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Constructions of Learning Disabilities within Contemporary Canadian Society: Discourse, Biopower and Governmentality

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Graduate Program in Sociology
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Abstract

Understandings and definitions of disability have changed and varied across social and political climates within North America, affecting the ways in which disabled individuals are treated, represented, and responded to, within various facets of society. Learning disabilities, in particular, have been subject to change and language surrounding the label has shifted across different socio-political contexts. The objective of this research project was to explore and document the dominant discourse constructing learning disabilities within Canada, the various individuals involved with constructing the category of learning disability and how such constructions have informed broader, treatment approaches to learning disabilities within Canada. A qualitative content analysis of 200 media articles was employed to address the study's objectives, along with a Foucauldian framework to theorize major findings. The major findings of this thesis include: Dominant medicalized discourses of learning disabilities circulate throughout media articles to construct learning disabilities as both an individual and social problem; medicalized understandings of learning disabilities influence how learning disabled individuals are governed, treated, as well as who becomes responsabilized to manage the problem of learning disabilities; the dominant discourse of learning disabilities complements broader neoliberal ideologies and social structures concerned with productivity, independence and self-sufficiency, impacting the lives of learning disabled individuals more generally. As a category, then, learning disabilities and approaches to learning disabilities cannot be fully understood without an understanding of the historical, social and cultural context in which the category has come to be produced and realized.

Keywords

Disability, Education, Discourse, Biopower, Governmentality, Disciplinary Power, Neoliberalism, Media, Power

Summary for Lay Audience

Understandings and definitions of disability have changed and varied across social and political climates within North America, affecting the ways in which disabled individuals are treated, represented, and responded to, within society. Learning disabilities, in particular, have been subject to change and language surrounding the label has shifted across different socio-political contexts, affecting the way that learning-disabled individuals are treated. The objective of this research project was to explore the ways in which learning disabilities are talked about within media articles, the various individuals present within the conversation and how those representations of learning disabilities influence treatment approaches for learning disabled individuals. A qualitative content analysis of 200 media articles was employed to address the study's objectives, along with a framework grounded in the works of Michel Foucault to theorize major findings. The major findings of this thesis include: Learning disabilities are predominantly represented as medical problems; medical framings of learning disabilities influence how learning-disabled individuals are treated and who is expected to respond to the problem of learning disabilities; medical framings of learning disabilities compliment broader trends within the social, economic and cultural context of Canada.

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Chapter 1

1 Introduction

Beginning in 1996, the federal government of Canada established a task force with the aim of creating supports to include and integrate disabled persons into various facets of Canadian society (Leung, 2014). Since then, Canadian provinces have passed their own laws and acts surrounding disability, holding various organizations, governments and institutions accountable on issues related to disability (Lyster, 2015a; Lyster, 2015b). Within universities, accessibility centers have been created to assist, support and integrate disabled students into the environment. Some universities have adopted a Universal Design for Learning, where educational curricula are designed in a way that is accessible for everyone, eliminating the need for, and reliance on, accessibility centers.

Understandings and definitions of disability have changed and evolved across social and political climates, with the goal of adequately accommodating and integrating disabled individuals. Learning disabilities, in particular, have been subject to change and, as some scholars have noted, language surrounding the label has evolved and shifted with different socio-political contexts (D'Lintino, 2017). For example, labels such as “feble-mindedness”, “handicap”, “idiocy” and “imbecility”, have been historically executed in attempts to capture, describe and treat behaviors that would now fall under the category of learning disability (McDonagh, Goodey, & Stainton, 2018; Obrien, 2013). Such labels influenced approaches to handling and treating learning disabilities, specifically in relation to the institutionalization of learning-disabled individuals and the

development of special education programs. Thus, the category of learning disability has a history of being used and employed in a way that has justified the segregation of such individuals for the overall ‘benefit’ of society (McDonagh, Goodey, & Stainton, 2018).

Currently, the Learning Disabilities Association of Canada (LDAC) defines learning disabilities as biological impairments that “are due to genetic and/or neurobiological factors or injury that alters brain functioning in a manner, which affects one or more processes related to learning” (The Learning Disabilities Association of Canada, March 16, p. 6). Such a definition has been greatly taken up within certain institutions, specifically educational institutions, medical institutions, workplace institutions and legal institutions, and has informed the way that services, accommodations and resources have been granted to learning-disabled individuals in attempts of integrating them into mainstream society (Hibbs & Pothier, 2006). Many provincial and federal policies around learning disabilities employ such a definition, influencing the goals of such policies and thus affecting the lives of learning-disabled individuals in particular ways.

There is a growing number of scholars situated within the field of critical disability studies that argue that definitions of disability cannot be fully understood without an understanding of the historical, social, cultural and political atmosphere in which understandings of disability emerged (Tremain, 2005; Katzman, 2016; Linton, 2006; Tremain, 2006; Shakespeare, 2006). Given the rise of biomedicine after the eighteenth century and the increasing medicalization of life that emerged in the twentieth century, disability and learning disabilities have been dominantly represented as individual, pathological problems. Such a conceptualization of learning disabilities has resulted in the altering of various social institutions to accommodate for learning-disabled

individuals as well as the rise of the medical profession concerned with treating learning disabilities. Further, given dominant trends towards integrating learning-disabled individuals into mainstream society, such an approach arguably informs the way that learning disabilities are constructed, represented, conceptualized and managed within different contexts of society. Ultimately, dominant discourses surrounding disability and learning disabilities have both informed, and been informed by, broader social structures and discourses, resulting in changes and adaptations to societal infrastructure and social policies.

Considering the increasing campaigns surrounding disability that promote integration, inclusion and acceptance within various institutions, it is important to analyze and explore how current understandings and constructions of learning disabilities are informed by, and inform, such discourses that revolve around integrating learning-disabled individuals into mainstream society. Such is the reasoning for my research project that explores how learning disabilities are dominantly constructed within contemporary Canadian society and the implications of those constructions on approaches to learning disabilities, as well as on broader social, cultural and political structures. While previous research has certainly documented the history surrounding learning disabilities and the various social forces involved with the construction and evolution of the label, the majority of such research has taken place within the United States and the United Kingdom (McDonagh, Goodey, & Stainton, 2018; O'Brien, 2013; Sleeter, 2010; Sleeter, 1986; Eyal et al., 2010; Katchergin, 2016). To my knowledge, no research has explored how learning disabilities are dominantly constructed within a Canadian context and the implications of such constructions on broader social, cultural,

political and economic structures. Through examining the ways in which learning disabilities are dominantly constructed, we can begin to see how effective integration approaches to learning disabilities have been and the implications of such approaches on the lives of learning-disabled individuals.

1.1 Project Goal

The idea for this project came out of my interests concerning the history and evolution of the notion of learning disability within Canadian society. Over time, definitions of learning disabilities have shifted and changed, the result being inconsistencies in diagnoses, different understandings of the label and problems with identifying learning disabilities. In Canada specifically, education is governed at a provincial level, resulting in different approaches to and ‘treatments’ for learning disabled individuals across provinces (D’Lintino, 2017). Klassen (2002) specifically traces the evolution of the definition from 1989 to 2000 by analyzing four major Canadian journals and their utilization of the concept and specific definitions within a given time period. In line with much of the literature surrounding the definition, Klassen found an inconsistency with how each journal defined learning disability, and how each employed the term and offered practical responses. Such an inconsistency in the definition poses problems for educators, practitioners and parents in identifying whether someone has a learning disability. The conversation, then, centers around the need for a consensus surrounding the definition of learning disability; as such a consensus offers an avenue for standardized diagnosis and treatment (Klassen, 2002).

While the above conversation centers around the issues associated with inconsistent and shifting definitions of learning disabilities, other scholars have offered a more critical explanation for why such definitions have shifted, and ultimately, how such definitions have come to be constructed in the first place (McDonagh, Goodey, & Stainton, 2018; O'Brien, 2013; Sleeter, 2010; Sleeter, 1986; Eyal et al., 2010; Katchergin, 2016).

Providing a conceptual history from the 1200s to the 1900s of what the authors term, intellectual disabilities, McDonagh, Goodey and Stainton (2018) argue that the shifting nature of the definitions of learning disabilities parallel shifts in the social and political structures of American society. Further, they argue that the category of learning disability was itself produced and constructed by the “social, cultural and intellectual environments in which they took form”, and in turn, performed a specific role in those contexts, thus reproducing specific understandings around learning disabilities for specific purposes. Looking more closely at the role that social context plays in shaping categories and definitions, authors Gil Eyal and others (2010) analyze the emergence of autism within the socio-political context of the United States and demonstrate how the deinstitutionalization that occurred in the 1960s of what was then called “mental retardation” gave way to an emergence of many different categories that aimed to capture a variety of different behaviors, of which learning disability was one. Such a process enabled new types of therapies, diagnostic criteria and social supports for individuals who would have previously fallen under the label of mental retardation.

There is a documented history of the evolution and changing nature of the notion learning disability within North American society. As we can see from above, the way that things are labelled, classified and understood, often parallel broader social structures and

influence the ways that we respond to and act in relation to such labels. The objective of this research project is to explore and document the dominant discourse constructing learning disabilities within Canada, the various individuals involved with constructing the category of learning disability and how such constructions have informed broader, treatment approaches to learning disabilities within Canada. My research questions are as follows: *What is the dominant discourse constructing learning disabilities within contemporary Canadian society? Who are the dominant individuals involved with constructing the category learning disability? How have dominant constructions of learning disabilities informed dominant approaches to learning disabilities?* To answer my research questions, I selected the media as a site to document the dominant discourse of learning disabilities within Canada. Specifically, I analyzed newspaper articles to explore how learning disabilities were dominantly represented, whose voices were behind such constructions and the ways that such discourses were informed by broader social and cultural structures and ideologies.

The outline of this thesis is as follows. Chapter two outlines my theoretical framework and the relevant literature that has informed my approach and understanding of my topic. In chapter three, I present my methodology, specifically the articles I analyzed, how I collected my data and the way that I analyzed the articles. Chapter four presents my key findings, namely the dominant discourse constructing learning disabilities, the stakeholders involved in the label's construction and how integration was predominantly presented as a solution to the problem of learning disabilities throughout the articles. In chapter five, I discuss my findings in relation to my theoretical framework and previous research. I then discuss the limitations surrounding my research as well as directions for

future research. Finally, chapter six presents my conclusion and summary of the main findings. I will begin my literature review in the next chapter.

Chapter 2

2 Theoretical Framework and Literature Review

In this chapter, I present an overview of the theoretical framework that I employ in my analysis as well as a background of the literature relevant to my topic. I begin in the first section by introducing my theoretical framework grounded in the works of Michel Foucault (1995; 1984), particularly his concepts of discourse, biopower, governmentality and disciplinary power, and how they relate to the topic of disability and learning disabilities more specifically. Section two explores neoliberalism as an ideology and social structure within Canadian society and how Foucault's theoretical framework helps to articulate the effects of neoliberalism on the lives of disabled individuals. In section three I present a background of the literature relevant to my topic, particularly literature that employs a Foucauldian analysis on the topic of disability, as well as literature on the social constructions of learning disabilities and the stakeholders involved in the category's trajectory within North America.

2.1 Section One: A Foucauldian Theoretical Framework

2.1.1 Discourse and Biopower

A key element of Foucault's work centers on the production of knowledge and examines how new knowledges and ways of understanding social phenomena are manufactured at particular moments in time (Foucault & Rabinow, 1984). For Foucault, knowledge cannot be separated from political and social structures; knowledge is itself a relational

object that can enact power through its distribution by, and circulation through, political and social structures. Thus, Foucault asks us to analyze and problematize the political and social relations that influence how certain knowledges become produced and enmeshed within political and social structures (Foucault; 1995; Foucault & Rabinow, 1984, p. 74).

Those knowledges that become produced by political and social structures are referred to as discourses, understood as systems of statements and representations that “constitute a set of propositions which are scientifically acceptable, and hence capable of being verified or falsified by scientific procedures” (Foucault & Rabinow, 1984, p. 54). For the purpose of this thesis, discourse is conceptualized and operationalized as those systems of statements, ways of conveying knowledge, representations and frameworks, which inform the ways that individuals perceive, act and navigate, the social world. Thus, discourses structure the way we think, talk, act and feel about the social world; they permeate the lives of all individuals, whether consciously or unconsciously. In doing so, discourses limit and create possibilities for what is thinkable, doable and possible at given moments in time, contingent on the socio-political climate.

By structuring and constraining the way we understand the social world, discourses enact power by producing certain ‘truths’ about the social world. Such truths are greatly tied to the economic, social and cultural fabrics of a society and work to uphold and reinforce those fabrics. Thus, Foucault sees ‘truths’ as regimes, systems “of ordered procedures for the production, regulation, distribution, circulation and operation of statements. ‘Truth’ is linked in a circular relation with systems of power which produce and sustain it, and to effects of power which induces and what extends it” (Foucault & Rabinow, 1984, p. 74). Regimes of truth occur on many different levels of society and circulate through those

apparatuses concerned with economic and political stability, namely the media, educational, governmental and legal institutions. Further, regimes of truth are centered on forms of scientific discourses that aim to naturalize and normalize such truths by presenting them as rational, verifiable entities.

Regimes of truth become instilled and circulated within society through various regimes of power. One regime of power of interest to Foucault is biopower, a modern form of power that centers on governing the human population as a species as well as governing human bodies (Foucault & Rabinow, 1984, p. 17; Foucault, 1986). As opposed to traditional modes of power which sought to penalize and repress individuals with external measures, biopower operates through various technologies that attempt to manipulate, control, direct and regulate bodies to ensure economic stability (Foucault, 1986). Such technologies of biopower are demonstrated through the use of statistics and modern science to document various biological processes such as “propagation, births and mortality, the level of health, life expectancy and longevity” as a way of predicting and calculating ways in which these processes may be altered, challenged or improved upon (Foucault & Rabinow, 1984, p. 262). Statistics and scientific research are key components of biopower in that they work to “qualify, measure, [appraise], and hierarchize” bodies as opposed to explicitly subjecting bodies to adverse forms of power (Foucault & Rabinow, 1984, p. 266). Thus, biopower operates subtly within contemporary society, as it is masked under the guise of contributing to the well-being of the human population.

According to Foucault (1986), biopower enacts power throughout society by circulating and reproducing those dominant discourses through various technologies and apparatuses

that designate certain biological entities, like disability, as pathological problems. Given the historical emergence of statistics and science throughout the twentieth century, such technologies of biopower have created norms of reference for measuring human behavior and processes (Tremain, 2006, p. 185). Through comparing, differentiating and organizing individuals in relation to one another, biopower enacts a rationality of normalization, a way of governing human bodies in relation to those norms deemed optimal for the health of the population (ibid). Such a rationality of normalization has enabled, and facilitated, state activity surrounding the problem of disability. The rise of medical professionals (including psychologists and psychiatrists) who specialize in the field of disability is an example of how individuals have come to organize themselves under regimes of biopower by treating and responding to the problem of disability. Thus, in contemporary society, disability is predominantly viewed as an entity that deviates from norms of optimal health and is thus dominantly represented as a health problem, a medical defect, that biopower has come to manage, regulate and govern through various technologies and the emergence of those individuals who are regarded as medical professionals in the field of disability.

The medical model for conceptualizing learning disabilities is an example of a regime of truth produced through biopower that upholds regimes of normalization within contemporary Canadian society. According to the medical model, learning disabilities are inherent impairments located within one's body and are a result of biological or genetic factors (Hibbs & Pothier, 2006). So, as opposed to one's learning disability becoming realized through medical discourses and classificatory schemas, the medical model operates from the ontological position that learning disabilities exist and affect

individuals regardless of social, political or environmental influences, and can be verified and proven through scientific research (ibid).

Such a model for conceptualizing learning disabilities has emerged within contemporary Canadian society as a result of the “increasing medicalization of society” that occurred throughout the twentieth century (Conrad & Leiter, 2004, p. 159). A term coined by Peter Conrad (1992), medicalization is a process that has transformed previous “non-medical problems” into pathological medical problems that require treatment and intervention by select medical professionals who are regarded as able to treat such problems (Conrad & Leiter, 2004, p. 158). The medical model for framing learning disabilities has arisen out of the emergence of medicalization and has been widely taken up within a Canadian context through the implementation of medical professionals to treat disability, the emergence of disability organizations to provide supports for disabled individuals, the emergence of psychoeducational assessments to diagnose learning disabilities and the various ways that educational, legal and governmental institutions have adopted such a model in their accommodation policies for learning-disabled individuals (Hibbs & Pothier, 2006).

While the medical discourse of learning disabilities has been greatly taken up within Canadian society by various individuals, institutions and platforms, it fails to recognize the extent to which one’s impairment is ultimately contingent on the historical emergence of biomedical discourses and classificatory schemas that privilege scientific discovery and the quest for absolute truths (Tremain, 2006; Hibbs & Pothier, 2006). Foucault (1986) draws attention to the emergence of biomedicine as a discipline of knowledge that enacts power by structuring the way we think and act in relation to our bodies and the

bodies of others. With this knowledge, we must question the ways in which certain entities, behaviors and phenomena, become designated as impairments, and examine those power relations that produce the notion of ‘impairment’ in the first place. Thus, this thesis draws on Foucault to conceptualize learning disabilities as entities that have become produced and realized through the historical emergence of dominant, medicalized discourses. Without such discourses and classificatory schemas, learning disabilities do not exist, as their existence is contingent on particular political, social and cultural matrices. Ultimately, learning disabilities are a prescribed category created by broader power relations – namely those relations present within the fields of medicine, psychology and education – that in turn, influence the way we think about, and act, in relation to the concept of learning disability.

2.1.2 Governmentality and Disciplinary Power

Discourse, biopower and regimes of normalization all entail what Foucault (1995) terms governmentality. According to Tremain (2006), Foucault’s concept of governmentality refers to “any mode of action, more or less considered and calculated, that is bound to structure the field of possible action of others” (Tremain, 2006, p. 187). Governmentality operates through individuals and institutions and produces “fields of possible action” that direct, limit, and structure the ways individuals act and think (Tremain, 2005, p. 8). In doing so, governmentality operates subtly and conceals the ways in which it permeates individual bodies and organizes individuals. Through concealing its practices, governmentality “allows the discursive formation in which they circulate to be naturalized and legitimized”, creating the illusion that individuals make free “acts of

choice”, which furthers “the consolidation of more hegemonic structures” that work to govern and subject individuals in the first place (ibid).

Individuals are rendered governable by being produced as subjects through practices of governmentality, namely those practices that work to discipline individual bodies, practices that enforce what Foucault refers to as disciplinary power (Foucault, 1995). Disciplinary power manipulates and controls bodies through various strategies and technologies. In doing so, bodies are rendered “docile” through such processes, in that they can be “subjected, used, transformed and improved” (Foucault, 1995, p. 98). Such processes aim to improve one’s body in economic and productive terms. Disciplinary power works to subject and transform the body into a more useful and optimal one, full of capacities deemed necessary for economic and social stability. At the same time, disciplinary power works to diminish certain forces that are seen as unproductive, unhealthy or abnormal (ibid).

Disciplinary practices that render bodies docile and produce certain subjects are referred to as modes of objectification, those practices that aim to categorize, classify, and manipulate bodies, thus informing the ways we make meaning of our own selves and assign meaning to others (Foucault, 1995; Tremain, 2006). Within the fields of medicine and psychology, ‘dividing practices’ are one example of a mode of objectivization as, through drawing on scientific discourses, such practices aim to compare bodies in relation to discourses and categorize them accordingly. Thus, such practices enact power as they ultimately produce certain subjects constrained to particular fields of possible action, namely the fields of psychology and medicine. For example, learning disabled individuals become learning disabled subjects through such dividing practices implicit

within receiving a psychoeducational assessment to diagnose a learning disability. Such an assessment operates from scientific discourses concerning the brain and body, and by comparing, categorizing and classifying certain processes of the brain and body, individuals become subjected to the category of learning disability, resulting in their production as learning-disabled subjects who must act accordingly within the field in which they were produced.

Further, dividing practices enact power through what Foucault terms the “medical gaze”, a gaze that involves “normalizing judgment that categorizes human bodily variation as either normal or aberrant” (Krogh & Johnson, 2006, p. 160). In the case of accessing a psychoeducation assessment, learning disabled individuals are subjected to the medical gaze through evaluations, tests, and observation from professional psychologists. Further, the medical gaze involves one’s compliance and conformity to professional authority and power, as through the “prestigious cultural capital” granted to professionals in the fields of health care, individuals accept their authority to diagnose, classify and categorize certain bodies as normal or abnormal (ibid). So, not only does accessing a psychoeducational assessment reproduce dominant medicalized discourses around learning disabilities, but it also contributes to, and reproduces, professional power that is implicit in such processes and which structures and limits the actions of learning-disabled subjects.

Further, disciplinary power enforces regimes of normalization as it aims to organize, manage and monitor individual behaviour around a certain ‘order’ or ‘norm’ deemed optimal for the overall population. In the case of disability, individual bodies are

hierarchized and classified in terms of ability and the value placed on certain abilities that become instilled and legitimated as norms. Thus, disciplinary power

differentiates individuals from one another, in terms of the following overall rule: that the rule be respected, or as an optimum toward which one must move. It measures in quantitative terms and hierarchizes in terms of value the abilities, the level, the 'nature' of individuals. It introduces, through this 'value-giving' measure, the constraints of a conformity that must be achieved (Foucault & Rabinow, 1984, p. 195).

Through the enforcement of normalized regimes through disciplinary power, individuals become governable, as their bodies and abilities are measured and subjected to value laden norms, resulting in them conforming and complying to such norms. Such compliance and conformity to those norms deemed most optimal foster broader relations of power, namely those within the fields of psychology and medicine, and uphold broader social and economic structures that are concerned with productivity and economic stability (Tremain, 2006)

Another mode of objectivization relevant to the topic of learning disabilities is the process of subjectification (Foucault & Rabinow, 1984). While traditional models of power posit that individuals are more passive in how power exerts itself onto them, Foucault (1995) sees individuals as playing an active role in the way power permeates, and operates through, individual bodies. Such is the process of subjectification, where individuals take up the discourses made available to them, and in doing so, actively transform themselves into subjects that comply with such discourses and various modes

of governance (Foucault & Rabinow, 1984). Such a process can be witnessed in the ways that learning-disabled individuals come to embody the medical discourse around learning disabilities by drawing on it to understand themselves. In doing so, such individuals reproduce those dominant regimes of truth – namely the medical model of disability and biopower – by governing themselves according to such a label and category.

2.2 Section Two: Neoliberalism and Disability

2.2.1 Neoliberal Ideology within Canada

The ways in which individuals are governed and subjected to biopower are contingent on the social, cultural, economic and political structures of a society. Within contemporary Canadian society, neoliberalism as an ideology, a political structure and an economic matrix, implicates individuals in unique ways and governs them accordingly. Foucault's theoretical framework is useful for exploring the ways that neoliberalism permeates the lives of individuals and subjects individuals to discourses produced through biopower and disciplinary power. Below, I will present a brief overview of how neoliberalism as an ideology and social structure has been taken up within a Canadian context.

Within a neoliberal state, capital accumulation is not dictated and regulated by the government. Rather, all individuals are seen as free agents, capable of making choices and accumulating capital through “hard work and merit” (Wilson, 2017, p. 35). Personal hardships, then, are seen as just that, individual failings that are a result of individual choices and circumstances. While notions of freedom, choice and agency are circulated under neoliberal regimes, neoliberal governmentality circulates power through

individuals by directing the behaviors of individuals towards those norms valued under neoliberal governance, norms that construct life around market logic: “life is regarded as an enterprise, qualified in terms of choice, investment, competencies, and (human) capital, and oriented by highly diverse needs” (Simons & Masschelein, 2005, p. 216).

Such norms of neoliberal governmentality responsabilize individuals by placing the onus onto them to secure their own successes within the free market. Responsibilization under neoliberalism operates as a “master-key” of governance that aims to create “a reflexive subjectivity deemed suitable to partake in the deployment of horizontal authority and one which will bear the consequences of its actions” (Shamir, 2008, p. 4). So, as opposed to government structures externally imposing themselves on the lives of individuals, neoliberal governmentality targets individual bodies through notions of free choice, being a productive citizen and being self-sufficient, able to thrive economically without government assistance. Thus, neoliberal governmentality aims to construct individuals into ‘enterprise subjects’, those individuals whose choices further their productivity and capital accumulation, reproducing those neoliberal structures concerned with a particular form of economic and social stability (ibid).

Social institutions also become infiltrated by neoliberal ideals and governmentality, in that their services are consumed, bought or invested in, all for the sake of securing one’s own success and future (Wilson, 2017). Education becomes something to purchase and invest in for the purpose of having a successful career; healthcare becomes a site to invest in so one is able to work and participate fully as a neoliberal subject. Social relations between individuals and institutions, then, are not so much a product of community or a shared commonality. Rather, social relations are a result of business-like contracts,

interactions and transactions, all linked to a shared drive to be successful enterprise subjects that align with values and norms of neoliberal governmentality. Such neoliberal ideologies can be witnessed within Canada's education system where a decline in federal and provincial funding towards education has resulted in a growing privatization of education, particularly universities and colleges, that has led to a growing competitiveness and consumption of education (Lehmann, 2016, p.14). As opposed to education being a site that promotes learning and growing as students, neoliberalism has transformed education into a site that is bought and consumed, all for the sake of ensuring one's economic productivity and entrepreneurship within a neoliberal society.

2.2.2 Neoliberalism and Disability

Foucault saw the rise of neoliberalism and capitalist ideals in North America as a foundation for the emergence of biopower (Foucault & Rabinow, 1984). Arguably, biopower would not have been possible without neoliberal governmentality as both require the idea of a norm backed by statistical legitimacy to govern individuals accordingly. Biopower operates through neoliberal governmentality to organize and hierarchize individual bodies based on *economic* capacity and productivity, assigning more value to those bodies that are able to participate fully and align with such norms. This creates unique implications for the lives of disabled and learning-disabled individuals, as their bodies and capacities are viewed as inherently deviant from such norms under neoliberal governmentality. Such a conception of disabled bodies under neoliberal governmentality creates new modes of governance and discipline, that aim to construct disabled subjects into self-sufficient neoliberal citizens and consumers. As

Tanya Titchkosky (2003) notes, disabled subjects are turned into ‘able-disabled’ subjects under neoliberal governmentality – those disabled individuals “who have successfully distanced themselves from traditionally constructed disabled subjectivities” and in doing so, have “[adhered] to able-bodied norms, such as maintaining economic independence through paid employment” (Katzman, 2016, p. 323). Such a subjectivity reproduces dominant, medicalized discourses that view disability as a personal impairment that can be overcome with hard work and discipline. Together, both the medical model of disability and neoliberal governmentality work to transform disabled subjects into ‘able-disabled’ subjects, furthering the reproduction of neoliberal governmentality and norms surrounding what it means to be a successful, neoliberal citizen.

Such processes of transforming disabled subjects into ‘able-disabled’ ones can be seen when looking at the shifting approaches to disability within Canada throughout the years. Prior to the late 1970s and 1980s, disabled individuals were constructed as “passive”, “vulnerable” and “dependent” subjects (Katzman, 2016, p. 312). With the rise of medicalization and biomedicine in the twentieth century, the Canadian state approached disability by institutionalizing those individuals who were considered disabled or abnormal. Segregation, then, was viewed as the norm for treating disabilities, whether physical, mental or emotional, and took the form of various mental, rehabilitative or educational institutions, instated by provincial governments to adequately address the problem of disability within Canada (Katzman, 2016). Such an institutionalization, however, was challenged by the emergence of disability rights movements and activists who saw segregation as exclusionary or discriminatory – a process that further oppressed and reinforced dominant notions of disabled individuals as weak and unable to function

accordingly with society's norms (ibid). Coupled with a growing neoliberal governmentality, the Canadian government began to shift its approach to disability from segregation to an approach that centered on integration (ibid).

Such a shift was accompanied by what is known as the independent living movement that emerged out of activist activity in the 1970s and began to materialize in Canada throughout the 1980s and 1990s. Backed by disability rights activist, academics and educators, the independent living movement sought to reframe disability around 'ability' rather than 'inability', with the focus being on what disabled subjects can offer the economy and society (Katzman, 2016). Implicit in this new framing of disability were notions of neoliberal governmentality, operating under the guise of framing disabled individuals as capable citizens, able to participate in "consumer capitalist society" with the proper supports, skills and accommodations (Katzman, 2016, p. 313). From this movement, private disability organizations began to form, particularly those concerned with integrating disabled individuals into mainstream, neoliberal society.

In the case of learning disabilities, the Learning Disabilities Association of Canada (LDAC) formed in 1963 by groups of parents of disabled children, with the goal of providing learning-disabled citizens with the necessary resources and opportunities to "function as citizens" within mainstream society (LDAC, History, 2017). Similarly, the Ontario government, through a new "Education Act" passed in 1980, required all public schools to provide special education programs for the learning-disabled (Ontario Ministry of Education, 2019). Such an act was passed to encourage the integration and inclusion of disabled citizens within the Canadian economy: if disabled individuals were placed in 'regular', public school systems, it was believed they would be more likely to learn the

skills necessary to participate fully within Canadian society (DeJong, 2001). Both the emergence of the LDAC and the passing of the Education Act paved the way for many more disability organizations and initiatives to develop, all centered around the notion of integration and aimed at providing disabled individuals with the tools and skills to actively construct themselves as ‘abled-disabled’ citizens.

2.3 Section Three: Relevant Literature

2.3.1 Foucault and Disability

A growing number of scholars (Linton, 2006; Tremain, 2006; Tremain 2005; Siebers, 2006; Waterfield, Beagan, & Weinberg, 2017; Trescher, 2017) situated in the field of critical disability studies have drawn on the works of Foucault to conceptualize how medicalized discourses around disability implicate the lives of disabled subjects by controlling and assimilating disabled individuals into the very structures that oppress them in the first place.

Critical disability scholar Simi Linton (2006) examines the relationship between the medical model and the language of disability. In doing so, language is framed as fundamental to the construction of disability, as language circulates dominant discourses. Therefore, language is inextricably linked to the “the dominant culture’s views of disability” (Linton, 2006, p. 161). Deconstructing the meaning behind the word disability is one way of identifying those dominant discourses that construct ideas of disability in the first place. Taken apart, the prefix *dis* means “not”, and points to something “dissimilar” within the individual, something that is lacking (Linton, 2006, p. 171).

Therefore, we can understand disability as a “not condition”, a condition that is lacking or has been ruptured (ibid). Drawing on the work of Lennard Davis (2006), Linton argues that this notion of a ‘lack’ of something perpetuates notions of normality and abnormality, where those categorized as abnormal are seen to lack an ability that the majority of individuals are seen to possess. Learning disabilities can be viewed similarly, where the term literally means a lack of learning, an absence of learning or a rupture of learning. Such implications have led some individuals to reframe their language surrounding learning disabilities to language that aims to capture learning differences as opposed to pointing out flaws in one’s learning. In doing so, the language of learning difficulties promotes the idea that all individuals want to and are able to learn, as opposed the notion that individuals are unable to learn or ‘lack’ the ability to learn (Chappell, Goodley & Lawthom, 2001, p. 46).

Further exploring the role that discourse plays in constructing disabled subjectivities, scholar Hendrik Trescher (2017) analyzes media material to explore the “discursive” production of subjectivities for people with cognitive disabilities (p. 3). In doing so, the author demonstrates the ways that discourses circulate through the media and ultimately produce perceptions of disability more broadly. Through such discursive representations, then, power is circulated by the production of ideas and knowledge surrounding cognitive disabilities. A major finding in the author’s study was that individuals with cognitive disabilities are dominantly produced as infantile subjects, those subjects that lack agency and ability to think for themselves and who rely on others to function.

Scholars have noted that the ways that disability is talked about and constructed has consequences for the material realities of disabled individuals, specifically in regard to

how disability has often been treated through the institutionalization of such individuals (Linton 2006; Tremain, 2006). Positive consequences have been that through the institutionalization of disability, certain medical interventions have been successful in contributing to the well-being of disabled individuals' lives. We can also think about the positive effects stemming from the rise in technology and the opportunities that technology has created for disabled individuals. However, the medicalization of disability has also had negative implications on the lives of disabled individuals. Disabled individuals are often "treated" for their disability, or condition, as it is something deemed 'unhealthy' and a risk to an individual's well-being (Linton, 2006, p. 162).

Extending Linton's argument surrounding the negative consequences of the medicalization of disability, critical disability theorists Tobin Siebers (2006) and Shelley Tremain (2006) have both drawn on Foucault's (1986;1995) notions of biopower, disciplinary power, dividing practices and docile bodies to demonstrate how the medical institutionalization of disability has enabled a level of social control over the lives of disabled individuals. Given the growth of statistics and psychiatry as reliable sciences in the modern era, bodies have become viewed as sites that require management and improvement. Tremain (2006) extends this notion and sees biopower as a political tool that attempts to "rationalize" the "problems" that certain characteristics or traits found within groups of people pose to the government (Tremain, 2006, p. 185). In attempts to rationalize and quantify disability, Sieber (2006) argues that biopower then determines the materiality of our existence and ultimately the materiality of the disabled individual's existence; "the human subject has no body, nor does the subject exist, prior to its subjection as representation" (Siebers, 2006, p. 174). Biopower ultimately takes and

constructs the disabled individual into a particular subject that can be measured, managed and made an example of.

The way that biopower subjects individuals to certain representations about their bodies enables social institutions to categorize and interact with individuals based on these dominant discourses and representations. Arguably, social institutions such as educational institutions, prisons and hospitals, operate as forms of disciplinary power that seek to organize bodies around regimes of normalization. Scholars (Hibbs & Pothier, 2006; Waterfield, Beagan & Weinberg, 2017) have argued that similar disciplinary practices are at play within university environments, particularly in the form of accommodation policies for learning-disabled students in higher education environments (Hibbs & Pothier; 2006). Given the medical and individualized understandings of learning disabilities within accommodation policies, students are required to “self-regulate” and manage themselves by identifying themselves within the framework of disability offered by the university’s policy, provide the required documentation for disability, and wait for approval of accommodation from the university (Hibbs & Pothier, 2006, p. 196). This process arguably perpetuates individualistic ideas surrounding disability, as university accommodation policies put the “onus” on students to account for disability instead of looking to their policies and structures as exclusionary (ibid). Authors Waterfield, Beagan and Weinberg (2017) note similar disciplinary strategies at play in the experiences of disabled academics at Canadian universities. Similar to the argument put forth by Hibbs & Pothier, disabled academics were responsabilized to address, manage and accommodate their disabilities. Such responsabilization was furthered through neoliberal performance standards that demanded certain career

expectations and pressures, further placing the onus on disabled academics to conform to the structures of the university that exclude them.

2.3.2 Constructions of Learning Disabilities

The above literature reflects the ways in which language, discourse and understandings of disability have implications for the material existence and world of disabled individuals. Thus, it is important to examine literature surrounding the ways that learning disabilities have come to be constructed and understood within contemporary North American society.

Scholars have certainly documented the shifting understandings and discourses surrounding learning disabilities, and how such shifts are indicative of broader social structures, like neoliberalism (McDonagh, Goodey, & Stainton, 2018; O'Brien, 2013; Sleeter, 2010; Sleeter, 1986; Eyal et al., 2010; Katchergin, 2016). Providing a conceptual history from the 1200s to the 1900s of what the authors term, intellectual disabilities, McDonagh, Goodey and Stainton (2018) argue that the shifting nature of the definitions of learning disabilities parallel shifts in the social and political structures of American society. Further, they argue that the category of learning disability was itself produced and constructed by the “social, cultural and intellectual environments in which they took form”, and in turn, performed a specific role in those contexts, thus reproducing specific understandings around learning disabilities for specific purposes. Looking more closely at the role that social context plays in shaping categories and definitions, authors Gil Eyal and others (2010) analyze the emergence of autism within the socio-political context of the United States and demonstrate how the deinstitutionalization of what was then called

“mental retardation” gave way to an emergence of many different categories that aimed to capture a variety of different behaviours, of which learning disability was one. Such a process enabled new types of therapies, diagnostic criteria and social supports for individuals who would have previously fallen under the label of mental retardation.

Engaging in a historical analysis of the category of learning disabilities by analyzing the trajectory of its definition as understood by the Diagnostic and Statistical Manual of Mental Disorders (DSM), Ofer Katchergin (2016) demonstrates the hegemonic discourses present within all editions of the DSM that construct the category of learning disability and entail its diagnosis as a medical entity. A key point in their article highlights the need for a cultural consensus surrounding ‘norms’ in order for the category of learning disability to be produced. Such a consensus is instilled in professional diagnostic tools, like the DSM, and so Katchergin argues that the DSM can be conceptualized as a “discursive tool” that draws on broader medical and cultural discourses of normalcy and deviance (Katchergin, 2016, p. 197). Here we can see how ‘learning disabilities’ transcend isolated medical categories; their very construction rests on broader social and cultural discourses surrounding norms and behaviours. Thus, referring back to Foucault’s notion of biopower, individuals are transformed into learning disabled subjects based on culturally accepted norms. Such a transformation entails disciplinary practices, as learning-disabled subjects are ultimately rendered ‘docile’ by broader discourses exercised through biopower.

Educational scholar Christine Sleeter (2010; 1986) also showcases the role of social and political institutions in shaping how we understand learning disabilities but pays particular attention to how race and social class informed the construction of learning

disabilities in the United States post World War II. For Sleeter, the category of learning disabilities emerged in response to educational desegregation and provided an avenue for white middle-class parents to distinguish the behaviors of their children from behaviors of “emotionally disturbed children”, who disproportionately came from low-income, racialized neighborhoods (Sleeter, 2010, p. 222). The category of learning disability, then, provided a certain level of protection for white middle-class children throughout their educational trajectories, as it suggested a potential “cure”, as well as a medical explanation and legitimization for their behaviors (ibid, p. 210). The relationship between social class and learning disabilities has been taken up elsewhere, particularly in a Canadian context, where it is seen to affect the ways in which learning-disabled students advocate for, and access, accommodations (Waterfield & Whelan, 2017). Thus, when considering the evolution of the category learning disability, one must pay attention to the ways in which social class informs its emergence and the ways in which people can act in relation to the category.

2.3.3 The Role of Parents in Shaping Understandings of Learning Disabilities

While discourses and social structures have certainly informed and influenced how the category of learning disability has been constructed, key stakeholders and actors have been behind such discourses and social structures and have advocated and lobbied for certain understandings of learning disabilities for various purposes and needs. There are arguably many stakeholders involved in the construction of learning disabilities, but I will outline those stakeholders most relevant to my research, namely parents. While

educators and psychologists have certainly been involved in the construction and evolution of the label, the majority of literature surrounding their involvement focuses specifically on how they have responded to certain shifts in the conceptualization of learning disability. So, while they certainly have a relationship to the category of learning disability, it appears that they have been less involved in influencing and advocating for a certain conceptualization of learning disabilities. Rather, educators and psychologists have responded to shifts in how learning disabilities are understood, which, as indicated below, have been incredibly influenced by parents of learning-disabled children.

Scholars have explored the role of parents in influencing the category's trajectory, as parents have a history of pressuring the government to respond to their needs and the needs of their disabled children (Wehmeyer, 2013; Pletsch, 1997; Panitch, 2008).

Analyzing the "parent movement" that took place in the United States beginning in the 1950s, authors Wehmeyer and Schalock (2013) discuss the political challenges that informed how and why parents organized together to advocate for the rights of their learning-disabled children. The authors demonstrate how the scientific progress accomplished in the 1990s informed the ways in which parents lobbied for their children; they pushed for more medical research on learning disabilities, as well as lobbied for the rights of their children and special education programs. Such steps for lobbying resulted in the United States government further deinstitutionalizing the previous response to 'treating' learning disabled individuals, and in place, implementing other social supports and structures for learning disabled individuals (Eyal et al., 2010).

Similar parental advocacy and lobbying has also taken place within a Canadian context, particularly in relation to raising awareness surrounding learning disabilities, securing disability as a protected category in the Charter of Human Rights and Freedoms, and implementing educational and social supports for both learning disabled individuals and parents of learning-disabled children (Pletsch, 1997; Panitch, 2008). Looking at the history of parental groups in Ontario specifically, Pletsch (1997) examines the role of parents in creating special education programs within Ontario, and how, given the federal government's absence in learning disability issues, parents paved the way for establishing laws and protections for their children and other learning-disabled individuals. Panitch (2008) further examines how parents, specifically mothers, became involved in the disability movement in Canada, calling mothers of disabled children "accidental activists" (Panitch, 2008). Both Pletsch and Panitch demonstrate the effect of parental advocacy groups on the Canadian disability movement more generally, as such a movement resulted in the creation of disability advocacy organizations (For example, The Canadian Association for Retarded Children established in 1958, as well as the Learning Disability Association of Canada established in 1963). Such organizations have played key roles in advocating for learning disabled individuals and disabled individuals more broadly.

2.3.4 Moving Forward: The Current Research Project

There is a growing amount of literature that demonstrates the various ways in which the category learning disability has become socially constructed and how various stakeholders have been involved with its construction. Previous research has also

employed a Foucauldian framework by analyzing the ways that notions of disability and learning disabilities have become infused with power by governing the lives of disabled individuals in particular ways. Through Foucault's perspectives of discourse, biopower and governmentality, scholars have demonstrated how such concepts are useful in capturing the ways that disabled individuals are limited and constrained in navigating the social world. While Foucauldians have certainly revealed how discourses around disability structure and inform the lives of disabled individuals, the nature of these discourse within Canada has yet to be explored. As we can see, dominant discourses permeate our lives on various levels, influencing the way we think, act and perceive ourselves, in relation to our social environments. Thus, this thesis aims to contribute to the area of critical disability studies by documenting dominant discourses of learning disabilities within a contemporary Canadian context, as well as highlighting the ways that individuals participate in the reproduction of such discourses. In doing so, this research project addresses the following questions: What is the dominant discourse constructing learning disabilities within contemporary Canadian society? Who are the dominant individuals involved with constructing the category learning disability? How have dominant constructions of learning disabilities informed dominant approaches to learning disabilities?

Chapter 3

3 Methodology

In this chapter, I outline and describe the methodology that I used for this project. In section one, I begin with discussing my data collection process, why I choose media as a site for my analyses and then provide an overview of my sample. Section two outlines my sample and explores my data analysis process, specifically how I organized and coded my data. In section three, I discuss some considerations when engaging in a content analysis of newspaper articles. Finally, section four explores the limitations of my project's methodology.

3.1 Data Collection

This study is exploratory in nature and aimed at examining the way that the category learning disability is dominantly constructed, represented and framed in contemporary Canadian society and how such a framing is reproduced by individuals and works to uphold broader neoliberal economic and social structures. As such, I engaged in a qualitative content analysis of two hundred newspaper articles published between 1980 and 2018. In the following paragraphs, I discuss the ways that I collected my data in more detail.

To answer my research questions, I employed a qualitative content analysis on two hundred newspaper articles from the Toronto Star and the Globe and Mail. A qualitative method enabled me to explore and examine the nuances, complexities and meanings

found within the texts that framed the notion of learning disability (Maxwell, 2005, p. 22). As opposed to identifying broader patterns and trends in search of a verifiable hypothesis, the qualitative approach that I engaged in sought to explore the depth and complexity of how things are constructed and represented within the media and how such a framing is embodied by individual actors, reproducing broader relations of power.

As my research questions are interested in the way that discourse constructs learning disabilities, I turned to the media as a site to explore the ways in which discourse around the category learning disabilities has shaped dominant understandings and approaches to learning disabilities within Canada. As a platform, the media circulates and reproduces those dominant discourses that govern and construct individuals' day-to-day lives. Such discourses circulate regimes of normalization that structure and constrain the actions, behaviours, attitudes, dispositions and thoughts on a large scale. In doing so, the media enacts power as it is a vessel through which dominant discourses circulate and infuse the lives of individuals by informing and altering their perceptions on certain discursive entities (Trescher, 2017). Further, the media provided a site to explore the dominant voices producing, reproducing or embodying dominant discourses of learning disabilities, and how such voices responsabilized others or reproduced broader relations of power.

I decided to analyze newspaper articles from both the Toronto Star and Globe and Mail as both are widely distributed and read within Canada and as such, were relatively accessible documents. Further, both newspapers document a variety of events, many of which take place in Ontario, and so were the most relevant newspapers for my project. Given the time constraints of this project, I chose to focus on the context of Ontario as a site to explore my research questions. Upon reading literature surrounding the history of

disability and learning disabilities in Canada, Ontario stood out as a province with a rich history of activity surrounding the institutionalization and deinstitutionalization of learning-disabled individuals (Pletsch, 1997; Panitch, 2008). Further, much of the material available already referenced or took place in an Ontario context, and so Ontario appeared to be a convenient site to focus on.

I decided to focus on the years between 1980 and 2018 as, beginning in the late 1970s and early 1980s, North America and Canada underwent a shift in policy approaches to learning disabilities, specifically around integrating learning disabled individuals into mainstream schooling and education (Katzman, 2016). Such a shift captured my interest and so I decided to follow how the category of learning disability was dominantly constructed after the 1980s when such shifts began to materialize. As well, I did analyze roughly fifty articles published in the late 1970s as discussion surrounding the shift from segregation to integration began in the mid-1970s. Further, I wanted some information around how learning disabilities were responded to prior to the shift towards integration, as an understanding of the previous context is important for understanding and analyzing the constructions of learning disability post 1980.

3.2 Sample and Analysis

Overall, my sample consisted of two hundred newspaper articles published between 1980 and 2018. One hundred articles were pulled from the Globe and Mail Historical Database on ProQuest, and the other one hundred were pulled from the historical archives of the Toronto Star's online database. In searching for the articles, I used the terms *learning disability*, *learning difficulties*, *mental retardation*, *problem children* and *slow learners*.

Such terms were informed by the literature and aimed to capture those discrepancies in the language around learning disabilities at various historical moments in time. Each newspaper article was vetted for non-learning disability related material and those which did not offer any relevant information were discarded. The types of newspaper articles were not specified in my searches, and I ended up with a sample of a variety of different types of news articles, either op-ed pieces or more traditional journalistic pieces. This variety of newspaper articles enabled me to identify those voices most dominant in embodying, producing, reproducing or resisting dominant discourses of learning disabilities. Overall, I analyzed two hundred articles that documented issues related to learning disabilities between the 1980s and 2018. Two hundred was selected as a number, as articles became increasingly harder to track down and certain themes started to crop up, implying that saturation was starting to occur. These articles in particular documented the educational cuts to special education that occurred in 1977 as a result of shifting attitudes towards integration, the concerns of parents towards mainstreaming learning-disabled students, and reasonings behind mainstreaming learning-disabled individuals.

Once collected, I organized and stored the newspaper articles in AtlasTI qualitative data analysis software in order to code them. My coding process was inductive and iterative in that I did not begin reading the articles with a theoretical or empirical foundation. Rather, inductive analysis allows the “theory to emerge from the data” instead of approaching the data with a structured methodology to test and analyze the data against (Strauss & Corbin, 1998, p. 12). Upon reading the first five articles, I established a set of preliminary codes. I then tweaked, adjusted and added to my original set of codes as I read more articles. Eventually, I established a master list of codes that appeared to capture the

themes related to my research questions, namely those themes that centered around the construction of the category learning disability, the dominant voices involved in the construction of the category, the influence of social and political factors on the construction of the category and the various subjectivities created throughout such constructions.

Some example codes that aimed to capture the ways that learning disabilities are constructed include: construction of learning disabilities; learning-disabled subject; priorities in dealing with learning disabilities; policy shifts; and differing conceptions of learning disabilities. Codes that aimed to capture the dominant voices present within the articles include: parent voice; teacher voice; role of the government; psychologist voice; doctor voice; expert knowledge; learning disabled voices; and education experts. I also kept in mind the intended audience of certain articles and coded for those as well by highlighting whether the article was offering supports to individuals, advice, information or aimed to caution certain individuals away from various treatment methods of learning disabilities. Of those codes that aimed to capture broader approaches to learning disabilities, the main ones included: integration; priorities in dealing with learning disabilities; alternative teaching methods; and responsibility. All the above codes aimed to group together relevant themes which directed me to my theoretical framing for further analysis.

Once I had a master code list, I began thinking about the themes in terms of a theoretical framework. Upon discussing some of my preliminary findings with my supervisor, it became apparent that the works of Michel Foucault may be relevant for articulating and framing the angle of my project. I turned to his works and organized codes and sections

of newspaper articles around some of his key concepts that I found cropped up, namely biopower, disciplinary power, governmentality, neoliberalism and subjectivities. Such concepts aimed to capture the ways that constructions of learning disabilities upheld broader relations of power and how professional power operated in constructing and legitimizing such a category. Thus, I analyzed and explored the various discursive apparatuses that operated within the newspaper articles to construct the problem of learning disabilities.

In line with a Foucauldian analysis, this thesis does not conceptualize learning disabilities as biological entities that exist outside of the social, economic and political discourses that govern our everyday lives. Instead, this thesis conceptualizes learning disabilities as “discursively constituted objects” that have emerged within Canadian society as “particular types of problems in certain fields of knowledge”, namely those fields of psychology, medicine and education (Yates, 2005, p. 68). Thus, while individuals with learning disabilities may certainly identify as learning disabled, the concept of learning disability is only realized through particular forms of knowledge that construct the notion of ‘learning disability’ with reference to social and cultural norms. Such norms became evident upon reading and analyzing the newspaper articles and were thus coded accordingly.

3.3 Considerations when Analyzing Media Articles

There are many considerations to keep in mind when engaging in a qualitative content analysis of media material. A large consideration that I had to keep in mind when analyzing the newspaper articles was whether certain material was ‘true’ or verifiable, or

if such questions even mattered for the goal of my research project. Upon further reflection, I began to view the media less as a site that presents ‘truths’ about the world, and moreso as a site that circulates and upholds dominant discourses. With that in mind, this project operates with the understanding that, aside from the ‘truth’ or ‘verifiability’ of the material presented in the newspaper articles, the way things are discussed and constructed works to produce certain notions about our social world that uphold various systems of power. So, whether or not a sentiment is actually true or an event happened, the way things are discursively represented and constructed ultimately works to convey certain messages that uphold broader social and political relations of power.

As stated earlier, this project views the media as a discursive representation of broader discourses and ideologies that structure the way we think, act and behave in relation to certain ‘discursive objects’ – like learning disabilities. As an apparatus of power, the media operates with certain goals and intentions, whether implicitly or explicitly. In doing so, discursive objects are framed around certain discourses for the benefit of particular individuals, namely those who hold powerful positions in society. While policy and legal documents inevitably hold more power in how they influence and structure the actions of individuals and institutions, the media also works as a form of power in how it documents norms and circulates regimes of truth on a national level. While not externally enforcing rules of regimes of normalization, the media perpetuates, privileges, circulates and reproduces regimes of normalization in such a way that implicates the lives of all individuals, given how accessible them media is and how widespread it is. We are constantly bombarded with images, representations, text and messages that all embody dominant discourses, regimes of normalization and regimes of truth that inform us of

particular ways of being, behaving, looking and speaking. Thus, this project ultimately conceptualizes the media as an apparatus of power that is not neutral, but rather works to reproduce dominant discourses that implicate the material lives of individuals and work to uphold preestablished systems and relations of power.

3.4 Limitations

Though my research project can speak to the ways that learning disabilities are dominantly constructed within contemporary Canadian society, and how such constructions work to reproduce broader power relations, there are various limitations that need to be acknowledged. While I can certainly theorize and infer certain implications from my findings, my methodology cannot directly speak to the ways that dominant discourses of learning disabilities affect the material lives of learning-disabled individuals. Engaging in qualitative interviews with individuals who have been active in the field of learning disabilities may have helped illuminate some of the ways in which dominant discourses around learning disabilities implicate their material realities and how they position themselves in relation to such discourses. Further, I can only theorize about how discourses surrounding disability have become materialized and institutionalized in particular avenues but cannot say for certain how they have. Future research may want to analyze certain social institutions and material environments to explore how dominant discourses around learning disabilities operate throughout those structures and work to reproduce them.

My sample size is also another limitation to consider. While two hundred newspaper articles certainly establish themes relevant to my research questions, an analysis of a

greater number of articles may illuminate other useful information or nuances that speak to some of the objectives of my project. Further, my project is limited to those newspaper articles from the Toronto Star and Globe and Mail. Thus, while I make reference to the 'media', such referencing is limited to the sites of the Toronto Star and Globe and Mail. It may be interesting for a future research project to analyze multiple Canadian media platforms to explore how they circulate, produce or reproduce dominant discourses surrounding learning disabilities.

Further, for the scope of my research project, I limited my context to the province of Ontario. Thus, while newspapers like the Globe and Mail and Toronto Star are circulated across Canada, the claims being made in the articles I analyzed took place within an Ontario context. It may be worthwhile to analyze how learning disabilities are constructed across provinces to get a better sense of how learning disabilities are dominantly constructed throughout Canada and who the key stakeholders on in the various provinces of Canada. Such an analysis may illuminate differences or similarities in how learning disabilities are constructed and responded to, providing a richer analysis and critique on the field of learning disabilities within Canada more broadly.

3.5 Chapter Conclusion

In this chapter, I have presented an overview of the methodology that I engaged in for this research project, namely my data collection process, why I chose the media as a platform and my overall sample. I also discussed my data analysis process and how I came to employ a Foucauldian framework. Further, I explored considerations when

analyzing media material and the limitations of my project. In the next chapter, I will present and discuss my major research findings.

Chapter 4

4 Results

In this chapter, I present the major research findings of my project. Section one begins with documenting the dominant discourse that constructed learning disabilities throughout the newspaper articles and discusses how various experts, scientific research, statistics and disability organizations circulated, reproduced and upheld such a discourse. Section two explores how governmentality circulated throughout the articles and responsabilized parents, particularly mothers, in responding to the problem of learning disabilities. I then discuss the ways that parents themselves embodied their own governmentality by responsabilizing themselves and other parents to take certain actions in dealing with learning disabilities. Finally, section three explores the emphasis on integrating learning disabled individuals into mainstream society and the ways that individuals adopted or resisted such a trend.

4.1 Discourse

4.1.1 Documenting Discourse

More than half of the 200 articles analyzed constructed learning disabilities as individual, medical problems, usually resulting from brain malfunctions, neurological and genetic disorders, as well as problems during pregnancy. While some articles did mention social factors – particularly environmental pollutants or lack of familial structure – associated with the causes of learning disabilities, such factors were more so seen to affect one's

disability as opposed to directly cause one's disability. Further, learning disabilities were framed as being identifiable by observing one's educational performance in relation to expected performance norms created through biopower and instilled within educational settings. Thus, implied throughout the articles' various constructions of learning disabilities are norms, particularly those concerned with behaviors and expected ways of learning. Ultimately, the majority of articles relied on a medical model for constructing the meanings, causes and symptoms of learning disabilities – which ultimately worked to produce a learning-disabled subject and reproduce those norms that govern individuals.

For example, a 1982 article portrays learning disabilities as manifesting in the following ways: “[A learning disability] manifests itself in many ways, from the child who can't distinguish shapes, sizes or sequences of letters or numbers properly to one who has poor muscle control of hyperactivity and is unable to concentrate and complete tasks” (Toronto Star, June 29, 1982). In this case, learning disabilities are presented as having many symptoms, particularly those that manifest themselves within the body and result in one's inability to engage “properly” in such day-to-day processes. A 1990 article also references similar manifestations of learning disabilities:

The learning disabled often have impaired visual perception, poor listening skills, speech problems, motor problems, poor ability to organize, or conceptual difficulties leading to delinquency and social problems (Toronto Star, March 16, 1990).

Like the previous article mentioned, learning disabilities are seen to affect many bodily functions, whether visual perception or mobility, and can be identified with reference to what are considered ‘normal’ functions of the body – what is deemed optimal for ‘healthy’ functioning. Another article published in 1994 echoes these same constructions, defining a learning disability as “a neurological dysfunction which interferes with the brain’s capacity to process information in the conventional manner” (Globe & Mail, October 1, 1994). Again, learning disabilities are represented as biological malfunctions or impairments that negatively affect one’s ability to process and learn at the expected level. Learning disabilities are contingent on certain norms, whether educational, social or behavioral, that influence which behaviors or dispositions become categorized as learning-disabled.

The above quotations reflect many of the other articles’ definitions and constructions of learning disabilities in how they employ a medical model to construct learning disabilities as biological impairments that exist within the body and affect the body at different levels. Such constructions echo the Diagnostic and Statistical Manual of Mental Disorders, fifth edition’s (DSM V) definition of learning disabilities as, “neurodevelopmental disorder[s] with a biological origin that is the basis for abnormalities at a cognitive level that are associated with the behavioral signs of the disorder” (LDAC, March 2015, p. 6). This definition aligns with the Learning Disabilities Association of Canada’s most recent definition of learning disabilities as entities that “are due to genetic and/or neurobiological factors or injury that alters brain functioning in a manner, which affects one or more processes related to learning” (ibid). Again, both definitions are founded on a medical model for framing learning disabilities, as well as

established norms that enable the identification of a learning disability and produce learning-disabled subjects.

Across the media articles, learning disabilities are constructed around a medical model with reference to norms surrounding behaviors and learning. Such a model is a product of biopower, as it creates a regime of truth around learning disabilities in that it normalizes certain behaviors and capacities for learning while designating those other behaviors as abnormal or pathological. If individuals appear to exist outside such norms by exhibiting abnormal behaviors, weaker capacities to process information or poor motor control, they may be subjected to the category of learning disability. The problem of learning disabilities, then, is seen to reside within the individual, not the preestablished norms or structures of a society. Thus, the learning-disabled subject's body is one that requires state intervention in order to be 'corrected'. Such a discourse is further upheld and reinforced through professional power and scientific research that aim to combat and correct those behaviors categorized as learning disabled.

4.1.2 Reproducing Discourse: Experts and Scientific Research

Accompanying the medical discourse around learning disabilities is a consistent reference to those individuals considered professionals, or 'experts' in the field, whether doctors, psychologists, professors or organizational directors, and the scientific research supporting their understandings of learning disabilities. All articles that either introduced a definition of learning disabilities, discussed the development of remedial or rehabilitative programs, or highlighted debates in the field of learning disabilities, noted a particular expert and area of research to support the claims being made. Such experts

reproduced the dominant medicalized discourse around learning disabilities by enacting the ‘medical gaze’, which was demonstrated through the authority and legitimacy that each article granted such professionals; experts were viewed as the only means through which learning disabilities can become realized and treated. Through reproducing and embodying dominant, medicalized discourses around learning disabilities, experts and professionals upheld their positions of power by subjecting individuals to the various dividing and disciplinary practices that produce learning-disabled subjects in particular fields of possible action.

An article published in 1990 demonstrates the reliance on expert knowledge when defining learning disabilities: “Experts now agree that learning disabilities are malfunctions of the central nervous system that prevent the brain from processing information in the usual way...” (Toronto Star, March 16, 1990). While it is unclear who the ‘experts’ are in this case, we can see how such a framing works to support the dominant discourse of learning disabilities as medical impairments while simultaneously presenting learning disabilities as a field that requires professional expertise. A 1989 article also draws on expert knowledge to construct its definition of learning disabilities. Referring to a psychologist Dr. Alan Ross, learning disabilities are constructed as “problem[s] of learning” which “do not usually go away by themselves” and thus require expert intervention – the medical gaze – to treat and manage (Toronto Star, January 28, 1989). Again, experts are viewed as key stakeholders in defining, diagnosing and treating learning disabilities. Such a framing of experts works to uphold their professional power while at the same time reproduces the dominant, medicalized discourse around learning

disabilities, paving the way towards various disciplinary strategies and dividing practices that produce the learning-disabled subject.

Another form of expertise that articles drew on to construct understandings and causes of learning disabilities was the Learning Disabilities Association of Canada. Founded in 1963, the Learning Disabilities Association of Canada (LDAC) aims to provide Canadian citizens with the resources and opportunities that they need to “function as citizens” (LDAC, History, 2017). The LDAC does so “through public awareness about the nature and impact of learning disabilities, advocacy, research, health, education and collaborative efforts” (ibid). As an organization that utilized scientific research in its own understandings of learning disabilities, many articles drew on the expertise of the LDAC in their own framing of learning disabilities. In doing so, we can see how the LDAC operates as a platform through which dominant discourses of learning disabilities are circulated and reproduced.

For example, an article published in 1989 draws on the LDAC’s definition of a learning disability as a “short-circuit in input, processing, storage, retrieval or output of information”, that predominantly affects “memory, conceptualization, speech, spelling, writing, mathematics or spatial perception” (Toronto Star, February 7, 1989). In doing so, the article’s construction of learning disabilities employs the LDAC’s definition of learning disabilities – a definition that has been produced through scientific research and that upholds a dominant, medical conception of learning disabilities. Another article published in 1999 continues to use the LDAC’s definition of learning disabilities, though with slightly more sophisticated medical jargon. Learning disabilities are still constructed as medical impairments that affect various domains of the brain, but most commonly

present the following problems: “Dysgraphia (inability to write); cognitive disorganization (difficult in logical thought); catastrophic response (overreaction to stimuli); and memory problems” (Toronto Star, August 27, 1999). Several additional articles published at various times also employed the LDAC’s definition in their own construction of learning disabilities. In drawing on the LDAC’s constructions of learning disabilities, the articles present the LDAC as a credible source for informing the public about the causes and symptoms of learning disabilities. In fact, many articles that drew on the LDAC encouraged readers to contact the LDAC if they suspected a learning disability in a family member or themselves. Thus, the LDAC was drawn on as a credible source for constructing definitions and symptoms of learning disabilities and was presented as a means for individuals to acquire the necessary information for accessing professional help in treating learning disabilities.

4.1.3 Biopower: Statistics

Statistics were heavily drawn on in many of the articles’ constructions of learning disabilities, but more-so demonstrated the problem of learning disabilities and why they warrant attention and treatment. Thus, the use of statistics can be likened to a form of biopower, in that, through statistical documentation of learning disabilities, dominant norms of behavior and learning were reproduced to govern individuals accordingly. The notion of ‘risk’ was heavily intertwined throughout this process, as statistics also illustrated the social consequences of learning disabilities if left untreated; statistics aimed to alleviate future social problems by calling attention to potential risks. Thus, in presenting learning disabilities as a national problem that individuals should be

concerned with, statistics enacted power throughout the articles as they aimed to govern individuals by informing them of what behaviors to be wary of and the importance of identifying learning disabilities as a means of alleviating potential social problems.

For example, a 1987 article draws on statistics to convey the severity of learning disabilities, as they impair one's ability to "lead a normal life":

Approximately 3 to 15 percent – estimates vary depending on who you talk to – of Canadians have learning disabilities, a neurological problem that causes difficulty in processing information and can play havoc with everything from attention span, memory and judgment to reading, writing, and social skills (Toronto Star, May 2, 1987).

Here, we can see how phrases such as "play havoc" emphasize the severity of learning disabilities by demonstrating how they pose problems for individuals at different levels in their lives, all the while implying particular norms or ways of being that are not disrupted by learning disabilities. Another article published in 2009 claims that "it's estimated that roughly 10 percent of the population suffers from a learning disability" (Globe & Mail, February 24, 2009). Again, the use of statistics and language such as "suffering" constructs learning disabilities as biological, medical impairments that plague a select few of the population. An article published in 2012 references Statistics Canada to highlight the breadth of the problem: "According to Statistics Canada, more than 3 percent of Canadian children have a learning disability – the equivalent of one child in every school bus full of kids" (Globe & Mail, September 26, 2012). Using the analogy of a school bus works to break down the problem of learning disabilities and illustrate how

many individuals are affected by learning disabilities on a micro level. Such a picture conveys the message that learning disabilities can potentially affect any Canadian, though they are still considered abnormal. Thus, Canadian citizens are called upon to look inward on their own behaviors or the behaviors of those around them, as a way of potentially identifying abnormal behaviors that may be subjected to the category of learning disability.

Statistics were also employed within the newspaper articles to illustrate the social consequences of learning disabilities if left untreated which was further reinforced with the notion of risk. The use of risk throughout this process reinforced the governmentality implicit within it; if individuals do not govern themselves accordingly in relation to the category of learning disability, the potential for broader social consequences is heightened.

Criminal behavior and unemployment were two such consequences that were continually documented with statistics. For example, an article published in 1987 claims that “the percentage of learning disabilities among young offenders is much higher – estimates range from 30 to 75 percent” (Toronto Star, May 2, 1987). While the article then claims that reasons for these statistics are unknown, it continues to draw on research conducted by “experts” by claiming that “learning disabilities may have led many of these [offenders] to the wrong side of the law” (Toronto Star, May 2, 1987). Another article published in 1988 claims that “60 to 80 per cent of juvenile delinquents have undiagnosed learning disabilities” (Globe & Mail, October 6, 1988). A similar argument was posed by the director of the LDAC, Eva Nichols, in 1992, who stated that “learning disabled kids are likely to drop out, to fail or to get into trouble” (Toronto Star, January

11, 1992). An article published in 1993 stated that: “LD kids suffer higher than average rates of drop-out, suicide and imprisonment” (Toronto Star, March 11, 1993). In 2009, an article drew on scientific research conducted by the LDAC, claiming that “students with learning problems who become disillusioned are twice as likely to drop out and are at higher risk of substance abuse, mental health problems and poor employment prospects” (Toronto Star, March 5, 2009). As Linda Siegel, an education professor at the University of Toronto in 1989 reiterated in an article, “society bears the high cost of failing to identify and treat learning disabled people” (Toronto Star, June 30, 1989).

The above cases highlight how statistics operated as technology of biopower by framing learning disabilities as medical problems with very real, social consequences that threaten the overall population. Presenting statistics on how many Canadian citizens “suffer” from learning disabilities reinforces the notion of learning disabilities as pathological and simultaneously upholds those pre-established norms surrounding learning and behavior that are deemed most optimal for the maintenance and stability of the overall population. This was further conveyed through the notion of risk that was highlighted with regard to the social consequences of learning disabilities if gone untreated. Such a framing emphasizes the problem of learning disabilities and *why* individuals should treat learning disabilities – it responsabilizes all individuals, regardless of disability, to look within themselves and question their own capabilities in relation to others. Ultimately, statistics were exercised as a form of biopower to document the problem of learning disabilities, reinforce the notion of learning disabilities as pathological, and guide individuals to govern themselves accordingly in relation to others.

4.1.4 Scientific Research: Disciplinary Power and Dividing Practices

Biopower also operated through the emphasis on scientific research as a means for treating, correcting and improving upon learning-disabled subjects. Through disciplinary power and dividing practices, scientific research objectivized learning-disabled subjects by rendering them docile – bodies that require intervention, treatment and warrant correction to align with dominant regimes of normalization. Such approaches were advocated for by various stakeholders, with the two dominant ones being educational researchers, the LDAC and other privately-run disability programs. All three stakeholders supported many of the treatment approaches grounded in scientific research, and in doing so, subjected learning-disabled individuals to disciplinary power concerned with predicting, preventing and correcting learning disabilities.

For example, an article published in 1989 with the statement, “Researchers hope to find ways to predict which babies will end up with handicaps by school age”, discusses the research of a University of Toronto education professor, Linda Siegel (Toronto Star, June 30, 1989). Following a group of babies, Siegel hoped to predict whether they may become learning disabled in the future, her reason being that “it’s easier to treat learning disabilities before they become full-blown problems” (Toronto Star, June 30, 1989). Again, learning disabilities are framed as having more severe, future consequences if not treated in the early stages of one’s life. A similar sentiment is echoed over a decade later in an article published in 2010 that claims, “Canadian research into how a child’s brain processes movement gives insight into how to detect learning disabilities” (Globe &

Mail, April 22, 2010). This article discussed research being conducted by education professor, Brenda Stade, which – like Siegel’s research -- aimed to detect learning disabilities amongst children in the hopes to alleviate future consequences. As Stade claimed in the article, “early interventions can make a big difference with these youngsters”, particularly in their future employment prospects (Globe & Mail, April 22, 2010). Early intervention into the problem of learning disabilities operates as a form of discipline in that bodies are being subjected to scientific research that aims to predict which bodies may potentially become categorized as learning disabled, a process grounded in the regulation of bodies as a means to ameliorate differences.

Another article published in 2004 illustrates research that aimed to “avoid” the potential of learning disabilities by literally dividing the brain into particular “windows” that are seen as crucial for brain development (Globe & Mail, April 10, 2004). Through identifying such windows, researchers were able to pinpoint which areas of the brain required more stimulation in order to be enhanced and improved upon. This process could reduce the possibility of learning disabilities later on in an individual’s life. Again, we can see the prominent medical discourse of learning disabilities present in this treatment approach and how it informs the dividing practices that objectivize learning disabled subjects. The problem of learning disabilities resides in one’s brain, and through various disciplinary techniques that break down and organize parts of the brain, one’s brain can become improved upon, thus enabling one to function in accordance with regimes of normalization.

Scientific research also informed treatment approaches to learning disabilities that aimed to “cure” and “prevent” the problem of learning disabilities. Such research was heavily

taken up through the development of private programs for learning-disabled individuals that were geared towards ‘correcting’ the problem of learning disabilities within individuals and giving them the skills to integrate into societal norms. A 1990 article highlights one such program that occurred in Toronto and was developed by education experts Barbara Young and Joshua Cohen in the late 80s (Toronto Star, June 26, 1990). Researchers Young and Cohen developed a system that divided the brain into “108 areas”, with each area representing a different function of the brain. Breaking the brain into specific areas allowed Young and Cohen to create a program geared towards “exercising” the “specific areas of [one’s] brain” that they “identified as weak” and that were the primary causes of one’s learning disability (Toronto Star, June 26, 1990). The article proceeds to state that, “rather than the traditional approaches to learning disabilities, which teach people to compensate for the problems, Cohen says their method can actually correct the disabilities” (Toronto Star, June 26, 1990). Compensating for one’s “problems” and “correcting” one’s disability, reinforces the notion that there are certain social norms that individuals are expected to uphold at certain stages in their life. Such a treatment approach, then, operates as a form of discipline in that it aims to guide learning-disabled individuals back into those regimes of normalization to which they initially could not adhere.

Over a decade later, an article published in 2009 highlights a similar research project concerned with developing a medication to treat and cure learning disabilities.

Connecting a particular brain protein to “the power of learning”, Toronto scientists hypothesized that many learning-disabled individuals are deficient in such a protein, offering pathways forward for medical treatment and intervention (Globe & Mail,

February 24, 2009). The use of a medication to treat learning disabilities provides a ‘quick fix’ for enabling individuals to correct their behaviors and impairments that have flagged them as being disabled. The Learning Disabilities Association of Canada responded positively to such research, as it was “the first sign” that learning disabilities could be treated with medication, an easier alternative to implementing educational and societal supports for such individuals (Globe & Mail, February 24, 2009). Such an approach further reproduces the notion that learning disabilities are pathological entities that can be corrected with medication.

The majority of treatment approaches advocated for throughout many of the newspaper articles grounded themselves in scientific research and a medicalized discourse of learning disabilities. As such, they operated as forms of disciplinary strategies and dividing practices informed by biopower, in that they aimed to regulate and manage those bodies that are, or could potentially become, learning disabled. This was evident in how many of the treatment approaches broke down the brain into different parts as a way of targeting those parts to either “predict”, “correct”, “cure”, or “prevent” the problem of learning disabilities. Such individualized approaches, then, have implications for those individuals who are responsibilized to respond to the problem of learning disabilities.

4.2 Governmentality and Responsibilization

4.2.1 Parents

The majority of articles that discussed treatment approaches for learning disabled individuals targeted a particular group of individuals who were seen to be fundamentally

responsible for responding to, and treating, learning disabilities – parents. Such a responsibility acted as a form of governmentality, as many articles offered resources, advice on how to spot learning disabilities, as well as information on various Learning Disability Associations in an attempt to guide the actions of parents accordingly. Thus, such supports offered worked as forms of disciplinary strategies in that full responsibility was placed on parents to access those supports deemed credible, many of which employed a medicalized discourse for understanding learning disabilities and were run by those individuals considered professional experts in the field of learning disabilities. Ultimately, governmentality was enacted through the responsabilization of parents, as they were continuously subjected to disciplinary strategies that structured their fields of possible action by demonstrating the various ways they could ameliorate the differences of their children.

The targeting of parents occurred throughout the years, with articles cropping up throughout the 1980s to the 2000s. For example, an article published in 1981 demonstrates the role and responsibilities that parents have in relation to learning disabilities by stating in its title, “Parents have important role” (Globe & Mail, May 21, 1981). Another article published in 1999 also targets parents with the statement, “Parents must take initiative to get help” (Toronto Star, August 27, 1999). Similarly, an article published in 2009 urges parents to “be [their] child’s advocate” and pay attention to their child’s behaviors (Toronto Star, March 5, 2009). All three articles discuss the important role that parents play in their children’s lives, particularly with regard to knowing the signs of learning disabilities in order to take initiative to access supports. In doing so, the articles represent parents as being fundamentally implicated within the problem of

learning disabilities, whether or not their child is learning-disabled. Parents are seen to have a moral responsibility to learn and know the signs of learning disabilities in order to access supports for their children to ameliorate or prevent any potential differences that might be subjected to the category of learning disability. Such a form of discipline aims to guide the actions of parents accordingly and direct them to those resources and services deemed legitimate for treating learning disabilities, services run by those individuals considered professionals. In doing so, professional power is once again circulated throughout the articles and upheld through the many platforms and organizations directing parents towards professional services to treat and respond to the problem of learning disabilities.

Such responsibility was further reinforced through the recurring notion that early intervention is necessary to ensure the future successes of learning-disabled individuals, and as such, parents were predominantly represented as the ‘first responders’ to treating the problem. An article published in 1983 follows the story of a successful learning-disabled teacher, Mrs. Hatt, and documents how she achieved such successes. Much of her success was attributed to the role that her parents played early on in her life: “[Mrs. Hatt’s] intelligence and supportive, financially secure family gave her the chance to cope. Experts say these factors are crucial in circumventing disabilities” (Globe & Mail, March 24, 1983). As the article clearly states, a financially secure family who is supportive and active in their learning-disabled children’s’ lives “circumvents” the problem of learning disabilities, an example for other parents to follow by taking initiative in their own children’s’ lives. Similarly, an article published in 1999 presents a case of learning-disabled children who were successful in their educational endeavors by outlining the

actions that one parent, Ann Kastanas, took in intervening early on in her children's lives (Toronto Star, August 27, 1999). After presenting the case, the article states that "thanks to early detection, the Kastanas children are doing just fine", again emphasizing the importance of early intervention as a means to ensure the future successes of learning-disabled children (Toronto Star, August 27, 1999). Another article published in 2012 claims that "early intervention is absolutely necessary" and continues on to highlight the many ways in which parents can help their learning-disabled children succeed: "Parents can help children develop the characteristics shared by learning-disabled people who succeed in graduating from school, finding employment and maintain healthy relationships" (Globe & Mail, September 26, 2012). Not only is early intervention necessary for the well-being of learning-disabled children, but parents are also responsabilized to continue to advocate for and assist their learning-disabled children throughout the course of their lives. Such responsabilization can be seen as a form of governmentality as, through the various success stories presented, parents are urged to govern themselves and those around them, by being actively involved in their children's lives.

The responsabilization of parents that occurred throughout the articles operated as a disciplinary strategy particularly in relation to the emphasis on accessing a professional, psychoeducational assessment to diagnose and treat their potential learning-disabled children. Such governmentality structured the fields of possible action for parents by directing them to those professionals and dividing practices deemed legitimate for responding to learning disabilities. In doing so, such an act of accessing a professional, psychoeducational assessment ultimately evokes "an aspect of complicity" within the

dominant discourse of learning disabilities, as receiving a diagnosis reinforces the medical gaze and professional power implicit in the process (Hibbs & Pothier, 2006, p. 199 – 200). Such a responsibility fails to recognize the structural and systemic barriers of accessing a psychoeducational assessment, and in doing so, reproduces the power implicit in the dominant discourse of learning disabilities by structuring the fields of possible action for parents.

For example, an article published in 1999 asks parents if their children are able to “keep up” with the conventional school curriculum, and if not, to “consult a professional” to determine next steps (Toronto Star, August 27, 1999). This emphasis on consulting professionals and receiving a psychoeducational assessment was further echoed in an article published in 2009, stating that, if parents are worried about their child’s behavior, they should “get [their] child tested” to figure out appropriate measures for their child’s development (Toronto Star, March 5, 2009). Again, acquiring a psychoeducational assessment is presented as the only means through which a learning disability can be diagnosed, a step that is recommended for all parents to take if they suspect a learning disability in their children, regardless of socioeconomic or structural barriers involved with accessing such a diagnosis.

Such an argument was further reinforced in how many of the articles linked acquiring a psychoeducational assessment to the future successes of learning-disabled individuals. Receiving a psychoeducational assessment is seen to grant parents the necessary information about their child’s learning disability that will provide them with the skills needed for navigating the social world successfully. So, while accessing a psychoeducational assessment ensures appropriate treatment for their children, it also

ensures the development of their children as neoliberal citizens, able to thrive economically in their future endeavors. As an article published in 1991 stated, “early diagnosis means children will get the proper educational, psychological and social services”, enabling them to flourish in the later years of their lives (Toronto Star, April 11, 1991). Similarly, another article published in 2012 illustrates a case of a successful learning-disabled individual and attributes much of his successes to the role that his mother played in obtaining a psychoeducational assessment for him: “Throughout his [learning-disabled individual’s] schools years, his mom worked hard to connect him with supports services and urged him to accept his disorder, he adds. ‘If it weren’t for my mom, I probably wouldn’t have gotten where I am today’” (Globe & Mail, September 26, 2012). The individual presented within the article received a psychoeducation assessment in grade three, which the article relates to his current successes. Had he not had a mother who accessed a professional diagnosis, he may not have been able to excel as well. Such a story reinforces the responsibility that parents have in acquiring a psychoeducational assessment and works as a form of disciplinary power in that parents are called upon to access a professional diagnosis as a means of ensuring the future successes of their children and enabling their children to develop into successful, self-sufficient neoliberal citizens.

4.2.2 Responsibilization of Mothers

While parents were primarily targeted as a group, some articles specifically targeted and responsabilized mothers, further enacting the governmentality present throughout the articles while simultaneously reproducing dominant understandings of gender roles and

domestic labour within the household. Mothers in particular were framed as key stakeholders to identifying and potentially even preventing learning disabilities. Such an emphasis on the role of mothers was heavily informed by the dominant discourse constructing learning disabilities as biologically based as well as dominant understandings of gender roles. Assuming a biological, maternalistic relationship between mother and child, articles called upon mothers to adjust their behaviors when pregnant, as certain behaviors were seen to cause or liken the possibility of learning disabilities. Such targeting of mothers was further supported and advocated for by Learning Disabilities associations and scientific research.

For example, an article published in 1990 titled “Moms-to-be urged to cut risk of learning disabilities in kids” illustrates a public health campaign put forth by the Learning Disability Association of Ontario that aimed to spark awareness around how to prevent learning disabilities within children (Toronto Star, March 16, 1990). The primary audience for such a campaign, then, was expectant mothers. Through the distribution of booklets and pamphlets outlining the symptoms and risks of learning disabilities, pregnant women were advised to be mindful of engaging in the following throughout their pregnancy: Nutrition; Drugs; Lead exposure; Smoking; Alcohol; Environmental toxins (Toronto Star, March 16, 1990). The article proceeded to recommend various ways pregnant women can reduce stress, namely through engaging in exercise and watching their diets (Toronto Star, March 16, 1990). A similar warning and form of governmentality is reflected in an article published in 1998, claiming that, “Women who smoke during pregnancy can increase their baby’s risk of developing attention deficit disorder and learning difficulties...” (Globe & Mail, September 8, 1998). Again, learning

disabilities are framed as biological entities that can be treated and potentially prevented even before an individual is born. Such a medicalized framing also works to reinforce dominant understandings and expectations surrounding gender roles, in that mothers are framed as being inherently tied to the problem of learning disabilities and are thus expected to respond to the problem.

The above two examples echo the ways in which some of the newspaper articles responsabilized mothers in preventing learning disabilities, and in doing so, operated as forms of governmentality geared towards governing the actions and behaviors of mothers. Such a form of governmentality reproduced the dominant medicalized discourse of learning disabilities while also reproduced dominant notions of gender and gender roles. It was expected that mothers occupy maternalistic, nurturing roles in their children's lives, and as such, modify their own behaviors for the betterment of their children. Thus, we can see how both the dominant discourse surrounding learning disabilities and dominant conceptions of gender roles work together to reproduce one another by circulating through governmentality, specifically in regard to the responsabilization of mothers.

4.2.3 Embodying Governmentality through Subjectification and Self-Governance

While many of the articles responsabilized parents and mothers, parents also responsabilized themselves by participating in their own governmentality. Such responsabilization can be articulated as a form of subjectivation, where parents actively participated in their own governmentality by embodying their responsabilization and

calling on other parents to do the same. Such responsabilization was primarily exercised by various mothers who outlined their own experiences of fostering their children's skills and abilities, and in doing so, demonstrated the 'pay-off' of being an involved and active parent. Such an illustration acted as a form of governmentality in that mothers embodied the responsabilization placed upon them by playing an active role in their own self-governance as well as the governance of other parents. This was furthered echoed in relation to neoliberal discourses surrounding investment and productivity.

For example, a mother, Anne Kastanas, advises parents in an article published in 1999 to "call the teacher once a month for a progress report", as teaching one's "child is a business" (Toronto Star, August 27, 1999). Here, children are likened to products worth investing in, a remnant of neoliberal discourses centered around investment and productivity. Being an active parent in a child's education is one way of securing a successful future for them, enabling their transformation from learning-disabled subjects into 'able-disabled' neoliberal citizens. Kastanas goes on to recommend private tutoring as an alternative to special education classes, a means to further cultivate the skills and abilities of one's child, creating a child who is able to grow into a successful, self-sufficient individual.

Similar sentiments were echoed by other mothers, specifically in relation to the costs that one incurs when accessing professional diagnoses or private supports for their learning-disabled children. A mother, Lois Townsends, interviewed in an article published in 1983 discusses the sacrifices she had to make in order to afford to send her son to a specific school for learning-disabled children. As she could not access provincial government grants to assist her in paying tuition, she had to return to work in order to send her son to

the school. Regardless of the adversity that she and her family experienced, Townsends claims in the article that “the sacrifice [was] worth it”, demonstrating to other mothers the reward of investing in their children’s education and well-being (Toronto Star, March 8, 1983). Another article published in 2007 also emphasizes the reward of paying the costs to access private treatment. Following a family in their journey to diagnose their son Edward, the article outlines the many costs that they incurred through accessing a diagnosis and treatment for their son. However, “while private treatment ran into the thousands of dollars for the Rick family and took months of intensive work, Edward reports that he’s now reading and doing math at his Grade 6 level” (Globe & Mail, November 20, 2007). These two examples were similar to many of the other articles’ portrayals of involved and active parents in their learning-disabled children’s lives. Being an advocate for one’s child is represented as a responsibility parents must take on in order to ensure the success of their child, regardless of the sacrifice and costs associated with the process. Thus, such examples demonstrate the ways that parents participated in their own governmentality by attempting to structure the fields of possible action for other parents by directing them to seek appropriate treatment and services for their learning-disabled children, regardless of socioeconomic barriers.

While some parents did recognize the economic and social costs of accessing private supports and diagnoses for their children, the reward of incurring such costs was continuously reiterated, implying that parents have a responsibility for their learning-disabled children that often comes with sacrifice. An article published in 2007 that documents the success of a learning-disabled individual, Howard Eaton, demonstrates this by stating, “Mr. Eaton knows the bills can add up for families seeking help for their

children with learning disabilities” (Globe & Mail, May 9, 2007). However, regardless of one’s socioeconomic status, the article highlights Mr. Eaton’s message to parents, being, “once a parent finds help, they have to pay it” (Globe & Mail, May 9, 2007). So, while there are certainly economic and social costs associated with accessing private diagnoses and supports, parents are still expected and responsabilized to pay the costs. Thus, through the many cases and stories illustrated throughout the articles, parents subjected themselves to their own governmentality by responsabilizing other parents and reproducing the fields of possible action that create systemic barriers for accessing medicalized resources. Such fields of possible action further social class divisions, as those individuals who are able to participate in such fields have the economic and social supports to do so, whereas other individuals who lack such supports are continually disadvantaged.

4.3 From Segregation towards Integration

4.3.1 Producing ‘Able-Disabled’ Neoliberal Subjects

One of the most dominant forms of governmentality of the learning disabled that came out the 1980s and continued onwards into the 1990s to the 2000s, was the push towards the “integration” of such individuals into mainstream society. As of 1980, the Ontario government enacted legislation requiring all public-school boards to provide special education for learning disabled students (Katzman, 2016). One aspect of this bill was also the introduction of public, mandatory testing of students’ capabilities to discern which students fell where in terms of educational ability. Government funding that was once allocated towards private institutions for the learning disabled was reduced and instead

funneled into making special education programs available at a public level. While a reliance on expert knowledge and intervention is still privileged under such a paradigm, these new shifts towards integration make it so disabled individuals internalize medicalized discourses of disability and govern themselves accordingly from the inside out.

The reasoning behind the introduction of the Education Act varied, with many government and organizational officials claiming that the integration of learning-disabled individuals into mainstream society would ultimately result in more benefits as opposed to segregating such individuals. Pushed forth by politicians and experts, integration was viewed as cost-effective and beneficial for learning-disabled individuals (DeJong, 2000). Such benefits included molding learning-disabled individuals into self-sufficient individuals, capable of acquiring jobs and contributing to the economy. Thus, integration entailed that learning-disabled individuals become productive members of the economy, that they become 'able-disabled' neoliberal subjects by contributing to the economy and assimilating into the very structures that have oppressed them and rendered them learning-disabled in the first place.

We can conceptualize integration paradigms as processes that circulate neoliberal regimes of normalization, specifically by targeting individual bodies and responsabilizing them to internalize dominant, medicalized discourses to govern themselves accordingly. So, as opposed to segregation that sought to institutionalize disabled individuals and subject them to medical intervention, integration paradigms subject individual bodies to dominant discourses surrounding productivity and independence, resulting in individuals internalizing such discourses and acting in relation to them. The role of the expert, then,

is to facilitate the process of the disabled individual becoming self-sufficient and independent. Such a transformation of disabled individuals into independent consumers is advocated for by various disability support groups and organizations that sought to offer ‘self-help’ tips, peer-to-peer counselling and advocacy related workshops, placing the onus on the disabled individual to govern themselves and hold themselves accountable in becoming independent, socially and economically productive individuals (DeJong, 2000). While experts are still a part of the conversation, the reliance on them is lessened as, through internalizing neoliberal discourses of productivity and independence, disabled individuals govern themselves aside from expert intervention.

For the most part, learning disability associations and other private disability associations were presented as being in favour of this shift towards integration and many of them embodied the values of integration by operating as disciplinary strategies aimed at molding the learning-disabled subject into an active ‘able-disabled’ neoliberal subject, one who contributes to the economy and can operate independently of social structures by internalizing governmentality. Disability organizations viewed integration as a means to potentially reduce the stigma associated with learning disabilities by demonstrating what learning-disabled individuals “*can* do” for the economy (Globe & Mail, November 12, 1997). Thus, many articles discussed the various programs that aimed to enable the integration of learning-disabled individuals into mainstream society by teaching them the skills necessary to navigate, and contribute to, mainstream neoliberal society.

For example, an article published in 1989, titled “Dear employers, learning disabled can work for you”, discusses the attempts of the Newmarket-Aurora Learning Disabilities Association to foster integration of learning-disabled individuals, specifically in regard to

employment (Toronto Star, February 7, 1989). Through providing employers with information on learning disabilities, the association aimed to highlight the many ways learning-disabled individuals can be helped into employment: “The association hopes to encourage employers to try to understand the problems of learning disabilities, and to get those with disabilities to find ways of countering them” (Toronto Star, February 7, 1989). The value of hiring learning-disabled individuals is highlighted within the article, with The Learning Disabilities Association aiming to convince employers to hire learning-disabled individuals as a way of transforming them into ‘able-disabled’ neoliberal subjects.

A similar initiative was taken up by the Metropolitan Toronto Association for Community Living in 1997. Again, in response to the shift towards integrating learning-disabled individuals into mainstream society, the association operated as a form of disciplinary power by “helping people with learning disabilities to become more independent”, specifically by helping learning-disabled individuals acquire employment (Globe & Mail, November 12, 1997). In doing so, the association stressed the importance of concentrating on “what [learning-disabled individuals] *can* do, not on what they cannot do” as a way of encouraging learning-disabled individuals to enter the workforce, as well as encouraging employers to hire such individuals (Globe & Mail, November 12, 1997). Similar to the previous program developed in 1989, such a program worked towards integrating learning-disabled individuals into mainstream society by assisting them in finding employment and becoming ‘able-disabled’ subjects as opposed to those previous, traditional disabled subjects who are dependent and reliant on social services for subsistence.

Other programs that embodied similar disciplinary strategies also cropped up throughout articles published in the 1990s, with specific goals of teaching learning-disabled individuals the necessary skills and tools to integrate into, and navigate, mainstream society. One article titled “It’s never too late” published in 1991, discussed various strategies that learning-disabled adults could use to manage and cope with their disability in order to excel in their jobs and transition to post-secondary education (Toronto Star, April 11, 1991). Again, such a program was backed by the LDAC and provided information sessions run by those learning-disabled individuals who were considered “successful” in that they were able to “cope with their disabilities on the job” – such individuals were examples of ‘able-disabled’ subjects (Toronto Star, April 11, 1991). An article published in 2000 mentioned an Ontario camp designed for learning-disabled individuals with the following goal: “Our hope is that after a summer or two with us, [learning-disabled individuals] can integrate back into the mainstream” (Globe & Mail, January 22, 2000). Again, the emphasis of the program is to provide learning-disabled individuals with the skills and tools necessary to integrate into mainstream society, with the hopes that these individuals will be more successful in their future educational and career endeavors.

The transformation of learning-disabled subjects into ‘able-disabled’ subjects was further reinforced with the notion that having a learning disability does not render one incapable or stupid. In fact, many articles highlighted successful, famous individuals, like Albert Einstein, Tom Cruise and Cher, who apparently have all experienced a learning disability, to demonstrate how productive and successful learning-disabled individuals can actually be. For example, an article published in 1990 with the title “The Learning

Disabled Can be Winners” states: “What did Albert Einstein, Thomas Edison and Winston Churchill have in common? The acknowledged geniuses all suffered from a learning disability” (Toronto Star, June 12, 1990). It proceeds to state that those individuals are “shining examples of learning-disabled persons who have become winners”, reiterating the notion that having a learning disability does not mean that one cannot actively participate in mainstream, neoliberal society. Similarly, an article published in 1989 titled, “Students Overcome Learning Disabilities” presents a photo of Albert Einstein, with a caption below reading: “Good company: Genius Albert Einstein had a learning disability” (Toronto Star, December 11, 1989). Another article published in 1992 interviews a leading psychiatrist in the field of learning disabilities, Harold Levinson, who reiterates that “children with learning disabilities are often misunderstood and thought to be lazy, slow, clumsy or not too bright. They need to know they are capable people... Einstein was learning disabled, [Levinson] notes. So are Cher and Tom Cruise” (Toronto Star, March 13, 1992). Again, such a framing of those famous, learning-disabled individuals who have ‘made it’ within society paints the picture that all learning-disabled individuals can be productive, ‘able-disabled’ neoliberal subjects, contributing to the economy. So, as opposed to traditional framings of learning-disabled subjects as incapable and reliant on social structures for support, a new ‘able-disabled’ learning-disabled subject is produced and circulated through the media to reflect the growing trend towards integration.

The shift from segregation to integration operated as a form of governmentality in that learning-disabled individuals were targeted to assimilate and conform to societal structures and norms that have produced them as learning-disabled in the first place.

Various disability programs and organizations upheld and embodied this approach by operating as disciplinary strategies geared towards providing learning disabled individuals with the tools and skills to navigate ‘mainstream’ society successfully and transform into ‘able-disabled’ neoliberal subjects. Thus, integration enabled the transformation of learning-disabled subjects into ‘able-disabled’ neoliberal subjects by requiring them to conform and comply with the prescribed social norms dominant within society. This was further echoed in how many articles presented successful cases of those learning-disabled individuals who have ‘made it’ by actively participating within, and contributing to, neoliberal society. Such a framing shifts the responsibility onto the learning-disabled subject to learn how to navigate and integrate into mainstream society, a process that ultimately upholds and reproduces broader neoliberal economic and social structures.

4.3.2 Embodied Neoliberal Subjectivity: Subjectification

Such a discourse around integration was widely taken up and embodied through self-governance practices by learning disabled individuals themselves. This was demonstrated throughout many of the ‘success’ stories put forth throughout the articles that portrayed the ways in which some learning-disabled individuals have become ‘able-disabled’ subjects. Over thirty articles presented stories of successful learning-disabled individuals, and as such, outlined the strategies and methods that many of them engaged in to successfully integrate into various facets of neoliberal society, specifically educational and work environments. Notably, a higher number of articles outlining such success stories appeared in the late 1990s and 2000s as opposed to the 1980s. Throughout the

articles, notions of ‘persistence’, being ‘confident’, ‘knowing thyself’ and ‘planning’ accordingly, were all examples of strategies engaged in by successful ‘able-disabled’ individuals. Such strategies were commonly endorsed by learning-disabled individuals themselves and were geared towards enabling and empowering other learning-disabled individuals to successfully integrate into society and become productive, neoliberal subjects. Thus, by drawing on their own stories and experiences, learning-disabled individuals governed themselves and others by demonstrating the various ways that they integrated into mainstream society, and in doing so, produced fields of possible action for other learning-disabled individuals.

One common strategy that occurred throughout the newspaper articles was the importance of persistence, no matter the circumstances of one’s life. An article published in 1982 follows the story of a learning-disabled teacher, Mrs. Noyes, who overcame many obstacles in her educational and career trajectory. In doing so, the article highlights that “despite the difficulties”, Mrs. Noyes “knows she can succeed, but such confidence is the exception rather than the norm for many with learning disabilities” (Globe & Mail, May 27, 1982). Emphasizing the obstacles and difficulties that Mrs. Noyes was able to overcome in her educational trajectory conveys the possibility of success for other learning-disabled individuals, something that can be achieved by continuing to persist and integrate into neoliberal regimes of normalization.

Similarly, an article published in 1998 interviews another learning-disabled individual, Karen McMorland, who has accomplished many of her career goals. McMorland’s advice to other learning-disabled individuals is clearly stated in the article: “Hang in there. Don’t give up. Keep trying because you can do it” (Globe & Mail, November 9,

1998). Again, persistence is framed as a key characteristic to accomplishing and securing success as a learning-disabled individual. This same sentiment reemerges in an article published in 2012, stating that “successful individuals with learning disabilities not only refuse to give up but also know when to change gears when a strategy isn’t working” (Globe & Mail, September 26, 2012). The notion of persistence is directly linked to learning-disabled individuals’ abilities to succeed in various facets of their lives by becoming enterprise subjects. The most successful learning-disabled individuals are those who “refuse to give up”, who keep persisting in light of adversity and who are able to adapt their strategies in different situations to secure success (Globe & Mail, September 26, 2012). Such a message works to govern the behaviors of other learning-disabled subjects by reiterating the importance of conforming and integrating into mainstream society – the importance of becoming ‘able-disabled’ subjects.

A similar message is reiterated in an article published in 2007, claiming that “far from being marginalized, many people with disabilities have found ways to work around them and rise to leadership positions. One of their keys to success? Know thyself” (Globe & Mail, May 9, 2007). The article then proceeds to outline the various strategies that a learning-disabled individual, Howard Eaton, engaged in to become a successful director of a company. Eaton states clearly in the article that “studies have shown that succeeding with a learning disability correlates most strongly with self-awareness and a positive attitude – not with grades in school or even socioeconomic status” (Globe & Mail, May 9, 2007). Regardless of one’s socioeconomic status, self-awareness and a positive attitude were framed as being key to secure success, both of which Eaton engaged in to obtain his current position as director of his company. Self-awareness is again highlighted in an

article published in 2012 that follows the educational trajectory of a medical student, Anthony Vo, who describes the various methods and strategies he used to become a successful medical student. In doing so, the article states, “Successful individuals with learning disabilities...know when to change gears when a strategy isn’t working. They find ways to cope with stress, such as planning a head for tough situation...” (Globe & Mail, September 26, 2012). Vo discusses the importance of knowing oneself in order to effectively plan and advocate for oneself through school, as such strategies enabled his own educational successes. By subjecting themselves to neoliberal regimes of governmentality, both Howard Eaton and Anthony Vo are presented as successful neoliberal subjects who have overcome their disabilities by transforming themselves into ‘able-disabled’ subjects who are economically independent. Such a message works as a form of governmentality by producing those fields of possible action for other learning-disabled individuals to participate in becoming ‘able-disabled’ neoliberal subjects, regardless of adversity.

The importance of knowing one’s strengths and weaknesses was further reinforced in relation to the role that advocacy played in successful learning-disabled individuals’ stories. Advocacy was framed as being an integral characteristic of successful learning-disabled individuals and a responsibility for all learning-disabled individuals to engage in in order to become successful, ‘able-disabled’ neoliberal subjects. This was highlighted through many of the personal narratives of learning-disabled individuals and the advice that they gave to other learning-disabled individuals.

An article published in 1998 demonstrates the benefits of advocacy with reference to a project developed by learning-disabled individuals for learning-disabled students entering

post-secondary. The project's goal is to help learning-disabled individuals "understand [their] disability, identify the conditions under which [they] excel academically and communicate them to [their] instructors" (Globe & Mail, November 9, 1998). Thus, being in tune with one's self is seen as an important step for advocacy as one is able to effectively identify areas for improvement and communicate that to instructors, a process seen to benefit students academically. Another learning-disabled individual, Jacqueline Mercier, reiterates this message by providing the following advice to learning-disabled students: "You're a number when you start and you're a number until you make yourself known...that was when I started to have to take responsibility for myself...you have to learn to speak up for yourself" (Globe & Mail, November 9, 1998). Drawing on her own personal experiences, Mercier highlights the responsibility that she had to take to ensure her own educational successes which was carried out in her of self-governance. In doing so, the article conveys the message that if learning-disabled individuals take responsibility for themselves by advocating for their needs and governing themselves accordingly, they can be as successful as Jacqueline Mercier by becoming 'able-disabled' subjects in charge of their educational and career trajectories.

The emphasis on persistence, knowing one's self, and advocacy, were all framed as characteristics of successful learning-disabled individuals and worked as forms of governmentality by reproducing discourses around integration and molding learning-disabled individuals into 'able-disabled' neoliberal subjects. Through such embodiment, learning-disabled individuals responsabilized themselves and produced those fields of possible action for others that promote individualized strategies for successful integration, strategies that assume all individuals operate on the same level and carry

similar capacities for transformation. Thus, such approaches masked the societal structures that produce disabling environments and, in doing so, called upon individuals to govern and alter their behavior in order to comply with such structures.

4.3.3 Resistance towards Integration

While many learning disability associations of Canada and government officials were presented as being in favour of integration, parents were framed as being resistant to such policy shifts. In every article that discussed the policy shifts and trends towards integration, parental concern was highlighted. The majority of parents interviewed within the articles expressed concern in regards to their children being neglected as a result of mainstreaming learning-disabled students. While integration attempts were marketed under the guise of reducing stigma around learning disabilities and ‘normalizing’ learning disabilities, parents argued that segregation was actually a better treatment approach to learning disabilities, as it ensured an adequate level of attention and supervision from teachers on their students. In doing so, parents enacted resistance to such a form of governmentality, while still upholding dominant, medicalized discourses of disability. So, while such resistance identifies the problems associated with transforming learning-disabled subjects into ‘able-disabled’ subjects, it still reproduces regimes of normalization by recognizing that learning-disabled individuals do not fit into such regimes and require a unique level of attention and education to thrive in various areas of society.

An article published in 1985 discusses the concerns and anticipation that some parents had towards the new approach of integration: “Parents and lobby groups for learning-

disabled children... have argued that public school boards are not adequately prepared for learning-disabled students” (Globe & Mail, August 22, 1985). Prior to the plan being implemented, many parents resisted it with the belief that public schools and teachers were not adequately equipped or trained to handle the various needs of learning-disabled students. Another article published in 1991 continues to highlight this same parental concern and resistance towards integration, stating that: “Now, seven years later, as more boards move to a policy of ‘mainstreaming’, which integrates learning disabled children into regular classrooms, many parents say their children’s needs aren’t being met, unless they send them to private schools at their own expense” (Toronto Star, April 11, 1991). Similar anger and concern appear over a decade later in an article published in 2000. In response to the Toronto District School Board’s announcement of closing schools for learning-disabled students due to a lack of students, parents were outraged at the thought of their children being funneled into the mainstream, public school system. Similar to the concerns voiced in the 1980s and 1990s, one parent stated that, “kids like ours will be chopped liver in a mainstream school. If the board moves them into a regular school, they’ll lose out...” (Toronto Star, February 10, 2000). Again, integration was viewed negatively by parents as it implied larger classrooms, less attention paid to learning-disabled students, and ill-equipped teachers in handling and meeting the needs of learning-disabled students.

For parents, integration was viewed negatively as they believed that the unique needs of their learning-disabled children would not be adequately addressed within the public-school system. Fears over their children being “left behind”, “slipping through the cracks”, “facing social isolation” were just some of the many others expressed by parents

throughout the articles. While many learning disability associations and government agencies argued in favour of integration as they saw it to be a process that could reduce stigma surrounding learning disabilities, parents argued against it; mainstreaming students with learning disabilities would only heighten the stigma around their differences, as they would not be able to receive adequate education, resulting in higher drop-out rates, low self-esteem and lower employment prospects. Thus, parents were represented as directly opposing the approach of integration, and in doing so, upheld the dominant discourse around learning disabilities as individual, medical problems that warranted professional, medical intervention, as opposed to public intervention.

The opinions from teachers and educators on shifts towards integration cropped up as well, with the majority of articles focusing on teacher resistance towards job cuts and cuts to educational funding that took place within Ontario after the 1980s. One article published in 1974, however, highlighted the views of one educator on the potential shifts towards integration. The individual interviewed called on the Ontario government to exercise “caution” in moving towards integration, as some learning-disabled individuals may ultimately be better off institutionalized due to the “hardships” they experience from society (Globe & Mail, October 24, 1974). Such an argument centered around the notion that learning-disabled students require unique levels of attention and care within educational settings.

For the most part, though, educators and teachers were represented in the articles as resistant to broader educational reforms that occurred with the rise of neoliberal governmentality beginning in the 1980s. Such reforms were viewed by teachers and educators as harmful for learning-disabled students in particular. For example, an article

published in 1995 highlights the Toronto Board of Education's decision to cut four hundred teaching assistant jobs within public schools. Education assistant, Megan Harris, responded to such cuts by claiming that, "students with learning disabilities and those who can't focus in class will slip through the cracks...these kids have difficulty in the classroom and they need someone to keep them on the task at hand" (Toronto Star, April 6, 1995). Similar concern is highlighted in another article published in 1999 titled "Special ed hurting, boards say" that discusses the lack of money allocated for special education programs in public schools (Toronto Star, May 21, 1999). A year later, these same cuts to special education programs are again highlighted, claiming that such cuts to funding ultimately work to "make the kids fit the funding formula rather than respond to their needs" (Toronto Star, February 10, 2000). Such a statement illustrates the importance of allocating money into special education programs in order to effectively handle and manage learning-disabled students.

Overall, the main argument put forth by those teachers that protested special education funding cuts, framed learning-disabled students as individuals requiring certain supports to thrive in an educational setting, as well as unique levels of attention from teachers to assist them throughout their educational endeavors. Teachers, then, viewed themselves as key responders in dealing with learning-disabled children, and were dominantly represented as protesting any policy changes that were seen to infringe on their abilities to adequately help their learning-disabled students. So, similar to the resistance that parents engaged in with regards to integration, teachers and educators reproduced dominant discourses of learning disabilities through their resistance to education cuts, as they argued that learning-disabled students do require unique levels of attention and care

within the classroom. While integration itself was not necessarily resisted and targeted by teachers, educators and teachers lobbied for more money to be funneled into special education programs as a way of effectively and adequately dealing with learning-disabled students.

4.3.4 Chapter Conclusion

The dominant discourse constructing learning disabilities throughout the newspaper articles was one that was grounded in a medical framework. Such a discourse was taken up and reproduced by individuals, namely those who were researchers, educators and individuals involved with Learning Disability Associations. Further, such a discourse was circulated through the use of statistics to highlight the severity of learning disabilities as a way to govern the behaviors of individuals towards regimes of normalization. Finally, through reproducing such a discourse, professional power was upheld, as individuals were guided towards accessing those professional services and resources deemed legitimate for treating and responding to learning disabilities.

Governmentality also circulated throughout the newspaper articles, particularly with regard to the responsabilization of parents and mothers. Again, the dominant discourse around learning disabilities was reproduced through such governmentality, and simultaneously worked to uphold dominant discourses of gender roles by emphasizing the role that mothers have in preventing learning disabilities. Parents and mothers also participated in their own governmentality by embodying their responsabilization and responsabilizing other parents to do the same. In doing so, parents reproduced those fields

of possible action that structure and constrain their actions in particular ways by directing them to access those services and individuals deemed legitimate and professional.

Further, the rise of integration as an approach for handling learning disabilities enabled a unique form of neoliberal governmentality that ultimately transformed learning-disabled subjects into 'able-disabled' neoliberal subjects. By subjecting learning-disabled individuals to neoliberal discourses surrounding productivity and independence, learning-disabled individuals internalized their own governmentality. Such an approach was met with some resistance by parents, whose concerns centered around their learning-disabled children not being able to receive adequate levels of attention or resources from teachers and their schools. This was further echoed in some of the articles that discussed the protests from teachers and educators towards special education cuts, as such cuts ultimately reduced those supports and resources available for learning-disabled students.

In the next chapter, I will discuss my findings in relation to the relevant literature and my theoretical framework. In doing so, I will pay particular attention to how discourse, biopower, disciplinary power and governmentality circulated throughout the newspaper articles to produce the problem of learning disability and how this was further reinforced through various individuals and actors. I will then discuss how such concepts work in tandem with neoliberalism to produce certain subjects, those subjects able to actively participate within neoliberal society. Drawing on professional and medical discourses, integration transformed the ways in which learning-disabled individuals are governed. From the previous methods of governmentality that took the form of institutionalizing learning-disabled individuals and subjecting them to medical interventions, integration has resulted in learning-disabled individuals governing themselves from the inside out

and actively participating in their own governmentality. Finally, I will end with discussing the implications of such discourses and governmentality on the lives of learning-disabled individuals, specifically those individuals who are unable to access certain supports and resources.

Chapter 5

5 Discussion

5.1 Discourse, Truth, and Power

A dominant, medicalized discourse of disability ultimately “casts human variation as deviance from the norm, as [a] pathological condition, as [a] deficit, and, significantly, as an individual burden and personal tragedy” (Linton, 1998, p. 11). Such a discourse was present throughout the majority of newspaper articles where learning disabilities were constructed as objects of bio-power, as pathological problems that warrant state rationalization, regulation and management for both individuals and the population (Tremain, 2006, p. 185). This was further reinforced throughout the newspaper articles in how those individuals considered experts and professionals in the field of learning disabilities were heavily drawn on and referenced when constructing learning disabilities as medical problems. In doing so, experts and professionals reproduced dominant, medicalized discourses of learning disabilities, as they were represented as the only means through which learning disabilities can be understood and dealt with. Such a

reliance on dominant, medicalized discourses for conceptualizing learning disabilities obscures the historical practices, contexts and discourses which produce the notion of learning disability in the first place. As Shelley Tremain (2006) notes, “the materiality of ‘the body’ cannot be dissociated from the historically contingent practices that bring it into being, that is, bring it into being as that sort of thing... Truth-discourses that purport to describe phenomena contribute to the construction of their objects” (Tremain, 2006, p. 187). Thus, we cannot fully understand the nature of learning disabilities without understanding how processes of medicalization, the rise of biomedicine after the eighteenth century and the emergence of neoliberalism as a social, cultural, political and economic ideology have resulted in the concept ‘learning disabilities’.

Through a consistent referencing to those individuals considered experts, we can see how learning disabilities as an entity are controlled and sanctioned by medical doctors and other experts. Such control can be likened to broader processes of medicalization, where behaviors become assigned or placed within “the jurisdiction of the medical profession” (Conrad, 1980, 195). Thus, experts and professionals can be likened to ‘gatekeepers’ within the field of learning disabilities, as one can only be helped or accommodated for with expert documentation and approval. This was demonstrated throughout the newspaper articles where experts were granted the authority and legitimacy to label behaviors as learning disabled, prescribe forms of treatment and direct individuals to access medical care. In doing so, regimes of ‘truth’ surrounding the nature of learning disabilities were further reproduced, as experts were presented as authorities on the matter, able to speak to the problem of learning disabilities. Such ‘truth’ statements surrounding the nature of learning disabilities dominantly drew from medicalized

knowledge and fields, obscuring the historical and social processes in which learning disabilities have come to be realized. In doing so, the power granted to the medical profession is reproduced and upheld as those regimes of normalization and ‘truths’ that inform the construction of learning disabilities require the medical profession for their maintenance and reproduction. Such a process further presents experts as the ‘gatekeepers’ to diagnosing, treating and controlling how learning-disabled individuals are seen and represented.

The deployment of statistics to document learning disabilities as a social problem further reproduced those norms of optimal health by portraying the ‘risks’ associated with not treating learning disabilities, namely those risks that implicate the overall population. As Foucault notes, biopower manages and governs individual bodies by subjecting them to techniques of “optimization”, “usefulness” and “efficiency”, while also focusing on the health of the “species body”, the overall population, as a way of enabling the continued, healthy progression of modern society (Foucault & Rabinow, 1984, p. 261 – 262). Thus, statistics operated as a technology of biopower by presenting learning disabilities as pathological problems that both affect the health and wellbeing of the learning-disabled subject, as well as affect the wellbeing of the overall population. This was further reiterated with notions of ‘risk’ surrounding the social costs of learning disabilities – the potential for criminal activity, unemployment and imprisonment. Thus, the notion of risk associated with learning disabilities worked to control, manage and govern the future by calling individuals to look within themselves and reflect on their own behaviors, as well as at the behaviors of those around them in order to take appropriate action (Waldschmidt, 2005, 197).

While the dominant, medicalized discourse of learning disabilities has had positive effects on the material lives of some learning-disabled individuals (i.e. the advancement of assistive technologies; the implementation of accommodation centers at universities; the legislation of disability under the Charter of Rights and Freedoms), it has also created disadvantages for some individuals by continuing to uphold those broader relations of power that produce the notion of learning disability and sanction the lives of learning disabled individuals. For the most part, articles constructed learning disabilities as one's inability to function within society and contribute to society as active member. Within contemporary neoliberal Canadian society, regimes of normalization are constructed around the market economy and notions of productivity (Katzman, 2016). Failure to participate in such regimes of normalization becomes labelled as deviance and potentially learning disabled. We must problematize those regimes of normalization that construct learning disabilities, as they operate and center around "the sphere[s] of economic processes, their development, and the forces working to sustain them" (Foucault & Rabinow, 1984, p. 263). Such spheres of economic productivity revolve around very specific forms of productivity, namely in relation to employment and the ability to work. Such an emphasis on being able to produce under such narrow conditions fails to account for the various ways that disabled individuals can be productive in other areas of society. The category learning disability, then, can be seen as an individual, discursive object produced through dominant medicalized discourses. In contemporary, Canadian society, such medicalized discourses are informed by broader neoliberal economic and social structures that require individuals to participate in society in specific ways. Failure to do so results in a pathologization of certain individuals by labelling them as deviant. Such a

labelling shifts the focus from those structures that arguably create difficulties and constraints for many individuals to the individual in question, locating the problem within the individual and responsabilizing the individual to take the initiative to access treatment and treat themselves. We must problematize those processes, those larger economic, social and cultural structures that may oppress and disadvantage individuals, that may result in ‘individual failures’ by structuring, constraining and limiting their fields of possible action.

5.2 Governmentality and Responsibilization

Biopower and regimes of normalization ultimately render certain objects and entities as governable as, by presenting certain entities as problems, individuals are responsabilized to manage and regulate them on their own. As opposed to restructuring our education system or other social structures, the portrayal of learning disabilities as pathological problematizes the individual, enabling a specific form of governmentality that responsabilizes all individuals to respond to the issue. Such governmentality was circulated throughout the majority of newspaper articles, particularly with how parents were targeted to respond to the problem of learning disabilities. Parents were continually responsabilized as they were framed as key stakeholders in managing and even preventing the problem of learning disabilities. Titles such as “parents have important role”, “parents must take initiative to get help” and the continued emphasis on the role that parents play in advocating for their learning-disabled children, all responsabilized and governed parents by calling upon them to look at their children’s behaviors in relation to regimes of normalization to discern the appropriate steps to take to ameliorate

their children's differences. Learning-disabled individuals were also responsabilized to manage the problem of learning disabilities, specifically in relation to assimilating into neoliberal society.

An important element of governmentality is the way in which it produces those fields of possible action for individuals to operate within and navigate through (Tremain, 2006, p. 187). In regards to the field of learning disabilities, those fields of possible action produced through governmentality are fields that center around a dominant, medicalized discourse of learning disabilities that privilege experts and those dividing practices deemed necessary for the identification and treatment of learning disabilities. This was reinforced throughout the articles in how parents were directed to seek appropriate treatment for learning disabilities, treatment conducted and carried out by medical professionals. Such an emphasis on accessing professional intervention and psychological testing circulated disciplinary power as, participating in such processes entails one compliance and conformity to dominant, medicalized discourses of learning disabilities that produce and sanction learning-disabled subjects (Hibbs & Pothier, 2006). Thus, the newspaper articles operated as apparatuses of governmentality and disciplinary power in how they responsabilized parents in specific ways to respond to, and combat, the problem of learning disabilities within those fields of possible action that privilege medical intervention and the medical gaze.

Melanie Panitch (2006) notes in her dissertation that references to "parents" involved in the field of disability "obscures the gendered nature of the role", specifically in relation to *who* is most involved within disability activism and the lives of disabled children (Panitch, 2006, p. 7). While parents were certainly responsabilized as a group throughout

the newspaper articles, mothers were predominantly referenced and responsabilized throughout the newspaper articles. Mothers were predominantly targeted to avoid, reduce and potentially even prevent, the problem of learning disabilities by managing and altering their behaviors during pregnancy. As Panitch found in her own study, mothers of disabled children engaged in activism out of a sense of “gendered obligation” and often acted because they had no choice as there were no appropriate supports in place (Panitch, 2006, p. 3). The results of this study demonstrate that the media also circulated such notions of “gendered obligations” by responsabilizing mothers and governing them accordingly, contributing to the notion that mothers have ‘no choice’ but to act and respond to the needs of their learning-disabled children. Thus, we can see how the media reflects and circulates those dominant discourse within society by responsabilizing and governing certain individuals, mothers, in relation to such discourses.

While the newspaper articles certainly responsabilized parents and mothers, the voices of parents and mothers were also dominant throughout the articles and they themselves reproduced such governmentality and responsabilization by calling on other parents to take initiative and directing them to those professionals and dividing practices deemed legitimate for treating learning disabilities. This was evident throughout the personal stories of parents’ experiences with learning-disabled children, advice offered from parents to other parents and those ‘successful’ strategies that some parents engaged in when dealing with their learning-disabled children. Thus, parents and mothers themselves operated as actors of governmentality in how they came to embody those medical discourses and practices by responsabilizing other parents to do the same.

The ways that parents and mothers participated in their own governmentality can be seen to further structure and reproduce those fields of possible action for parents, as they themselves drew on dominant, medicalized discourses of learning disabilities and upheld those professional practices that are granted cultural legitimacy for treating learning disabilities. In doing so, disciplinary power was circulated through the voices of parents and mothers throughout the articles, as their advice, stories and experiences revolved around dominant, medicalized discourses. This was evident in how parents called each other to access psychoeducational assessments to address the problem of learning disabilities. Accessing a psychoeducational assessment was conceptualized as the other means through which learning disabilities can be adequately addressed, treated and accommodated for. Through responsabilizing other parents to access medical treatment, we can see how disciplinary power is circulated through the voices of everyday individuals, regardless of expertise, as parents reproduced medicalized discourses of disability by responsabilizing each other. While expert knowledge was certainly drawn on and regarded as credible, the voices of parents responsabilizing each other were dominant throughout the articles, demonstrating the significance of disciplinary power in permeating the lives of everyday individuals and structuring their fields of possible action in relation to learning disabilities.

Such fields of possible action reproduced by parents and mothers' privilege medicalized discourses and the professional intervention and dividing practices that render bodies docile, entities that require improvement and treatment. Within such fields, one must take full responsibility to pay the costs associated with accessing professional treatment, comply with the medical gaze and subject themselves to dividing practices that aim to

improve upon the body and direct the body in prescribed, disciplinary ways that align with dominant discourses. Not every individual can do this, as the previous literature has documented. Social class is a large barrier for accessing professional testing, treatment for learning disabilities and knowing how to advocate for oneself accordingly to receive accommodations (Waterfield & Whelan, 2017; Hibbs & Pothier, 2006). The stories of those parents who had to make sacrifices in order to pay those costs further reproduces those fields of possible action that inevitably disadvantage and exclude individuals who are unable to participate within their confines. Thus, we must question who is able to participate and benefit from such fields, and as Christine Sleeter (2010) notes, we must question how the category learning disability has become infused with white, middle class values as, those individuals able to receive diagnoses ultimately come from privileged backgrounds with the means to access such resources. So, the category 'learning disability' ultimately affords certain privileges to already affluent individuals, while disadvantaging and excluding those individuals already marginalized by factors like social class. Such a field that privileges and disadvantages individuals was further reproduced and structured through the ways that parents and mothers embodied governmentality and responsabilized each other in particular ways.

5.3 From Segregation to Integration: Producing 'Able-Disabled' Neoliberal Subjects

A book published by the Organization for Economic Co-Operation and Development (OECD) as well as the Centre for Educational Research and Innovation analyzes the shift from segregation towards integration within eight countries, of which Canada is one. As

stated in the objective of the study, “integration follows from the acceptance of the individual’s rights to optimal personal development and for the opportunity to become an accepted and contributing member of society” (OECD, 1999, p. 20). It proceeds to reiterate that many countries’ current education systems function in ways that leave “a significant proportion of children and young people unable to obtain access to their rights and to achieve the capacity to make their contribution to society” (OECD, 1999, p. 20). Thus, integrating and including disabled and learning-disabled individuals into mainstream education systems and society ultimately enables their access to becoming productive, contributing members of society.

The shift towards integration was greatly reflected throughout the newspaper articles in how they emphasized the importance of integrating and including learning disabled individuals within mainstream parts of Canadian society. Such a framing ultimately transformed learning disabled individuals from those subjects who are dependent on social structures, to ‘able-disabled’ subjects who can operate independently as consumers and producers for society (Tichkosky, 2003; Katzman, 2016). We can see how this transformation echoes neoliberal ideologies of self-management and self-governance, as those ‘successful’ learning disabled subjects are those individuals who “align with the requirements of neoliberal citizenship” by being active consumers and producers within society (Katzman, 2016, p. 319). While medical discourses are still privileged under such paradigms, reliance on experts is lessened, as it is the expectation that learning-disabled individuals will take responsibility to learn how to integrate and participate fully in society. Thus, through emphasizing integrating learning-disabled individuals into mainstream society, the newspaper articles contributed to broader norms of neoliberal

governmentality by providing advice, resources and strategies for individuals to engage in as a way of effectively participating as ‘able-disabled’, neoliberal citizens.

Integration was further echoed and reproduced by learning disability associations and organizations, specifically the LDAC. The majority of articles that discussed integration referenced the LDAC and their respective programs aimed at enabling learning-disabled individuals the skills and assets required to be full, active citizens. Programs geared towards finding employment for learning disabled individuals, offering advice and skills on how to manage one’s learning disability, and how to counter one’s disability, all reinforced notions of integration by aiming to transform learning-disabled subjects into ‘able-disabled’ subjects. This is not surprising as, throughout the 1960s, deinstitutionalization took form within North America and was accompanied by a growing Independent Living Movement geared towards providing advice, peer-to-peer counselling and advocacy skills to disabled individuals to aid them in effectively integrating and becoming self-sufficient individuals (DeJong, 2000). Such strategies and programs operated as forms of disciplinary power in how they sought to guide the actions of learning-disabled individuals accordingly in relation to dominant regimes of normalization, those regimes centered around productivity, consumerism and individualism under neoliberal social and economic structures (Katzman, 2016).

Further, the ways in which those learning-disabled individuals who have been ‘successful’ in their careers or educational trajectories were presented in the articles also reproduced neoliberal governmentality by conveying the message that with hard work and dedication, learning-disabled individuals can ‘overcome’ their disabilities. The dominant learning-disabled voices present throughout the articles were those voices of

learning-disabled individuals who have successfully transformed themselves into ‘able-disabled’ subjects by participating in neoliberal society through managing their disability and becoming self-sufficient individuals. Thus, those learning-disabled individuals engaged in processes of subjectivation, where they actively embodied and drew on those dominant, neoliberal and medicalized discourses to become successful learning-disabled subjects (Foucault & Rabinow, 1984, p. 11). This was further reproduced in how learning-disabled individuals emphasized the importance of managing, overcoming and combating one’s learning disability in order to participate fully within society. Such overcoming narratives ultimately produce the notion that, if disabled individuals can participate and be successful in society, so can non-disabled individuals. Thus, the representation of successful, ‘able-disabled’ learning-disabled subjects operate as examples for all citizens to follow in becoming economically successful and self-sufficient.

Such a representation of learning-disabled individuals and their embodiment of dominant discourses also aligns with the notion of the “disabled hero”, those disabled individuals who are able to “overcome” their disabilities by performing certain feats that are difficult even for non-disabled individuals (Wendell, 2006, p. 250). While the concept of the disabled hero has been applied to those individuals with physical disabilities who are capable of performing extreme activities, we can see how it applies to those ‘successful’ learning-disabled individuals presented in the articles, as many of them were entrepreneurs in charge of their own companies or those individuals who occupied high status positions within society, two things that do not befall the average person.

Referencing celebrities such as Albert Einstein, Tom Cruise and Cher, all contributed to

the notion that successful learning-disabled individuals can overcome their disabilities. Further, important to the notion of the disabled hero is the reality that many disabled hero's have the "social, economic and physical resources" to engage in such feats (ibid). Those learning-disabled individuals presented throughout the articles similarly had access to social and economic resources that greatly ensured and enabled their success. Such resources came in the form of having a stable family, able to advocate for their learning-disabled child, as well as the ability to access a psychoeducational assessment and private tutoring. Thus, those successful learning-disabled individuals presented throughout the articles were those individuals who had access to social and economic resources that enabled their transformation from learning-disabled subjects into 'able-disabled' subjects, or 'disabled hero's', able to integrate successfully and thrive in neoliberal society.

While integration was dominantly presented as a successful shift, in that it aims to mold learning-disabled individuals into independent, self-sufficient individuals, some of the newspaper articles also highlighted resistance towards integration, specifically from parents and teachers. Such a resistance stemmed from notions that learning-disabled individuals would not receive the required amount of support or attention from teachers if mainstreamed within the education system. Teachers similarly expressed such concerns, as they worried that they would not be equipped to effectively manage learning-disabled students within regular classrooms. Resistance towards integration also cropped up in how many articles documented teacher protests towards financial cuts to education that took place in the 1990s.

Though parents and teachers in some ways resisted neoliberal governmentality of integration, they also continued to uphold broader power relations, specifically in how

they employed a medicalized discourse of learning disabilities to argue against integration. This was demonstrated throughout the articles in how concerns surrounding integration centered around the notion that learning-disabled individuals have unique needs that require unique levels of attention and discipline from educators. So, in drawing on the medicalized discourse of learning disabilities as biological impairments that warrant specific types of intervention, parents and teachers lobbied against integration while still upholding broader discourses of learning disabilities.

As Panitch's study (2006) demonstrates, parents and mothers in particular have become "accidental activists" in lobbying for or against broader policy shifts, specifically with trying to receive adequate care for their learning-disabled children (Panitch, 2006). My research demonstrates that those parents and mothers reflected in the newspaper articles were also actively engaged in the field of learning disabilities by resisting policy shifts and lobbying for alternatives, and in doing so, reproduced dominant, medicalized discourses of disability. So, though they resisted dominant approaches to learning disabilities, they also embodied, upheld and reproduced dominant relations of power that subject and sanction learning-disabled subjects in the first place. Such a finding demonstrates the power and hegemonic nature of dominant discourses as, even in those spaces that seek to challenge dominant trends and approaches to disability, social actors continue to draw on dominant discourses of disability to lobby for social change. Thus, we can see the power in such a discourse as it delimits and structures opposition in regards to social change.

It is important to analyze and problematize dominant approaches to disability, namely the widespread movement towards integrating learning-disabled individuals into mainstream

facets of society. While such attempts are marketed and circulated under the guise of bettering learning-disabled individuals and enabling them access to certain areas of society, we must question what it means to be a ‘successful’, active member of society, as contemporary Canadian society is comprised of neoliberal economic and social structures.

Further, the ways in which discourse around integration was embodied and reproduced through the LDAC and learning-disabled individuals, ultimately casts learning disabilities, and disability more generally, as something that needs to be “overcome”, contributing to the “otherness” that is often associated with disability and further reinforcing regimes of normalization (Wendell, 2006, p. 251). As well, the emphasis on self-management and self-governance implies that all individuals can successfully overcome their learning disabilities and transform themselves into ‘able-disabled’ subjects, failing to recognize the structural barriers that may impede one’s ability to do so – barriers like social class and access to certain resources. By concealing those broader relations of power that sanction the fields of possible action for learning-disabled individuals, those ‘successful’ cases of learning-disabled subjects create the illusion that all learning-disabled subjects can overcome their disabilities and integrate into society. With that in mind, we can think of those cases reflected in the newspaper articles – those individuals who have the economic, social and cultural resources to effectively integrate and navigate neoliberal society. Thus, when considering how learning disabilities as a category has been taken up, reflected and circulated through apparatuses of the media, we must also consider the ways in which social class has enabled the production of those ‘successful’ learning-disabled subjects. Portrayals of ‘able-disabled’ learning disabled

subjects and ‘disabled heroes’ further upholds and reproduces those neoliberal economic and social structures that implicate the lives of all individuals, as such cases serve as examples for individuals to aspire to and strive for.

5.4 Conclusion: Contributions and Next Steps

Situated in the field of critical disability studies, this research project has employed a Foucauldian analysis to document how learning disabilities are dominantly constructed within contemporary Canadian society, the key stakeholders behind such constructions and the implications of such constructions on dominant approaches to learning disabilities. In doing so, I have illuminated how constructions of learning disabilities are informed by broader power relations, namely those within the fields of medicine, as well as neoliberal ideologies and social structures that emphasize self-sufficiency, productivity and individualism.

As a category, then, learning disabilities cannot be fully understood without an understanding of the historical, social and cultural context in which the category has come to be produced and realized. Through a documentation of dominant discourses constructing learning disabilities, we can problematize those norms that embody neoliberal ideologies by designating certain behaviors as learning disabled. Many individuals experience difficulty with participating in such norms infused with neoliberal ideologies, and so, with an understanding of how such norms evolve and change, we can see how disability is something that can be experienced by anyone at different points in time. Such a sanctioning of deviant behaviors, then, ultimately works to uphold society’s social, cultural and economic structures by reinforcing regimes of normalization and

problematizing any behavior that potentially threatens the maintenance of such norms. By requiring citizens to comply with narrow notions of productivity and subsistence, we fail to recognize the many other ways in which individuals can contribute to our society.

Future research could look at other apparatuses of the media, namely blogs, websites, television and social media platforms to further analyze how dominant discourses of learning disabilities are circulated. Looking at other platforms may help circumvent how the media might flatten the discourse around learning disabilities, as certain voices were privileged, specifically the voices of those learning-disabled individuals who were presented as 'hero narratives'. It may be worthwhile to seek out those voices of learning-disabled individuals who haven't 'made it' within society or been economically successful and self-sufficient. Further, as this research project is situated within the context of Ontario, future research could explore the field of learning disabilities across Canada and how various provinces have come to construct, understand and respond to, the problem of learning disabilities.

This research project has also highlighted the role of social actors in embodying and reproducing those dominant discourses of learning disabilities and how, in doing so, contribute to structuring the fields of possible action that inevitably disadvantage and exclude certain individuals. In line with a Foucauldian framework, this research project demonstrates the ways in which individuals subject themselves to their own governmentality by governing themselves from the inside out and responsabilizing others to do the same. Experts, parents and learning-disabled individuals predominantly took up a dominant, medicalized discourses of learning disabilities by directing individuals to access medical intervention and treatment and encouraging individuals to self-regulate

and manage their disabilities. Such individualized strategies for ‘success’ conceal those dominant relations of power that sanction and govern the lives of learning-disabled individuals by rendering their bodies docile, subjecting them to normalizing judgments in the form of the medical gaze, and requiring them to access professional intervention that is inaccessible to many individuals. With that in mind, we must question *who* is able to become learning-disabled, how the category protects and disadvantages individuals and the way in which the category upholds broader relations of power.

Further, through documenting dominant approaches to learning disabilities, namely the shift from segregation to integration, this research project contributes to the field of critical disability studies by demonstrating how medicalized discourses of disability compliment broader neoliberal discourses surrounding productivity, consumerism and independence, by locating one’s inability to participate in such a society as an individual problem. As we can see from this research project, many disability organizations, like the LDAC, adopted neoliberal discourses of governmentality into their own policies and mandates. Such notions of neoliberal governmentality were also demonstrated through the presentation of those ‘able-disabled’ subjects, or those ‘disabled hero’s’, and the strategies they engaged in to become self-sufficient, economically successful individuals, examples for all individuals to follow. As Tanya Titchkosky (2003) states, such portrayals of ‘able-disabled’ individuals present a “new morality tale” for all Canadians to follow in that, “if people with disabilities can”, anyone can govern their conduct accordingly to regimes of normalization implicated with neoliberal ideologies (Titchkosky, 2003, p. 538). Thus, this research project demonstrates that the neoliberal governmentality surrounding learning disabilities implicates all individuals, as it enforces

broader regimes of normalization surrounding what it means to be a successful, neoliberal citizen (Katzman, 2016, p. 326).

Most importantly, this research project contributes to the lack of literature surrounding the role of media in circulating, upholding and reproducing dominant discourses of disability and learning disabilities. In doing so, the media operates as a platform to circulate those regimes of normalization that we come to govern ourselves against. While not legally sanctioned or institutionally implemented, the media enacts a particular form of power, namely disciplinary power, by privileging those norms and discourses that govern individuals on a day to day basis and directing individuals towards certain foundations of knowledge. In doing so, the media guides the actions, behaviors, dispositions and attitudes of individuals by drawing on dominant discourses, professional expertise and individual stories that align with such discourses. Future research should look to other avenues of the media and further explore the way that power operates throughout the media and targets certain bodies.

Further, while some policies were referenced and illuminated throughout the media articles, this research project did not focus on policy specifically, as the goals of this research project were concerned with how the media circulates dominant discourses and whose voices were most dominant throughout. Future research should explore how dominant discourses of learning disabilities have shaped policy and practices, particularly within educational, psychological or employment contexts. As well, future research could continue documenting the ways that discourses surrounding disability have evolved, changed and shifted, and how such changes have been reflected within policies over time.

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