieldnotes from students and input on their behalf by the ethnographer the student voice was heard. Checking back with students and work colleagues around the ethnographer's understanding of the resolution and coherence of the segment formed part of the research undertaking.

It is an important aspect of the outcome of the research that the everyday work of the disability officer can be divided into the instrumental role (the mechanics of the role) as the visible element of the role as outlined in the literature. There is, however, an affective element to the role which is for the most part invisible - the everyday work of active listening, leading to listening axiologically as caring. The role is not perceived currently by Hurst (2007) as a professional one. This is acknowledged in this study. It has, however, been shown that the role is a caring one and thereby the student need to have it so is met.

The everyday work of a disability officer has been described in this study as complex, time consuming and in many instances a 'sole trader' or 'one-man-band' undertaking, where the instrumental duties are the visible element of the role. The contribution of this research is the uncovering of an affective element to the disability officer's everyday work and the acknowledgement that it is mostly an invisible element of the work. That affective element centers on active listening in the everyday work of a disability officer defining the work as caring and for now, as a semi-profession. The path taken to pursue the aim of the study was an ethnographic one. The next section looks at the effectiveness of the ethnographic methodology used in this study.

Looking back on the ethnographic journey

The choice of ethnography as methodology for the study allowed for a major ethical concern to be met. That ethical concern was the inclusion of students with disabilities in the study and how best this might be approached.[211] An ethnographic methodology alleviated the ethical issue of student involvement, in that nothing extra was required of the students in any way. As informants their input was to continue on their normal trajectory of study. Their voice could still be heard and included, at no time/effort cost to them. This was the main rationale for the choice of ethnography from the aspect of student involvement. Informed consent from students was maintained as part of the ethnographic process.[212]

For me, as disability officer I required a methodology that would allow for emotion to be included in the process and the writing up of the study. I sensed the work was perhaps more than a 'menu of supports'[213] and desired a methodology that would allow its net to be thrown in many directions. I found these requirements in the ethnographic methodology and decided to engage with it.

The problematic elements of the use of the ethnographic method in this study

As ethnographer, the fact that in ethnography 'everything is data' was problematic for me.[214] In desiring an allowance for emotion in this study I was not aware that it might cause difficulty. Nevertheless, as reflection led to discovery of myself and methods to handle the data collection in particular, it has to be accepted that these problems were perhaps unique to this ethnographer, at least in their extent. My involvement with

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[211] As explained in the methodology chapter a participation action research approach was initially mooted as the ideal methodology. Participation action research would give voice and action in their own sphere to students with disabilities through their participation in the research process. However, exploring this possibility further led to acknowledging that the students did not have time to undertake participatory action research.

[212] A copy of the letter sent to students is attached in Appendix G.

[213] By using the term 'menu of supports' I mean a listing of such support items as: laptops, software, extra time in examinations, assistive technology, learning support etc., suggesting that the disability officer's work is simply a matter of ticking the desired support boxes and physically delivering them.

[214] I have alluded in the writing to the overwhelming affect that 'everything being data' had on me. Such an affect was unexpected.

students is constant. From time to time during the course of the research the ethnographic approach seemed, from my perspective, to lead to a type of enmeshment between myself and students. I reflected on this fairly constantly, aware of negotiating boundaries that did not move beyond those normally in place during the everyday work. The temptation was to elicit more information from students by asking perhaps un-necessary questions or leaving the questions more open-ended or circular. Survey type questionnaires would hold none of these possible pit-falls. Neither would they, for me, deliver the level of satisfaction the ethnographic approach offered me.

The journey completed

In the completion of the ethnographic journey there is a sense that the ethnographic methodology undertaken did serve the aim of the study well. It allowed for a contribution to be made to research. The voice of the students was heard in the writings and through it a student need examined.

Recommendations for future disability officer research, education and practice

I suggest that the student need to perceive the disability officer role as a caring role is an area that would benefit from further research. It would be of particular interest to discover if the need of the student in the unique setting of this study could be generalised to students nationally. Student need is the 'bread and butter' of disability officer's work - I've quoted one disability officer as stating. Such further research could lead to positive outcomes for students in particular.

Direct research with disability officers in Ireland from both quantitative and qualitative perspectives needs to be undertaken. This would, along with creating a base line of knowledge, go some way to meeting the research element required to fully professionalise the disability officer role. The post-graduate programme referred to in this study will theoretically underpin for disability officers what has been demonstrated in this study as a major affective element of the disability officer role – that of needs assessing students with disabilities. To date, disability officers have identified and co-operated with educational institutions in the devising of programmes of study to meet the needs of

the role.[215] This co-operative approach needs to be continued and expanded to promote educational opportunities directly related to the role of disability officers.

In relation to practice, among disability officers peer engagement is a major component in promoting best practice. Through DAWN individual members contribute to the group by way of knowledge and exemplars. Collectively, as well as individually, DAWN members engage with Government e.g., Higher Education Authority, The National Office, National Disability Authority, etc., and agencies etc., e.g. AHEAD, PwDi, National Council for the Blind, Ireland, Deaf/Hear, The Lucia Foundation, highlighting issues of practice and policy. Disability Officers deliver papers at conferences both in Ireland and abroad.[216] Such elements of practice need to be strengthened further through the provision of a fully resourced Disability Support Office. The establishment of Disability Support Offices is supported by McCabe's (2001) study. Such an Office would also allow disability officers the time required to deliver fully on the affective element of their role allowing for student need to be met through the disability officer's listening understood as caring.

Contribution of the research

The contribution of this ethnographic study is that: the disability officer role can be understood as a role with an affective element, operationalised by listening axiologically as caring. The everyday work of a disability officer can be acknowledged as a caring role/caring work. For now, it is accepted that the work falls into the category of semi-professional. The aim of the research has been met. Agar (2008) stated in relation to this research: "Your work sounds good and especially worthwhile if the role is not well understood. That's what ethno [sic] was made for" (personal communication, 27-03-2008).

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[215] This was the case in relation to the Post-graduate Diploma in Educational Studies – Disability Needs Assessment at Trinity College Dublin.

[216] During the course of the research I delivered at two seminars in Hungary around the Irish approach to supporting students with disabilities in Higher Education and facilitated a workshop at the *Looking AHEAD to an Inclusive Educational Future: A National conference for the Higher and Further Education Sector*.