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Dispensing with labels: Enabling children and professionals to share a community of practice

Jane Tobbell & Rebecca Lawthom

Abstract

This paper investigates, through critical review, the label of emotional and behavioural difficulties and its utility in child and professional relationships. Considerable human energy and resources have been focused on ameliorating the individual and social implications of behaviour difficulties. However, the effort expended has often been levelled at individual (and policy) interventions, thereby neglecting the relationship element. We propose a reconceptualisation of the label (and thereby stigma) through envisioning learning as doing/participation. The communities of practice literature challenges the notion that learning is a time-limited activity, dependent on individual cognition. Instead learning is synonymous with being, and is a continuous and embedded process. Hence, learning and identity are inextricably linked and located in the various practice settings inhabited by children and professionals. The relationships emerge from and are shaped by the attendant practices which surround the term 'difficulties': children with 'difficulties' need 'special' attention to 'improve' their cognitions. In this paper we explore, using the community of practice literature, how learning and inclusion are processes of participation and suggest practices which would serve to liberate the child and the professional from the 'difficult' relationship/identity/label.

'Problematising' EBD as an individual problem

In reading the literature surrounding emotional and behavioural difficulties (EBD) one of the most startling factors is the level of responsibility which is attributed to the child. Almost without exception the literature refers to children 'with' EBD. Even journal papers which take a more contextual stance attribute the EBD to the child. For example, Cassidy *et al.* (2001) refer to children with EBD throughout their paper, but this paper takes a psychiatric stance, arguing that 89 per cent of students in a school for children identified as having EBD meet diagnostic criteria for psychiatric disorders as well, which they describe as 'comorbidity'. There is an attendant set of assumptions which flow from the medical model of diagnosis, treatment and cure inherent in this work. One, that there is an agreed set of symptoms; two, which once identified can be treated; and three, the goal being to cure the individual. Jones and Jones (1999) discuss the measurement of intelli-

gence, anxiety and personality in 'The assessment of children *with* emotional and behavioural problems' (our italics). Medical and, what might be termed, more traditional psychological approaches tend to describe behaviour as within-individual and as caused by factors pertinent to that individual, so it might be argued that 'with' makes conceptual sense from the standpoint of these authors. However, Todd (2005), a critical educational psychologist, critiques the psychological obsession with classification and labelling as itself a 'professional thought disorder'.

However, the use of 'with' is not confined solely to those authors who employ these explanations; rather, its use seems pervasive. For example, Swinson *et al.* (2003) argue that the behaviour of children identified as EBD and their mainstream counterparts does not differ significantly in a classroom setting (a classic contextual argument); however, throughout the paper they employ terms such as 'children with challenging behaviour'; 'children with EBD', 'children with primarily

emotional problems'. Cole et al. (2003) start by talking about 'children deemed to have emotional and behavioural difficulties' (Cole et al., p.187) but shift to a pupils/children with EBD nomenclature. Daniels and Cole (2002) employ an activity theory framework to explore emotional and behavioural difficulties. Activity theory emerged from Vygotskian psychology, the fundamental assumption of which is based on a notion of relationship and a distributed, rather than individualistic, view of learning and behaviour. Despite this, multiple references are made to children with EBD or children with problems.

At first glance it may seem odd to focus so much on one small preposition: why does it matter? We would argue that the problem lies in the meaning which flows from the use of 'with'. Rather like many of the disabled people's movements, language is important in the claiming of identities as disabled people versus people with disabilities (Goodley & Lawthom, 2005). As we have alluded to in the first paragraph, the choice of words indicates important information about the assumptions made. In the use of 'with' the assumed difficulties are attributed to the child; they reside within the child. Such an assumption has significant ramifications for, what might be described as the EBD industry. If the difficulties are within child, then it is logical that any treatment will follow the child. Just as a doctor might prescribe antibiotics for someone with tonsillitis so a programme of treatment might follow a child 'with' EBD. Jones sums it up as:

Today it is widely recognised that the language used to describe behaviour problems shapes not only beliefs about the manifest problems but also perceptions of what could be done about it and whose responsibility it is to do it.

On this basis, the use of this seemingly inoffensive preposition becomes less trivial, the use of 'with' indicates a specific construction of child and intervention which is treatment driven. Far more appropriate would be to include the construction of the label in the definition, 'a child labelled or identified

as having EBD'. In support of contextual explanations around behaviour, there is a plethora of evidence which suggests that such difficulties are distributed across a context rather than situated within a child, and identification of difficulty would not require individual treatment but contextual analysis. Here, rather than extracting the problem child with problematic behaviours the setting is explored to see how the label has arisen.

Reframing EBD as a distributed concept across contexts

That any EBD identified in children can be thought of more properly in a distributed framework has been well established in the literature. Doyle (2001, 2003) describes a programme of nurture groups run in a primary school which sought to ensure an appropriate curriculum, an inclusive space for children and shifts in the whole-school approach to a nurturing one. These contextual shifts resulted in a downturn of identified difficulties from the children. Richards (1999) highlights the inconsistency across schools in inclusion of children identified as having special needs and comments that these inconsistencies have more to do with the school culture than with catchment area or socio-economic influence. Pierce et al. (2004), in a meta-analysis of teacher interventions in American schools, suggest there is evidence that in manipulating the context, students' behaviour changes. Montgomery (1999) reviews teacher behaviour which contributes to classroom disruption; she includes withholding of praise and rewards, keeping children in and confiscation as actions which tend to increase poor behaviour. Swinson et al. (2003) suggest from their research that the behaviour patterns of children identified as EBD are similar to those who have not been so labelled. Behaviour is better in well-managed and interesting lessons and the behaviour of all children deteriorates as the day progresses. These examples suggest that all behaviour (not only problem behaviour) can be better understood when it is situated in its specific context.

How do teachers and schools view behaviour such as EBD? Evidence from a number of sources (Panayiotopoulos, 2004; Poulou & Norwich, 2002; Swinson *et al.*, 2003) suggests that teachers tend to employ within-child explanations for behaviour in school and act accordingly. Bird (1999), a critical educational psychologist, critiques notions of intellectually 'dull' and 'bright' children (espoused in books on intelligence). Competence can be conceptualised as rooted in settings and distributed across classrooms rather than within narrow human characteristics, such as intelligence, personality and temperament. However, this reframing of behaviour by teachers and professionals is necessarily difficult. It runs counter to our intuitive individualised model of the world and makes change more difficult. Poulou and Norwich (2002) suggest that there is a causal relationship between teachers' perceptions of the causes of behaviour and their responses to it; helping behaviours in teachers are more likely to be associated with beliefs about the teachers' power to change the children's behaviour. If the teachers believe that they cannot influence children's behaviour (which individual explanations would demand) then they are less likely to invest their time and energy in working with the child and more likely to advocate removal of that child from mainstream education.

The notion of within-child factors as causes of EBD is, however, challenged by the incredible increase in exclusions from UK schools during the last decade. Panayiotopoulos (2004) reports that exclusions based on EBD have increased tenfold during the last ten years. It seems impossible that such an increase can be due solely to the children; why would one generation 'suffer' so much with EBD as compared to the previous one? It is more plausible to consider changes in the education system which may have resulted in such an increase in the construction of EBD. Jones (2003) discusses the competing discourses of inclusion and performance which have come to shape schools' policies. On the one hand funding and

approbation follow high scores in standard tests (which requires a particular type of teaching) while teacher resistance, pupil rejection and omens of trouble surround high inclusion rates. Visser and Stokes (2003) comment 'Pupils who display behaviour which jeopardises a school's performance, or, are a potential danger to the education of others, are not universally welcomed in mainstream schools'. (Visser & Stokes, 2003, p.66).

Individualised solutions to EBD?

Given the scope of the problem, it is further puzzling that the literature reveals a widespread commitment to behaviourist principles in addressing EBD. While, on the one hand this represents an attractive method of developing interventions, on the other, it positions the children as passive recipients of professional activity and denies the complexity of individual agency which 21st century understandings of the human being and child advocate (e.g. children's rights as an issue). Shearman (2003) claims to take a psychoanalytic approach to conceptualising classroom difficulties, but discusses her reliance on the quintessential behaviourist tool ABC: antecedent-behaviour-consequence. Such a tool suggests that behaviour can be understood by reference to the immediate context and so easily manipulated by shifts in the antecedents. Madden *et al.* (2004) discuss an inter-agency intervention programme which seeks to 'train' parents and children in appropriate behaviour and give rewards for sanctioned behaviour, suggesting an almost Pavlovian model. Such interventions provide a simplistic and deterministic picture of human behaviour, assuming that we leave our histories behind when we shift from context to context (e.g. home to school).

Putting EBD in its context

Despite a lamentable lack (given the ramifications of the assignment of the label for the child) of definition surrounding EBD, it is clear that many of the children so labelled

live disorganised and troubled lives (Farrell & Tsakalidou, 1999). This makes it difficult for them to conform to the inflexible demands of schools which, given the neo-liberal emphasis on performance, tend to tightly organise and control the school day. Rees *et al.* (2003) state ‘the ubiquitous nature of the term EBD cannot, however, shroud the lack of criteria, agreement and, arguable, confusion that surrounds its use’. (Rees *et al.*, p.35). Panayiotopoulous (2004), Madden *et al.* (2004) and Doyle (2003) construct EBD as oppositional behaviour and indeed this is part of the so-called diagnostic criteria found in DSM IV. What exactly constitutes oppositional behaviour remains less clear. Jones (2003) suggests that legitimised and non-legitimised behaviour is a cultural construction; this means that the attribution of the EBD label to children is based on specific adults in specific contexts. Given the evidence that some school cultures are more inclusive than others, it could be that the label reflects the school values rather than the child *per se*.

To summarise, while there is little agreement about what constitutes EBD, the ramifications for the child are manifold and serious. They tend to be constructed by the professionals around them as troubled children who need help and while this may be motivated by the kindest of intentions the actual result may be exclusion from mainstream society. The child is deemed to be unfit to socialise with peers and is inevitably marginalized. Even if the need for treatment is accepted, the child is further dehumanised by the prevalence of behaviourist interventionist strategies, which, even if not articulated by the professionals who employ them, translate into a representation of the child as something to be manipulated by people who know better than the child about his or her life. We would argue that these constructions serve to shape the child-professional relationship in particular ways (e.g. the professional wary of trouble, the child fighting for personal recognition) and that a shift in such understandings of EBD may result in

a more positive trajectory for both children and professionals in schools.

Reconceptualising EBD

A notion of psychology as a distributed rather than as an individual phenomenon is beginning to gain more currency. The idea of identity as situated in the various contexts that an individual inhabits demands that attention be given not only to those individuals but also to the multiple systems in which those individuals are embedded and which shape their actions, reactions and interactions. A powerful theoretical rendering of this position can be found in the communities of practice literature.

The essential aspect of communities of practice (CoP) is to understand that learning has been reconceptualised as experience (Lave & Wenger, 1991) rather than as the acquisition of knowledge and skills. A useful way of understanding the position is to think about how learning is understood currently in the form of the structures of the UK education system. This position could be described thus: there is an assumption that knowledge is received, largely unproblematically, from teachers. Children enter classrooms, sit down and listen to the teacher or engage in the prescribed activities and acquire the knowledge and skills as specified in the national curriculum, for example the formula for solving an algebraic equation, or the date of the English Civil War, or how to count to 10 in German. Some children do this better than others but this can be explained by innate intelligence: some children will always do better than others because they are cleverer. Motivation can also be invoked to explain individual differences in achievement: some children are better motivated because they come from ‘better families’ and so do not misbehave and do their homework and so are more able to succeed. A third reason for difference might be the quality of the teacher.

All of these explanations are about individuals; success in learning is located in the individual child or the individual teacher

and learning is posited as an acquisition model. In contrast to this view, the communities of practice literature suggests that to understand performance in children, attention needs to be given to the various communities of practice of which they are members. Moreover, their levels of participation in these communities and the systems which serve to encourage or discourage inclusion in these communities are seen as key to understanding learning. Rather than learning as acquisition, learning is seen as participation in social spaces. However, crucially for the focus of this paper, participation is not inevitable and is not passive. Rather it is mediated by the multiplicity of social structures which construct schools.

Defining communities of practice

A community of practice is a collection of people bound together by location, purpose, activity, values, desires or, perhaps, labels: for example primary teachers in general, the teachers in a specific school, educational psychologists, children 'with' EBD. All of these groups, or communities, can be separated from others by reference to the practices in which they engage. For example, children given the label EBD are likely to be engaged in and with significantly different practices from other children, framed as 'oppositional behaviour'. They may be removed from lessons with their friends or from schools with their friends. Teaching may start from the assumption that these are students who are unlikely to succeed. Moreover, teachers may start with the assumption that these students are troublesome and require 'special' teaching practices. The education system will produce policies to deal with such children. Professionals will advocate different 'treatments' to 'cure' such children of their troublesome behaviour so that they can properly perform in the education system. These practices and assumptions will shape the experiences of the children and their trajectories, although because practices and people are mutually reciprocal their trajectories will inevitably vary in a non-predictable way.

Indeed, this potential multiplicity of pathways fundamentally undermines the more traditional normative approach of psychology. With respect to learning, the normative approach is that learning happens linearly. How might learning be understood within a CoP?

A CoP is an informal or formal group which shares and develops understanding of and behaviour surrounding its proximal and distal interactions and contexts. To quote Wenger, to define CoPs is to understand that they are places where: 'collective learning results in practices that reflect both the pursuit of our enterprises and the attendant social relations. These practices are thus the property of a kind of community created over time by the sustained pursuit of a shared enterprise' (Wenger, 1998: p.45). So the community is about learning and belonging, where entitlement is the key to learning. Thus full participation is not about mastery but about belonging to the CoP.

The notion of practice can be understood in terms of the act of doing in context (Wenger, 1998). It is the language, tools, documents, images, symbols and roles which shape a community. Practice is that which is said but also that which is unsaid, it includes tacit conversations, subtle cues, untold rules of thumb, perceptions, underlying assumptions and shared world views (Wenger *et al.*, 2002). Practice is that which is represented and that which is assumed. Paetcher (2003) talks about CoPs in performative terms, suggesting that CoPs are defined by the acts which are privileged in those CoPs. For example, 'good' pupils participate in the dominant CoP as they display non-oppositional behaviour. With CoPs, understandings and the conceptual fuzziness of EBD, a clearer picture emerges. Within school contexts inclusive dominant practices around learning are privileged. 'EBD children', and the professional who works with them, become more marginal and peripheral leading to potential exclusion from the CoP. This is precisely because in schools a particular kind of participation is valued.

Participation

We have highlighted that participation in a given community is not automatic and is not passive. Wenger (1998) has suggested a number of sources for understanding an individual's participation and non-participation. Specifically:

1. *How we locate ourselves in a social landscape.*
2. *What we care about and what we neglect.*
3. *What we attempt to know and understand and what we choose to ignore.*
4. *With whom we seek connections and whom we avoid.*
5. *How we engage and direct our activities.*
6. *How we attempt to steer our trajectories.*

(Wenger, 1998: p.167)

In the context of understanding children and professionals coping with the EBD label these same sources of information would serve to provide a rich picture that might help to explain why some schools seem to be more inclusive than others and perhaps why some children are more likely to be included than others.

The pattern of life for children labelled EBD is that of being on the margins of the mainstream, of communities which go on around them but without them. Given that learning and experience are participation and that the nature of participation shapes identity, the EBD label can easily become self-fulfilling. This is, of course, not to say that students designated as EBD cannot participate. The problem lies in the notion that learning is an 'activity' which happens as a time-constrained event. This is not the case, learning is experience and experience is relationship. People who cannot conform to the time frames and practices of a given community are denied participation. Once denied participation, an individual inevitably becomes part of an 'out group' because they do not engage in the same practices as the 'in group'. This is particularly powerful in a school context where choice to attend and so choice in participating in the CoP is denied. The subsequent behaviour of the excluded pupil is constructed in an individual way, and

such children are said to 'have EBD' as if this were something they carry around within them. Were those children permitted to participate and to contribute to the developing CoP, they would be part of it and the CoP, and by extension the people in it, would be part of that child. Indeed, Todd (2005) points out, in relation to including disabled children in mainstream schools, that disabled children can inhabit a number of 'thick identities' rather than 'thin' disablist models of 'children with disabilities' (as an all-encompassing identity).

School represents one of the primary socialising contexts for children in the West; exclusion from that context will have major ramifications for the lived experiences of those excluded individuals. Experience from one CoP will influence assessments of new ones, if a person has been marginalised from his or her school CoP, then it is not difficult to see how contemporaneous and subsequent exclusions might emerge.

From a professional point of view the label of EBD brings with it notions of a marginalised child – a student who does not participate (or crucially is not allowed to) in the practices which are representative of most children's experiences. Because professionals are dealing with only one education system, their goal is to assist children in acquiring the practices valued by that system. But this is not possible because behaviour is not 'acquired' in this way; rather behaviour is about meaningful engagement and internalisation, i.e., participation, of practices. Participation is about changing and being changed by practice. It follows that the task of changing is impossible from the professional's and the student's position if the focus of work is removed from the context. As long as EBD is conceptualised as an individual problem residing within the problem child, it is difficult to see how this might change.

Distributed competency and professional behaviour

In the first section of this paper we argued that the language used, the attributions about

causality made and the interventions carried out shaped understanding and behaviour of children and professionals in particular ways. In this section we would like to discuss how a reconceptualisation of EBD as a distributed phenomenon might serve to shift the experiences of all those involved. It is undeniable that the adoption of distributed explanations would not simplify things. Indeed a consideration of the multiplicity of systems which influence experience results in a model of such complexity that a great deal of time and energy is required to unpick those multiple layers. However, we would argue that simplistic behaviourist models deny the reality of being human and are essentially useless in efforts to create inclusive schools and an inclusive society. Visser and Stokes (2003) argue that inclusive education is a right but that at present the model is more integrationist, that is a child must fit the education system, rather than inclusionist, that is a child belongs without the need for negotiation. The distributed model represents an inclusionist perspective because it forces all parties to consider the systems which enable or disable inclusion.

Essentially a prime shift in adopting a learning as participation approach is a rejection of the medical model of understanding behaviour. It would no longer be appropriate to diagnose, treat and cure individuals to allow them to participate. Rather professionals (teachers and psychologists) would need to engage in some oppositional behaviour themselves. Here, professionals and children could work together to understand the patterns of school organisation and children's identities to understand why participation for some children is problematic. In this model, EBD as they are currently understood do not exist. There is no 'child with EBD'; there are systems which serve to enable to disable participation for children. The question shifts from what is wrong with this child to what is happening in this context which results in this child being marginalised? The problem is 'problematized' rather than the child.

From a societal point of view attention needs to be given to the policies which shape school cultures. To expect all children to follow the same curriculum and be assessed in identical ways becomes unacceptable. The national curriculum could be seen as a tool which works to oppress both teachers and students in its rigid construction of what constitutes performance and success (Tobbell, 2000). In our alternative model, education is seen as a process of enabling children to construct identities as effective learners and equip them with practices which allow them to participate in society as able and valuable members rather than as passive recipients and reporters of prescribed knowledge sets. Understandings of school effectiveness cease to be measured by reference to student scores in standardized tests; instead effectiveness is seen as the capacity of the school context to include children in their own education. Lave and Wenger (1991) conceptualise this as the difference between the teaching curriculum (shaped and delivered by teachers) and the learning curriculum (shaped and delivered by learners).

At present, there is a construction of children whose preoccupations are not those of the teachers as having learning difficulties or EBD. Children who do not conform to the school sanctioned behaviours are acquired by (McDermott, 1996) these labels which often result in school failure and societal marginalisation – a situation perhaps made worse by the statutory compulsion to attend school and the rigid assessment and training policies which constitute the school context. In the rejection of individual explanations of difficulty, schools would shift away from such oppositional processes. The emphasis would be on relationships, the teacher and the pupil rather than the teacher versus the pupil. Teachers and pupils, in this school model work together to form communities of learning. Teachers' roles shift from the gatekeepers of knowledge to facilitators of participation. Their goal is to form relationships with students to enable an effective passage through the zone

of proximal development (Vygotsky, 1978) which can be thought of as learning.

Here, the educational psychologist's (EP's) role is no longer that of the assessor of the individual child. Rees *et al.* (2003) suggest that currently EPs assess the child and based on current psychological theory make a judgement of how best to meet the child's needs. Assessments typically involve some type of psychometric test, and might include observing and interviewing the child. If learning is understood as participation which is influenced by the multi-layered systems in which the individual is embedded, then assessing the child alone becomes untenable. Instead the role of the EP is reconceptualised as, perhaps, an advocate for such children in negotiating the systems in which they find themselves. The EP becomes the conduit between child and teacher and child and society in facilitating participation. This calls for a different type of approach and might better be thought of as audit rather than assessment. The EP would ask different questions. Notions of measurement using standardised tests would be obsolete; rather, understanding the pattern of participation would be paramount. What mechanisms militate against the child's participation in the learning environment, what are the personal meanings which underpin the teachers' and the child's relationships? What systemic shifts are needed to enable participation?

In current conceptualisations of emotional and learning difficulties professionals' roles involve doing something to the child, encouraging the child to behave in the way valued in a given context, assessing a child's level of intelligence, removing the child to another environment. In the distributed conceptualisations the professional and the child are working in partnership to achieve participation. Professional behaviour becomes a facilitation or negotiation bringing parties together to understand the

influences that shape behaviour.

Rogoff *et al.* (2002) suggest that the 20th century model of running schools as efficient factories has failed both children and teachers and that a better model is for children and adults to work collaboratively, where the professional's role is that of support for participation rather than as expert. We would suggest that reconceptualising EBD as a distributed phenomenon rather than an individual one, as systemic rather than child centred, would build on this idea. The result might be a school system which works to include all and where the notion of education is collaborative rather than oppositional and where all children are welcomed and able to change and be changed.

Changing psychological practices

The richness of the CoP conceptualisation of learning provides an alternative lens with which to view EBD. How might this become embedded in practice? Lawthom and Goodley (2005) argue that enabling psychological practices (around understanding disability) demand that impairment be rethought as more than an individual variable and move towards transformational change in organisations. In schools, Todd (2005) presents 'practical theory tools' for professionals to consider how disability is itself constructed. Todd's narrative conversations help separate people from problems and offer other storylines of possibility. Working with schools as ecological systems, systems in flux, rather than static entities, requires professionals to rethink professional identity boundaries. Given the changing professional qualification for educational psychology in the UK, the possibility for change is present and real.

Address for correspondence

Jane Tobbell, Centre for Psychological Studies, University of Bradford, Richmond Road, Bradford BO7 10P.

E-mail: j.tobbell@bradford.ac.uk.

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