Tigers on the Lawn: Hated for Being Me: An Autoethnographic Journey Through Bullying as a Disabled Child in the English Education System

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Abstract

This autoethnographic thesis offers a compelling exploration of disability through the historical lens of my disabled childhood experiences, challenging conventional approaches to understanding and addressing school violence against disabled children. Initially, this autoethnography was conceived as an examination of the contexts in which disabled children face bullying within a framework of education. It has evolved into critically assessing traditional bullying narratives and underlying assumptions.

The thesis argues that framing bullying solely within educational and psychological paradigms reinforces a problematic bully/victim binary, inadvertently perpetuating the medical model of disability. By combining disability theory with lived experiences, this research posits that the bullying of disabled and neurodivergent children transcends simplistic educational or psychological explanations.

Rather than viewing bullying as a consequence of individual psychological flaws requiring 'fixing,' this study advocates for a more nuanced understanding. It considers broader sociocultural assumptions about disability, aiming to shift the discourse from a pathological approach to one that recognises the complex interplay of sociocultural factors.

This research contributes to the field by offering an insider perspective on the multifaceted nature of bullying experienced by disabled children. It challenges existing paradigms and calls for a reconfiguration of how we conceptualise and address bullying, moving towards creating genuinely inclusive and safe environments for all children.

Content Warning: This thesis discusses sensitive topics, including sexual abuse, physical and psychological abuse, humiliation, and extreme acts of violence against a disabled child within educational settings. Reader discretion is advised.

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Declaration

I, the author, confirm that the Thesis is my own work. I am aware of the University's Guidance on the Use of Unfair Means (www.sheffield.ac.uk/ssid/unfair-means). This work has not previously been presented for an award at this, or any other, university.

Terminology

Bodyminds: Throughout my thesis, I use the term ‘disability’ to encompass both mental and physical impairments, as defined by the UK (Disability Discrimination Act, 1995). Recognising that psychological and physical processes are interconnected and influence each other, I refer to them collectively as 'bodyminds' (Price, 2015, p. 269).

Embodiment: The concept of embodiment challenges the traditional mind-body dualism that separates the mind from the physical form. It acknowledges that our physical existence fundamentally shapes our experiences, identities, and ways of being in the world. Disability, as an embodied phenomenon, is intrinsically linked to the material realities and limitations of diverse human bodies (Flynn, 2021).

Language: Throughout my thesis, I use the original language of sources, recognising that historical references to disability may be offensive as discourse evolves. Quotation marks indicate that the language is not my preferred language but is used in their historical context.

Disabled person: I use the term ‘disabled person’ or ‘disabled child’ as more accurately reflecting the lived experience of disability as integral to identity and personhood rather than an external condition to be separated from the ‘real’ person. I adopt the social model, which is the principle that society disables adults and children with impairments. This choice aligns with perspectives from disability studies scholars (Liddiard, 2014a; Shakespeare, 2004; Titchkosky, 2001).

Children: Throughout my thesis, I deliberately use the term ‘disabled children’ rather than ‘disabled students.’ This choice is intentional, aiming to consistently remind the reader that the focus of my research is on children specifically, not just in their role as students.

People: While I acknowledge that adults are equally affected by the issues discussed, this research primarily focuses on children. When I refer to ‘people,’ it is assumed that children are included in this group. Children have often been constructed as 'becoming' human/people, so they are partly excluded from the human category to start with.

Chapter 1: Setting the Scene

'Children are not born knowing the nature of power or the cruelty with which we often treat one another, but in the world, we have made a great many children come much too early to that knowledge' (Miriam et al., 2018, p. 7).

Introduction

Although no one likes to think of violence against children, it happens, and it happened to me. Some may say I am a textbook example of a disabled child born in the 1960s (Elklit et al., 2023; Fang et al., 2022; Lund & Vaughn-Jensen, 2012; McGee, 2014). Society constructed a monstrous bodymind to be dehumanised, my educational space constructed my Otherness, and society constructed my disability. So, self-reflexively, I am a socially constructed undesirable non-human. However, identities are constantly in flux, and one thing that reflexivity has taught me is how to 're-evaluate and re-negotiate meaningful identities' (Mohammed, 2023, p. 596). Today, I am proud to be a disabled woman who is powerful; tomorrow, I don't know who I will be, but I am no longer ashamed of my fragmented identity.

"Tigers on the Lawn" precedes my title, a poignant acknowledgement of memory's fragility and truth's elusive nature. One early morning, my mother's world was shaken as she witnessed what she believed to be two men unloading tigers from a white van. Her heart racing, she frantically called the police, her voice trembling with fear as she reported tigers roaming freely on her lawn. The police arrived, their blue lights piercing the dawn, and my mother, visibly shaken yet relieved, led them to the back lawn. As they searched with torches in hand, the gravity of her reality began to unravel. She spoke of horses running down the entry the week before and pointed out imaginary children laughing in the trees. When gently asked if they might have been cats, her response was heart-wrenching in its conviction: "Do you think I am stupid? I know what a cat looks like."

The pain of witnessing my mother's descent into this altered reality is indescribable. I have found myself, on more than one occasion, momentarily swept up in her vivid tales of penguins, aliens, and a green moon, only to be jolted back to our diverging truths. For her, those tigers were terrifyingly real - a truth that existed solely in her mind. This heart-breaking episode marked the beginning of our long, agonising goodbye, a journey familiar to those who have watched loved ones fade into Dementia's embrace. The truth, as Asay (2018) reminds us, is a delicate tapestry woven from memories, feelings, and personal logic, all of which dementia mercilessly unravels. As a family, we have had to learn the complex art of living with mum's truth, swallowing our objections to spare her distress. It is a dance of love and patience that often leaves us emotionally drained. My beloved mother, once my protector and guide, now battles Lewy Body Dementia. This cruel disease ravages her brain, filling her world with haunting hallucinations. It is heart-wrenching to watch her enter the realm of 'the disabled', not through her illness alone, but through the same societal barriers that once rejected me. Now, our roles have reversed. I tenderly take her hand, guiding her through the maze of my disabled world, just as she once led me, with love and patience, down the daunting corridors of my first ‘normal’ school. This poignant journey forms the core of my story.

I have shared this deeply personal story to illuminate the instability of memory and the subjectivity of truth. My own stories serve as an attempt to preserve my experiences before they, too, blur into obscurity. I poured my heart into these memories, hoping to stir empathy in others. As Dan Goodley (1996) so beautifully puts it, ‘Empathy accompanies insight; we know another's life because we feel it’ (p.335). Yet, amidst this emotional journey, I held onto and drew attention to Oliver's (1978) vision, not to normalise disability but to create a world where it becomes irrelevant. This hope, however distant it may seem, keeps me going through the darkest days of our shared struggle.

The scars of my painful childhood as a hated and bullied disabled child run deep. So, when my beautiful autistic granddaughter visited me, also battered and bruised from her experiences in mainstream school, my heart shattered. The thought of her reliving my struggles was almost unbearable. Her sister's words, "I don't think the other children understand her," echoed my own childhood experiences. Even my grandson, with his vibrant red hair, endured relentless taunting. I found myself wondering, with a mixture of sadness and frustration, if anything had genuinely changed since my school days. This research is more than just an academic pursuit; it is a deeply personal exploration of hatred, disability, bullying, and education. I pour my heart into these pages, hoping to challenge readers' perceptions and spark a deeper understanding of the lives of disabled children. To truly understand is a profound act, one that requires us to think and act flexibly with our knowledge (Ocampo González, 2019).

Throughout my childhood, I was enveloped in an education system that viewed disability through a lens of ableism, which led to my experiences of hate, bullying and violence, which were profound and damaging. I have challenged the conventional narratives that frame bullying within educational and psychological paradigms, which tend to reinforce a simplistic bully/victim binary and perpetuate the medical model of disability. Instead, I have argued that the bullying of disabled and neurodivergent children is a complex phenomenon that requires a more nuanced understanding, one that considers the broader sociocultural assumptions about disability. As I reflect on my journey through the English education system as a disabled child, I am struck by the myriad of challenges that I faced, many of which remain unacknowledged in broader societal discourse. I have shed light on my experiences through the lens of my personal narrative by employing an autoethnographic approach. I not only recounted my lived experiences but also critically engaged with the sociocultural and institutional frameworks that perpetuate bullying and discrimination against disabled children.

By intertwining disability theory with my lived experiences, I shift the discourse from a pathological approach to one that recognises the intricate interplay of sociocultural factors. I contributed to the field by providing an insider perspective on the multifaceted nature of bullying experienced by disabled children, advocating for a reconfiguration of how we conceptualise and address bullying in educational settings. One would imagine that I am an advocate for inclusive education, and these assumptions would be wrong. I am an advocate for safe places where disabled children can reach their full educational potential free from violence, humiliation and pain caused by other children and educators. When you live in fear, hated, and loathed by those around you, educational attainment is not always a priority. By sharing my lived experiences and maintaining a reflexive approach, my thesis is both impactful and empathetic. I envision a future where all children can thrive in genuinely inclusive and safe environments. The narratives I shared are not merely anecdotal; they served as powerful tools for reflection and analysis. By opening up about my experiences, I invited readers to engage with the emotional and psychological realities of being a disabled child in a system that often marginalises and dehumanises them. My thesis is a call to action for educators, policymakers, and society at large to reconsider their approaches to disability and bullying, fostering empathy, understanding, and, ultimately, meaningful change.

My doctoral journey has been more than an academic endeavour; it has been a deeply personal exploration of hatred, disability, bullying, and education. I pour my heart into these pages, hoping to challenge readers' perceptions and spark a deeper understanding of the lives of disabled children. I implore you, the reader, to step beyond your comfort zone, to open your heart and mind to the unknown, and to seek out hidden possibilities. I have invited the reader to feel the raw, visceral emotions behind the separation of people into 'normal' and 'abnormal', 'wanted' and 'unwanted'. While some stories may be distressing, they are not intended to upset but to evoke empathy and foster a genuine understanding of disability.

In framing disability as a social construct, I have, with passion and conviction, argued that social change can reframe traditional perceptions of disability. By altering societal attitudes, structures, and practices, our lived experiences as disabled children can improve. Drawing inspiration from feminist scholars, I use autoethnography to assert clear disabled identities and challenge rigid definitions. Through my uncomfortable stories, I have questioned conventional narratives and examined the intricate complexities of disability and suffering. I hope to live in a world that is more accepting, understanding, and inclusive of disability in all its forms. As we, you, the reader, and me, the author, embark on this journey together, I encourage you to prepare for a narrative that is both challenging and transformative. I aim to illuminate the path toward understanding and embracing the diversity of all human experiences, ultimately advocating for a society where the experiences of disabled children are not only acknowledged but celebrated.

And so, we begin.

Imagine, if you will, a world where the very essence of a child's being is questioned, challenged, and often brutally dismissed. This imagining is not a dystopian fiction but the stark reality faced by countless disabled children in our education systems, as documented (Ktenidis, 2020, 2022a; Maxfield et al., 2023; Rose et al., 2012). My autoethnographic thesis is not just an academic exercise; it is a raw, pulsating testament to the lived experiences of those who have been systematically marginalised, bullied, and denied their fundamental right to dignity and respect.

As I dive into the depths of my own experiences as a disabled child navigating the treacherous waters of the English education system, I am not merely recounting events; I am laying bare the soul-crushing weight of societal prejudice that seeps into our schools like a toxic haze. My research is not just about bullying; it is about the insidious nature of ableism that permeates every facet of our society (Bumgardner, 2023; Deroche et al., 2024; Goodley, 2014b; Shaffner, 2019), trickling down into the minds of our policymakers, educators and children, manifesting as an array of violent acts against disabled children. Like a forest ecosystem, addressing one type of violence requires understanding and tackling the entire intricate system in which it exists (Fang et al., 2022; Ozougwu, 2023; Wolbring, 2021). This is my story, and I am inviting you to feel the sting of rejection, the burning shame of exclusion, and the simmering anger at a system that fails us time and time again. I do not write a dry academic treatise; it is a battle cry, a call to arms against the oppressive structures that continue to shackle disabled children to the hatred bestowed on them as they enter the world (Cruickshank, 1951; Pearl, 1912; Schechter, 1961). My thesis does not just whisper politely for change; it roars. It is a call to arms that reverberates through classrooms, boardrooms, and living rooms alike. It recruits an army of readers, arming them with empathy, understanding, and righteous anger. Together, we challenge the ableist ideologies that shape our education systems. We are not just engaging in academic discourse; we are fighting for the very soul of our society. Together, we can use our anger as a powerful tool for social change, personal growth, and mutual understanding, but only when used constructively and honestly (Lorde, 1997).

There will be moments of clarity that shine like beacons in the darkness, periods of confusion that mirror the chaotic nature of lived experiences, and flashes of insight that will shake you to your core. This is not just my story; it reflects countless untold narratives and is a mirror held up to a society that too often turns away from its most vulnerable members. So, I implore you to bring not just your mind but your heart to this exploration. Let the words seep into your consciousness, challenge your preconceptions, and ignite a passion for change. In the end, this is not just about understanding; it is about action, about dismantling the structures of oppression brick by brick and building a world where every child, regardless of ability, can thrive. This is more than a thesis; it is a revolution in understanding, a clarion call for empathy, and a roadmap to a more inclusive future. Are you ready to join the fight?

Research Gaps

Despite extensive research on disability, there is a notable lack of historical attention given to disabled childhoods and voices. Much of the research focusing on disabled children has been heavily pathologising (Lorber, 1972; Sharrard, 1968, 1972; Swaroop & Dias, 2009), as considerable studies exist on how disability affects society, families, peers, and education (Jordan, 1962; Manning, 1962; Meier, 1969; Richardson & Royce, 1968; Schechter, 1961). However, these studies often fail to capture the lived experiences of disabled children themselves (see Runswick Cole et al., 2018). Additionally, there is a significant absence of longitudinal research tracking disabled children's experiences over time; most research is a cross-sectional, observational study that analyses data from a population at a specific point in time, offering a valuable but limited view of disabled lives, providing only a momentary glimpse rather than a comprehensive understanding of how issues like bullying impact disabled children throughout their lives. Cross-sectional studies are useful for descriptive purposes and generating hypotheses, but less suitable for determining cause-and-effect relationships.

My historical viewpoint on the bullying and hatred directed at disabled children allows for reflection on changing attitudes and policies, as well as an analysis of historical factors that have shaped and continue to influence current practices. There is a noticeable lack of research directly addressing the hatred of and towards disabled children, which is as uncomfortable to confront as discussions about child sexual abuse; the idea of hating children due to their experiences of disability is abhorrent yet real. This gap in research leaves a critical aspect of disabled experiences unexplored. Goodley & Runswick-Cole (2011a) acknowledge the difficulty in distinguishing between actions motivated by ignorance and those driven by hatred towards disabled people, highlighting the complexity of studying and addressing discrimination against disabled children. By adopting a historical perspective on these issues, I can better understand the evolution of attitudes and policies and identify areas where further research and action are needed to improve the lives of disabled children.

Goodley & Runswick-Cole (2011b) further argue that this violence is not just the actions of a few 'bad' people but reflects broader cultural attitudes and practices. Other academics are turning their gaze to the hatred of disabled people and hate crimes (Burch, 2018, 2021; Englander, 2007; Ralph et al., 2016; Roulstone, 2016; Shakespeare, 2012; Sherry, 2016). Englander (2007) considers bullying as an apprenticeship version of adult hate crimes. Examining hate and violence against disabled children provides a lens to understand and address deeper societal issues around disability, difference, and inclusion. Goodley & Runswick-Cole (2011b) argue that this analysis is crucial for creating meaningful change.

I am addressing these gaps to increase awareness and understanding of the hate-induced bullying of disabled children in the English education system and to, hopefully, inform more effective policies and interventions. Without a sense of ableism, ableist discourse will continue to be accepted, and narratives and change will be slow or non-existent (Haegele & Hodge, 2016). As with the work of Ktenidis (2020), lived experiences of bullying provide data for historical reflection; together, we offer a counter-narrative to deficit discourse (Connor, 2014).

Historicising voice

This autoethnography is co-constructed by the voices of the privileged, the powerful, doctors, educators, family, the bully, the media, and many others who have crossed my path (Wertsch, 1991). These voices constructed my very being, so when I speak, I am not using one voice; I use many voices to articulate my research (Mizzi, 2010). I recognise that these voices are filtered through my personal experiences of marginalisation and constrained by my values and beliefs, which could inevitably limit the breadth of perspectives represented in this thesis.

The historical and autoethnographic nature of this research inherently presents limitations regarding memory accuracy and event reconstruction. Human memory is unreliable and can be influenced by several factors, particularly in cases of traumatic experiences like bullying and abuse. Autoethnography faces the challenges of retrospective interpretation and incomplete recollection. However, the emotional anchoring of my memories provides valuable insights into lived experiences of hatred, bullying, and disability. While factual accuracy may be compromised, stories can convey significant truths through emotional resonance, moral lessons, and cultural reflections (Gerken, 2020). As Ahonen et al. (2020, p. 451) argue, ‘Truth cannot be communicated with words, but only be shared with people who are willing and capable to embrace it into their beings.’ This perspective challenges the notion of absolute truth in research, as proposed by Feder (2003), and emphasises the value of emotionally charged narratives in understanding complex human experiences.

Research questions

1. What factors produce contexts in which disabled children are hated and subjected to school violence and bullying?
2. What can one story tell us about the cultural constructions of disability?
3. How can autoethnography be used to generate insights for policymakers?

My Road Map - Mapping My Thesis

The thesis takes a strong sociocultural perspective on understanding the bullying of disabled children, moving beyond individual psychological explanations to examine broader societal and cultural factors. In Chapter 1, the narrative begins by setting the scene, introducing the research questions, outlining the aims and objectives, and establishing a framework for understanding the complexities of disability within educational contexts. Chapter 2 I have positioned my methods at the beginning of my research for two reasons: firstly, to explain who I am and why I chose the direction of my research and, secondly, to avoid separating the literature from the data. They both tell important stories of my life and are linked naturally to each other. This chapter provides an in-depth exploration of the methodological framework guiding this research, focusing on the use of evocative autoethnography to examine the lived experiences of disabled children within educational contexts. Readers can expect to gain insights into the philosophical underpinnings, ethical considerations, and personal narratives that shape the research process, thereby fostering a deeper understanding of the intersection between disability, bullying, and educational practices.

In Chapter 3, the literature review critically examines the historical and sociocultural constructions of disability, exploring how these frameworks contribute to the bullying and marginalisation of disabled children. This chapter serves as a backdrop for understanding the emotional and psychological impacts of bullying, setting the stage for the personal narratives that follow. Chapter 4 presents five poignant stories from my childhood, each illustrating the painful realities of bullying and violence faced by disabled children. These narratives are not merely personal accounts; they are powerful reflections of broader societal issues that resonate with many who have experienced similar hardships. Chapter 5 offers a reflexive analysis of the data presented in the previous chapter, connecting personal experiences to academic discourse. This chapter challenges traditional narratives around bullying, advocating for a deeper understanding of the sociocultural factors that perpetuate violence against disabled children.

In Chapter 6, the discussion synthesises the findings, drawing connections between personal narratives, theoretical frameworks, and the implications for educational policy and practice. This chapter serves as a call to action, urging readers to recognise and address the systemic issues that contribute to the bullying of disabled children. Finally, Chapter 7 concludes the thesis by summarising key insights and offering recommendations for creating inclusive and supportive educational environments. This chapter not only reflects on the research process but also envisions a future where the voices of disabled children are heard, valued, and celebrated, challenging the reader to join in the fight for a more equitable society. I have proposed shifting from an individual, deficit-based view of bullying to one that examines the broader sociocultural contexts and power structures that allow bullying of disabled children to persist. It calls for a more holistic, systemic approach to addressing this issue.

Chapter 2: Methodology

Introduction

Placing the methodology at the beginning of my thesis provides readers with an immediate understanding of my research approach and perspective. This placement allows them to better interpret the subsequent chapters within the context of my chosen methods. By explaining who I am and why I chose my research direction early on, I establish a personal connection with you, the reader. This approach is particularly valuable in qualitative research, where my background and motivations play a significant role in shaping the study.

This chapter explains how my research has been designed and my reasoning behind these decisions. I begin by discussing my positionality to understand who I am, what I bring to the research, and how I have shaped it. I considered my philosophical position to understand myself as a qualitative researcher. I discuss the philosophical underpinnings, advantages, limitations, and ethical considerations of autoethnography. Evocative autoethnography emphasises emotional resonance and storytelling to engage readers and provoke reflection. By sharing vulnerable, emotionally charged narratives of childhood, this research aims to illuminate the lived realities of disability, hate, bullying, and exclusion in schools in a manner that resonates on both intellectual and emotional levels. Subsequently, the chapter delves into the use of personal storytelling as a form of data collection and analysis, explaining how this aligns with the autoethnographic approach. The chapter also addresses common critiques and limitations of autoethnography, providing a balanced perspective on the methodology's strengths and potential weaknesses.

The University of Sheffield ethics committee (see Appendix 1) granted ethical approval. However, I have included a short discussion on the ethical consideration of the self, which autoethnographic (hereby AE) researchers often overlook or underestimate (Pearce, 2016). When considering AE ethics, the key issues are the importance of the story, the impact and effect the story will have on the actors in the story, the reader, and the researcher's context or positionality (Andrew & Rossignol, 2017). By providing a detailed explanation of the methodological choices, this chapter aims to offer transparency regarding the research process and demonstrate how autoethnography can yield unique insights into disability experiences in education. This approach allows for the centring of lived experiences as a source of knowledge whilst connecting them to broader cultural patterns and theoretical frameworks.

Through this methodological framework, the research contributes to the field of disability studies and education by offering a nuanced, insider perspective on the experiences of disabled children in educational settings. By employing evocative autoethnography, this study aims to challenge dominant narratives, provoke critical reflection, and ultimately contribute to more inclusive and equitable educational practices.

Positionality

As a researcher, I acknowledge the complex, shifting, and contextual nature of positionality, which involves navigating multiple intersecting aspects of identity (Mohammed, 2023). As an insider researcher, I recognise my significant influence and impact on all aspects of the qualitative research process (Berger, 2015). Through continuous reflexivity, I have endeavoured to understand and account for my position, values, beliefs, and biases. This reflexivity, as Berger (2015, p. 220) defines it, is 'the process of a continual internal dialogue and critical self-evaluation'. I align with Mohammed's (2023, p. 589) call to reframe 'positionality as a persistent reflexive process that is as fluid and dynamic as we are, rather than a static methods section feature'.

My identity shapes my positionality as a 59-year-old white English disabled woman, married to my husband for almost 40 years. I am a proud mother of one daughter and a grandmother to four amazing grandchildren. Family is so important to me. I was born into a working-class family in the 1960s. My experience as the first and only physically disabled child in my family, community, and schools has inevitably influenced my perspective. I recognise that my experiences as a disabled person from a different generation might not fully align with the experiences of current disabled children, potentially leading to misinterpretations. Growing up in a different era might also influence my perception of current educational practices, potentially leading to unfair comparisons or expectations.

My pathologised identity is Spina Bifida, epilepsy, obsessive-compulsive disorder (OCD), dissociative identity disorder (DID), post-traumatic stress disorder (PTSD), and dermatomyositis. These conditions, particularly my OCD, which is exhibited as perfectionism, have significantly impacted my life experiences and worldview (Grøtte et al., 2015; Pinto et al., 2017). My OCD led to unrealistic standards in my research process and analysis. Perfectionism is a common trait associated with OCD, particularly in academic or work-related contexts (Pinto et al., 2017). While diligence is important in research, OCD-driven perfectionism led to a cycle of redrafting that was hard to stop, hindering productivity and the quality of my work.

As a disabled child, I was statistically at an increased risk of sexual abuse, school violence, marginalisation, and accumulated mental health problems (Cruickshank, 1951; Jordan, 1962; Richardson et al., 1964; Tizard, 1966). These expectations became my lived experiences and have inevitably shaped my worldview, political beliefs, and cultural connection to my research subject. The risk is that I assume shared experiences or understandings.

My political lens is informed by post-neoliberalism, which calls for a more interventionist approach prioritising social equity, environmental sustainability, and inclusive welfare (Grugel & Riggirozzi, 2018). I am critical of the 'neoliberal ableist logic' of compulsory 'able-bodiedness' (Fritsch, 2015, p. 135) that continues to view 'disability as a diminished state of being human' (Campbell, 2009, p. 5) and 'potentially financially burdensome' (Yates, 2015, p. 90). I recognise how the 'binary, 'us' and 'them' upon which neoliberal social policy is premised affects the lives of disabled children (Runswick-Cole, 2014, p. 1127). My research focuses on the intersection of inclusive education, hatred, disability, and bullying, areas that have, over the years, constructed my identity as a disabled child and woman. I bring a unique insight into the complexities of disability, which I believe allows for a more pertinent and sensitive approach to the issues faced by disabled children. Nevertheless, my critical stance towards neoliberalism and ableist logic could lead to an overly negative interpretation of current educational policies or practices.

My advocacy for disabled children is motivated by having an autistic granddaughter. Contrary to what might be assumed, I am not an unequivocal advocate for inclusive education. Instead, I advocate for safe environments where disabled children can reach their full educational potential, free from violence, humiliation, and pain caused by both children and educators. My experiences of childhood trauma, school violence, and sexual abuse may lead to an overly negative view of educational institutions or an overemphasis on the negative experiences of disabled children. This stance is informed by my firsthand experiences of living in fear and feeling hated and loathed, which significantly impacted my educational attainment. Mindful of my lived experiences and subsequent biases, I am committed to ongoing reflexivity to mitigate these risks. I acknowledge the many lenses through which I have approached my research, recognising both the strengths and potential limitations of my insider perspective.

Philosophical Mind Mapping

Having primarily conducted quantitative research, which relies on 'numbers, logic, and an objective stance' (Mohajan, 2020, p. 2), my qualitative understanding was limited to theoretical knowledge rather than practical application. To comprehend my research approach, I first examined my philosophical beliefs using the (Moon & Blackman, 2014) guide to philosophical mind mapping, which helped me understand my theoretical thinking from a qualitative perspective. The depth of understanding and sensemaking I sought in my research was not achievable through quantitative methods. As Spandagou (2020) notes, understanding stems from qualitative research. Therefore, to address my research questions effectively, I had to deviate from my traditional approach and adopt a qualitative methodology. Table 1 - Philosophical Mind Mapping, based on Moon & Blackman's framework (2014, p. 169), I have mapped out my own philosophical beliefs into this framework to represent my academic positionality and includes my reflections on this shift. I will later discuss the external considerations that led me to choose autoethnography as my research method.

Table 1 - Philosophical Mind Mapping

Philosophical Mind Mapping	
My Ontology	
What exists in the human world that we can acquire knowledge	Relativism - Multiple realities exist.
My Epistemology	
How do we create knowledge?	Constructionism - Meaning is constructed from the interplay between the subject and object: the subject constructs the reality of the object.
My Theoretical Perspective	
Philosophical orientation that guides action/research?	Knowledge acquisition is inductive, value-laden, and contextually unique.
My application to predict	
Post Positivism	Multiple methods are necessary to identify a valid belief because all methods are imperfect.
My application to understand	
Social constructivism	Meaning making of reality is an activity of the individual mind.
Hermeneutics	Hidden meanings (of language) exist in texts, practices, events, and situations beneath apparent ones.
My application: to emancipate or liberate	
Emancipatory	The subjects of social inquiry should be empowered.
Feminism	The world is patriarchal, and the culture it inherits is masculine.
My application to Deconstruct	
Post-modernism	Truth claims are socially constructed to serve the interests of groups, and methods are equally distrusted; it might not be possible to arrive at any conclusive definition of reality.
My application – any or all	
Pragmatist	All necessary approaches should be used to understand research problems.

Paradigm

Autoethnographies is a process of storying lives; for me, it is to unite the 'isms' and has the potential to re-humanise and challenge oppression. I have used the voices of my lived experiences to generate a discourse that challenges governmental rhetoric (Shafak, 2020). Although such research may be overlooked or unfunded due to the politically driven research agenda (Goodley & Runswick-Cole, 2011a; Liddiard, Runswick-Cole, et al., 2019), its value should not be underestimated. Whitburn and Goodley (2019) suggest that theories are the stories that we 'tell about the world' and 'these theories are enlivened by other stories that we tell about ourselves and the world around us' (Whitburn & Goodley, 2019, p. 415). The identities and experiences of disabled people have 'the status of theory because they represent locations and forms of embodiment from which dominant ideologies become visible and open to criticism' (Siebers, 2013, p. 283). This storytelling approach is the paradigm in which I position myself telling stories that resist the 'biological essentialism of the medical model' that permeates the English education system (Ahmed, 2022).

I have taken a critical stance, acknowledging that there is a real-world but that reality is subjective and grounded in perceptions, emotions and experiences (Olsen & Pilson, 2022). The constructivist framework is combined with the theoretical lens of Disabled Children's Childhood Studies to understand the complexities of bullying disabled children in educational spaces. This combination enables me to disrupt ableist attitudes and represents a shift away from deficit discourses of disabled childhoods (Goodley, Runswick Cole, et al., 2020; Goodley & Runswick-Cole, 2010). I emphasise the importance of challenging ableist attitudes and promoting inclusive education and support for disabled children's identity formation and resilience. This approach allowed me to bridge the gap between disabled and non-disabled people by understanding my disabled experience (Olsen & Pilson, 2022). It enabled me to address cultural assumptions that suppress identity and build knowledge interactively between disabled and non-disabled perspectives.

Constructivism

I have adopted a constructivist paradigm, which combines individual constructivism and social constructionism, to develop a holistic understanding of disability. Disability, for Goodley (2023),

‘ is the space from which to think through a host of political, theoretical and practical issues that are relevant to all ’ (Goodley, 2023, p. 82). Constructivism emerged as a paradigm that views reality as socially constructed through interactions and interpretations. Combining individual and social constructions of disability was central to developing comprehensive, holistic understandings that capture both the lived experience of impairment and the social barriers of disability. Adopting a constructivist paradigm has allowed me to bridge the gaps in understanding the disabled experience ‘that can exist between disabled and non-disabled people by addressing crip-dissonance’ (Olsen & Pilson, 2022, p. 16). Crip-dissonance captures the lack of alignment between how disabled and non-disabled people understand and experience disability, stemming from clashing internal realities and external social constructions. I aim to move how disability is understood beyond passive awareness to an active tool against dis/ableism and discrimination (Olsen & Pilson, 2022).

Most importantly, the constructivist paradigm has enabled me to avoid taking on board cultural assumptions that suppress my identity and enable disability pride to ‘interactively build knowledge between and within disabled and non-disabled people’ (Olsen & Pilson, 2022, p. 25). Whilst radical constructivists would state there is no reality, I have adopted a more critical stance. I acknowledge that there is a real world. However, my view is that ‘reality is constructed or co-constructed and subject to an infinite variety of constructions' (St. Myers, 2021, p. 55). Constructivism does not seek ‘true’ reality; it recognises that reality is subjective and grounded in perceptions, emotions and experiences (Olsen & Pilson, 2022).

Theoretical framework

The theoretical framework adopted in this document is a combination of a constructivist framework and a theoretical lens of Disabled Children's Childhood Studies. This combination disrupts ableist attitudes and represents a shift away from deficit discourses of disabled childhoods. Constructivism offers me the ‘right to define who I am and the ‘liberty to speak’ for myself (Olsen & Pilson, 2022, p. 16). This view aligns with disabled children’s childhood studies that view childhood and disability as a social construct and champion the voice of the disabled child (Curran & Runswick-Cole, 2014). The social constructionist framework also emphasises the potential for resistance and the renegotiation of these power dynamics through collective action and the challenging of dominant narratives (Burr, 2019). A framework that provides a lens for understanding the complexities of bullying disabled children in educational spaces.

Theories and data are inseparable and provide a framework for understanding complex realities but, more importantly, bringing about change (Postigo et al., 2013). Throughout the data collection and literature research, two keywords are prevalent across bullying, disability, and education: humiliation and violence. I use the humiliation theory of Evelin Linder, which ‘puts the notion of humiliation firmly and decisively on the academic, policy and political agendas’ (Lindner, 2001, p. 2).

Constructing My Reality

My reality and knowledge were deeply rooted in personal encounters with bullying, abuse, and social exclusion and my cultural imagining of disability was built on a narrative of normalcy and hate that served to define, punish, and segregate me from my world (Burch, 2018, 2021a; Michener, 2012; Wolbring, 2021). My analysis revealed how deeply ingrained and destructive ableist ideologies were and still are. My discussion makes visible a lived ‘reality’ of the ableist mindset that shapes the policies and societal attitudes that dehumanise and marginalise disabled children. To make hidden structures and their consequences visible and propose different narratives, I needed a structure or framework (appendix 4) that would enable me to connect my reality to my understanding underpinned by theories that would explain this. My reality was shaped by my multiple personas/voices, dissociation, shifting social dynamics, response to trauma, physical challenges, shifting self-perception and inconsistent adult responses. My epistemology (knowledge) was constructed through embodied knowledge, experiential learning, fragmented reality, social construction, intuitive understanding, distrust of authority, adaptive cognition, imaginative knowing, emotional reasoning, and compartmentalising knowledge. My framework helped me situate my work within the broader scholarly discourse, articulate my assumptions, and provide a coherent and systematic approach to investigating the research problem. The persistence and resurfacing of traumatic memories haunt people like ghosts (Adji, 2021). These memories are considered part of our cultural memory. Here, I bring my traumatic events and my memories into the present.

External Considerations

I began my research at the time of the COVID-19 pandemic, which started in 2019 and originated in China, rapidly escalated into a worldwide emergency by 2020, prompting governments to implement "stringent measures, including social distancing and lockdowns" (Tesser & Harambam, 2024, p. 1) to curb the virus's spread. Educational institutions closed, precipitating a hasty transition to online learning (Rashid & Yadav, 2020). Militaristic metaphors characterised the discourse surrounding COVID-19, framing the situation as a battle requiring strength and fighting spirit, inadvertently implying that succumbing to the virus or having a disability equated to failure (Martin et al., 2022). The panic-driven pandemic exacerbated existing social injustices and structural inequalities, exposing what Kabel & Phillipson (2021) term the 'necro politics of neoliberalism' (p.3), which dictates life and death and imposes systemic violence on marginalized groups. This systemic violence manifested in various ways, including denied access to life-saving equipment, imposed DNR (do not resuscitate) orders for disabled people, restricted medical care, enforced isolation, and withdrawal of essential services, all of which contravened the basic human rights of disabled people (Chen & McNamara, 2020; Martin et al., 2022; The Christian Institute, 2021; Valerio, 2020) The situation evoked a resurgence of outdated eugenic ideologies, prioritising the survival of the 'fittest' or 'normal' members of society (Davis, 2002). This abrupt shift in societal attitudes and practices, coupled with the psychological stress of isolation and fear, inevitably impacted learning capabilities and overall well-being, particularly for vulnerable populations (Chawla et al., 2021). I have contextualised the pandemic, and it impact on disabled adults and children, to explain the research choices I made.

The pandemic thus not only presented a health crisis but also starkly revealed deep-seated societal biases, structural inequalities and loss of agency for disabled people, intersecting with existing oppression and structural violence (Kabel & Phillipson, 2021). The 'collective mental violence' of the pandemic had a significant impact on emotional well-being, potentially inflicting 'collective trauma' (Musse et al., 2020, p. 2). For disabled people, this trauma was amplified by discourses questioning human worth and disposability (Goodley et al., 2022). As a disabled person during this time, I was exposed to the 'disposability and systemic violence in the shadow of a virus' that reinforces structural oppression (Farrant, 2014, p. 461). This firsthand experience of fear, anxiety, vulnerability, isolation, and uncertainty as a devalued member of society had a significant impact on the direction of my research. The pandemic blurred conventional boundaries between researchers and participants as both groups grappled with the crisis in their own ways (Pilbeam et al., 2022). As a researcher with a physical disability and a medically compromised spouse, I was morally obliged to examine the ethics critically. Approaching disabled children to discuss potentially traumatic experiences of bullying was not appropriate at this time (Neyman, 2011). The prevailing circumstances necessitated flexibility in research approaches and a willingness to 'rethink traditional methods differently' (Budworth, 2023, p. 1).

When selecting a methodology, the potential impact on participants was paramount, and my decision had to ensure that I did not cause additional stress to an already distressed group (Grinyer, 2005). Given these ethical concerns, I opted to expand my research capabilities by conducting qualitative research using myself as the primary data source, adopting a multivocal perspective that uses the multiple voices of the researcher (Mizzi, 2010). This decision, while protecting potential participants from additional stress, inadvertently overlooked the emotional toll on myself as both researcher and subject.

Autoethnography

In this section, I introduce my use of evocative autoethnography, a methodology that prioritises emotional and personal narratives over purely analytical approaches. This method serves as a bridge between personal experience and scholarly discourse, allowing for an in-depth examination of how theoretical concepts in disability studies manifest in real-life scenarios. By sharing my stories, I invite you to engage with these experiences and feel their impact. Evocative autoethnography provides a unique lens through which to analyse the broader implications of the cultural construction of disability. It highlights the importance of understanding how societal perceptions shape who is valued, who is marginalised, and how resources and opportunities are distributed. My journey from childhood to adulthood as a disabled person reflects the pervasive influence of ableism and disablism in society.

A Brief History

The term autoethnography (AE) was first used by Heider (1975) and further developed by Hayano (1979). Hayano (1979) defined it as research conducted by insiders studying their communities, noting that it was a combination of method or theory but rather something that influenced both through fieldwork. This inherent ambiguity remains today, as autoethnography encompasses a broad combination of method, research, and writing (Keleş, 2022).

In the 1990s, Ellis and Bochner recognised autoethnography as a ‘humanising, moral, aesthetic, emotion-centred, political, and personal form of representation’ (Bochner & Ellis, 2016, p. 47). They saw it ‘as a transgressive research practice that challenged conventional ethnographic writing’ (Bochner & Ellis, 2016, p. 47) by incorporating the researcher's subjectivity, emotionality, and firsthand experiences. The rise of autoethnography was partly a ‘response to the crisis of representation in the 1980s’ when poststructuralists and postmodernists critiqued the notions of scientific truth and objectivity (Bochner & Ellis, 2016, p. 57). This critique opened space for more personal, evocative forms of research and writing that ‘blurred the boundaries between the social sciences and the humanities’ (Bochner & Ellis, 2016, p. 41).

Ellis and Bochner (2016) envisioned autoethnography as a fusion of ‘the systematic methodologies of ethnography with the expressive, creative elements of storytelling’ (p.67). The aim was to produce accounts of lived experiences that are both rigorous and grounded in qualitative research yet rendered in an evocative, emotionally resonant manner through literary craft (Bochner & Ellis, 2016). Autoethnography seeks to make the researcher's subjective experiences accessible through creative storytelling while still employing systematic qualitative methods.

Autoethnography as a Research Method

For Bochner (2020), AE ‘is not just a research method but a way of life’ (p. 84) that embraces uncertainty, ambiguity, and the quest for self-understanding. It allows the researcher to ‘lean into uncertainty rather than struggle against it’ (Bochner, 2020, p. 84). He further suggests that autoethnographers adopt an ‘autoethnographic temperament’, which he suggests is a ‘willingness to persistently question one's existence, interpret and reinterpret one's experiences, and reflexivity, discovering something strange about the self you started with in an effort to transform yourself into a new being… exposing warts, vacillating between angst and anger, striving for an acute self-consciousness and a shameless subjectivity’ (Bochner, 2020, p. 85), which involves putting one's consciousness on the page and exposing vulnerabilities. Researchers adopting the evocative approach have produced emotional, artistic, heartfelt, and distressing performances, narratives, and conversations (Doloriert & Sambrook, 2012). Having now lived this experience, I can concur that this does become a way of life, all-consuming and stirring up the emotions of the past and, as they collide with the present, can be extremely painful, and I hope one day to say cathartic. However, for Ellis and Bochner, as ‘seasoned’ academics, upholding the principles of AE is not as risky or nerve-racking as an academic new to the field of qualitative research, particularly at a doctoral level. So, whilst I eventually embraced the principles of AE in the format mentioned above, this was not without internal debate. For example, Chang (2016) recognises the merits of the evocative approach and how it offers unique strengths in terms of emotional resonance, empathy, and creative expression. However, Chang (2016) points out that AE is often combined with other approaches, such as the analytic approach, to balance evocative elements with analytical rigour and theoretical grounding.

Analytic or Emotive Autoethnography

Forgive me if I spend some time on this debate; it is to demonstrate my methodological journey. In 2006, an academic discussion took place between Leon Anderson, Caroline Ellis, and Arthur Bochner through their respective publications and scholarly works, articulating their contrasting views on the role of analysis, theory, and personal narratives in autoethnographic research (Anderson, 2006a, 2006b; Ellis & Bochner, 2006). It is not unusual for autoethnographers to openly critique each other’s interpretation of AE. Atkinson (2006), Burnier (2006), Denzin (2014) and Manning & Adams (2015) have all done this to some degree. Such critiques are due to varying values, interpretations, and the vagaries of the methodology (Maric, 2016). However, after reading their contributions, I began to question and rethink the direction of my AE.

Driven by academic rigour and doctoral expectations, analytic AE, as proposed by Anderson (2006), appeared to fit better with this criterion. However, I was troubled by the lack of outsider voices (interviews) and 'theoretical development, refinement and extension' (Anderson, 2006, p. 387), all prerequisites of an analytical approach. The more I progressed, the more disloyal I felt to AE as a method. I felt like I was producing a bastardised hybrid of conflicting methods. At one point, I was so frustrated that I changed my title to 'A Bastardised Autoethnography' so that I could continue to pursue the analytical route. I was trapped between 'hard social science and interpretive/imaginative/humanistic inquiry' (Bochner & Ellis, 2016, p. 30). I realised I needed a deeper and more nuanced understanding of AE, so I debated the principles of each for myself to challenge my preconceived ideas (Keleş, 2022). My quantitative history was pulling me back to scientific rigour.

Anderson (2006), who favours analytical approaches, suggests that AE is not the revolutionary non-traditional post-structural method Carolyn Ellis and Arthur Bochner claim. He argues that AE has roots in the realist ethnographic tradition, such as the Chicago School ethnographers who often had autobiographical connections to the groups they studied. For Anderson (2006), AE is 'traditional symbolic interactionist ethnography' (Anderson, 2006a, p. 387). Anderson (2006) looks back and extends John Lofland's (1995) work on analytic ethnography at a time when ethnographic researchers were an 'embattled minority railing against mainstream quantitative excesses and 'positivism' (Lofland, 1995, p. 34). Anderson (2006) positions analytic autoethnography as building upon but distinct from Lofland's vision of analytic ethnography. Anderson (2006) embraces Lofland's (1995) call for theoretical development grounded in data while arguing that AE brings a unique reflexive dimension by making the researcher visibly present as a full member of the researched group. Lofland (1995) suggests that an analytical element was introduced to ethnography to aid publication, which was an issue then. The expectation was a 'close-up and detailed, qualitative depiction of social life that strives to be analytic' (Lofland, 1995, p. 34). This method was referred to as naturalistic, theoretical, or analytic ethnography, the latter being the focus of Anderson (2006). The important thing to note is that analytic ethnographers strive to produce data that represents 'factual and analytic trueness' (Lofland, 1995, p. 47). The danger of this search for truth is, as Lofland (1995) suggests, dictated by whose truth we seek, and more often, this will be that of the powerful elite, producing an official version of reality, not a lived reality.

Anderson suggests that Caroline Ellis’s vision of emotive AE is constructed to prevent it from fitting into existing traditional methods of social enquiry, claiming that AE is ‘ethnographic work’ (Anderson, 2006, p. 375). For Anderson, ‘dialogue with informants beyond the self’ and ‘commitment to theoretical analysis’ are key features of AE (Anderson, 2006, p. 378). Research needs another perspective, ‘as a nexus for reflexive engagement,’ beyond the self and ‘to discern a broader potential range of cognitive, emotional, and behavioural orientations within the social phenomena’ (Anderson, 2006, p. 456). He argues that the dominance of Ellis and Bochner's vision of evocative autoethnography has ‘obscured recognition of the compatibility of autoethnographic research with more traditional ethnographic practices’(Anderson, 2006a, p. 375). For Anderson (2006), AE is not revolutionary because it aligns with and fits within more traditional ethnographic practices. Anderson (2006) aims to reclaim AE as a valid part of the analytic ethnographic tradition rather than yielding it entirely to the evocative/postmodern camp represented by Ellis and Bochner.

In response to Anderson’s paper, Ellis and Bochner (2006) critique Anderson's emphasis on developing theoretical understandings and generalisations from AE work, arguing that this misses the point of using stories to provide an embodied sense of lived experiences. They say that Anderson's conceptions of ‘analysis’ are too narrow and privilege traditional sociological analysis, neglecting to recognise how stories themselves can analyse and theorise. Stories provide an embodied understanding of lived experiences that traditional analysis cannot capture. The narrative form, characters, emotions, and dramatic plots allow readers to feel and experience the events being portrayed viscerally. For Ellis and Bochner, the very act of constructing a story is a way of making sense of and theorising about experience. The choices of what to include, how to structure the narrative, and what voices to represent are all forms of analysis and theory-building. Ellis argues that ‘If you turn a story told into a story analysed, as Leon wants to do, you sacrifice the story at the altar of traditional sociological rigour’ (Ellis & Bochner, 2006, p. 440). Ellis (2006) suggests that when emotions and the self are removed from AE, ‘knowledge and theory become disembodied words on the page and I lose connection’ (Ellis & Bochner, 2006, p. 431). Diluting the power of AE with the analytic writing that Anderson (2006) suggests turns AE into a form of research that it is not intended to be (Ellis & Bochner, 2006).

According to Anderson (2006), the main difference between autoethnography and traditional ethnography lies in the role and visibility of the researcher. Traditional ethnography tends to obscure or downplay the researcher's role and self-narratives, focusing more on observing and analysing others. For Ellis and Bochner, analytic AE, as suggested by Anderson (2006), emphasises developing abstract theoretical understandings, which misses the point of using evocative stories to provide an embodied sense of lived experiences. Ellis and Bochner defend AE as an arts-based genre focused on compelling, vulnerable narratives that evoke emotional experience and ethical consciousness rather than the traditional sociological analysis and generalisation that Anderson advocates. They see evocative AE as a distinct way of knowing that should not be compromised by realist ethnographic goals.

For me, it feels like Anderson (2006) is no longer arguing in favour of AE because he is championing analytic ethnography (Ellis et al., 2011; Keleş, 2022), and ‘ethnographers do not write messy vulnerable texts that make you cry’ (Denzin, 2006, p. 421). Anderson (2006) concludes his paper by ‘Othering’ evocative AE (Pursehouse, 2018, p. 421), suggesting that analytic ethnographers have shunned AE, resigning it to evocative researchers, referring to them as marginalised because they have rejected social science values (Anderson, 2006). There is an element of disdain or contempt for evocative/emotive AE researchers. A disdain shared by Paul Atkinson, Amanda Coffey and Sara Delamont, who refer only once to AE in their paper discussing anthropology and social sciences, implying that AE is weakening disciplinary boundaries, blurring the ‘distinctions between self and other, researcher and researched, stranger and friend, distant and near’ (Atkinson et al., 2001, p. 7). Anderson (2006) holds on to the reassuring past of ethnographic research to stabilise his vision of ethnographic enquiry (Denzin, 2006). Chang et al. (2012) conceptualise autoethnography along a spectrum. At one end of this spectrum is interpretation, the analytical and interpretive aspects, focusing on cultural analysis and the understanding of firsthand experiences. At the other end is narration, which emphasises the storytelling and narrative elements, allowing researchers to present their firsthand experiences in a more literary and evocative manner.

Later, as Ellis and Colleagues (2011) provided an overview of AE, they stopped defending it, suggesting it is a pointless and irrelevant argument: ‘Autoethnographers take a different point of view toward the subject matter of social science' (Ellis et al., 2011, p. 11). Ellis and colleagues (2011) are not conceited, burying their heads in the sand when they refuse to justify AE. Indeed, they recognise that the debate around 'what constitutes legitimate' AE research 'remains unsettled and contested' (Bochner & Ellis, 2022, p. 24). To suggest that ethnographers can tell a person's story better than the person under scrutiny may be somewhat of an oversimplification of Anderson's (2006) proposals. However, ethnographers have been accused of silencing many native voices, using only those that confirmed their predetermined theories (Buzard, 2003). Buzard asks, 'How many voices… are concealed beneath generalisations' and how many silenced voices long to be heard in ethnographic interpretations (Buzard, 2003, p. 63).

Dividing AE into opposing approaches, analytic/evocative, is in danger of generating a 'series of gendered dichotomies—heart/mind, emotional/rational, literary-poetic/analytical, personal/scholarly, descriptive/ theoretical [that] will be reinscribed within autoethnography' (Burnier, 2006, p. 416). Traditionally constructed as feminine, 'personal, emotional, literary-poetic, and descriptive knowledge' is pitted against the traditionally masculine scholarly work as 'rational, analytical, and theoretical knowledge (Burnier, 2006, p. 417). As Anderson (2006) attempts to silence the emotive and emotional self, it feels like another attempt to reintroduce binary opposition and silence marginalised voices and the lived experiences that contradict and challenge dominant narratives (Burnier, 2006). There is always a danger that emotive and analytic will merge into neither one nor the other, creating a compromising hybrid adopting a pluralist approach defined as split AE (Rogers-Shaw, 2020), braided AE (Tedlock, 2013) and double AE (Doloriert & Sambrook, 2012). This approach is seen as a positive move where identity is discussed analytically and evocatively (Doloriert & Sambrook, 2012). However, for me, this unification distorts the 'auto', 'ethno', and 'graphy', ignores the starkly contrasting approaches, and the value of AE is lost (Buzard, 2003). Eventually, there is a danger that the original AE (emotive) will be quashed under the 'full weight of traditional social scientific qualitative inquiry' (Burnier, 2006). The powerful elite will again silence the marginalised voices (Lofland, 1995).

Denzin (2006) argued that those favouring analytic AE are afraid to relinquish the past (traditional academic expectations). The space I was very much occupying for some while;

however, I had to let go of my scientific and doctoral assumptions and consider my questions, aims, and objectives. I claim to be challenging ableist discourses; adopting Anderson's approach meant that my stories were dictated by the powerful elite, producing an official version of reality, not my lived reality (Lofland, 1995). My thesis is a narrative that presents my vulnerable stories to evoke an emotional experience, ethical consciousness, understanding and sensemaking. Evocative AE, as proposed by Caroline Ellis and Arthur Bochner, gives a voice to marginalised groups to represent themselves and share their truths directly through narrative as opposed to being portrayed by others. It is well suited to exploring and portraying sensitive, emotional, and complex life experiences. As Denzin suggests, 'In writing from the heart, we learn how to love, to forgive, to heal, and to move forward' (Denzin, 2006, p. 423). Denzin uses evocative AE and concludes, 'Today I want to write my way into and out of this history, and this is why I write my version of autoethnography' (Denzin, 2006, p. 426). Denzin (2006) shares my newly acquired vision of AE.

Evocative / Emotive Autoethnography

I do not search for the truth about disability, bullying or education that will explain or justify what happened to me as a child. As Lofland (1995) points out, these 'truths' are often dictated by the powerful elite, producing an official version of reality, not a lived reality. I was not able to embrace Anderson's (2006) vision of AE, as I was not collecting data beyond the self. I cannot entirely agree that AE needs another perspective. I later justify this by discussing (Mizzi's (2010) multivocal theory of research. I, too, wonder how many voices have been silenced as disabled lives have been interpreted or misinterpreted by well-meaning academics (Buzard, 2003). I have attempted to separate my emotive and emotional self from the research, and I realised that it was not possible. I found I was silencing my marginalised voice and my lived experiences and replacing it with a noncommittal academic voice. The academic voice I needed would contradict and challenge dominant narratives (Burnier, 2006). I was sacrificing my story, my lived reality, at the 'altar of traditional sociological rigour' (Ellis & Bochner, 2006, p. 440). I have devoted some time, or more sacrificially, word count to this debate. Such debates have been conducted in many, if not all, autoethnographies, and all have chosen a path that best suits their research. From the autobiographies I have read as presentations for doctoral evaluation, many have used a hybrid of both approaches and combined AE in a mixed methodological approach. As I previously stated, there is a danger that the original AE (emotive) will be quashed under the 'full weight of traditional social scientific qualitative inquiry' (Burnier, 2006). The powerful elite will again silence the marginalised voices (Lofland, 1995). For these reasons, I chose evocative autoethnography.

As an autoethnographer, I use lived experiences ('auto') to describe and interpret ('graphy') experiences, cultural texts, practices, and beliefs ('ethno') (Ellis et al., 2011, p. 1). Evocative autoethnography allowed me to communicate the emotional injustices attached to education (Ellis et al., 2018), enabling the reader to establish meaning and connect (Bochner, 2000; Ellis & Bochner, 1996). Evocative AE reflects the emotive nature of life's messiness and its unpredictability (Pearce, 2020). My life is, and was, messy and unpredictable, so it makes sense that my research would follow the same path.

I use evocative AE to provide a counter-narrative that challenges the status quo, where violence against disabled children in schools is becoming the norm, by offering a more profound insight (Choi, 2013; Couser, 2016). Although my stories do not claim to be historical and factual, they have allowed me to offer a powerful insight into educational violence (Cassell et al., 2018):

> 'Evocative stories activate subjectivity and compile an emotional response. They long to be used rather than analysed; to be told and retold rather than theorised and settled; to offer lessons for further conversation rather than undebatable conclusions; and to substitute the companionship of intimate detail for the loneliness of abstracted facts' (Ellis & Bochner, 2000, p. 744).

Reading this powerful quote made me realise how important the stories of those who live in the shadows and the margins of society are. I knew it was time to change direction, live my research through the emotions within my stories, and be present in the research, letting go of the authoritative, objective, and neutral research of my past (Doty, 2010).

Limitations of AE

AE is accused of being the academic underdog of research methods (Gamboa, 2023) and has been well-criticised for being unethical, subjective, and a lack of analytical rigour (Delamont, 2009;

Feldman, 2003; Holt, 2003). For others, the versatility of AE is its appeal (Denzin, 2006; Doty, 2010; Ellis & Bochner, 1996; Gale, 2020). AE is used across many disciplines and debates on many subjects, interpreted and reinterpreted as researchers embrace or battle with subjectivity and the vagaries of reality. While autoethnography offers valuable insights into firsthand experiences and their cultural meanings, its limitations need careful consideration and strategies to address potential issues of subjectivity, generalisability, ethics, and reliability (Chang, 2016). In this section, I discuss the limitations of AE and how I resolved or addressed them. I begin by discussing ethics, as this is one of the most criticised (Delamont, 2009; Tolich, 2010) and the considerations when carrying out autoethnographic research.

Ethics

Ethics is one of the most contentious issues around AE as it is not consistently subjected to ethical review boards (Adams et al., 2021; Delamont, 2007). In my case, the University of Sheffield's ethics committee (Appendix 1) granted ethical approval. However, ethical responsibilities do not stop there. Tolich (2010) discusses reading emotive/evocative AE research and a feeling of voyeurism, and he wanted reassurance that ethical protection had been given to all involved in a way to alleviate his discomfort. Tolich (2010) argues that while evocative autoethnography can be a powerful method, it needs much stronger ethical grounding and guidelines, especially around informed consent and protecting the rights and autonomy of others. He critiques the work of Laurel Richardson's Last Writes (2007), Carol Rambo in 'Handing IRB an Unloaded Gun' (2007), 'Telling Secrets, Revealing Lives,' Ellis (2007), and accuses them of violating ethical principles by obtaining 'passive consent rather than being an active, anticipatory consent in line with the position statement on qualitative research and internal review boards (IRB's) (Tolich, 2010, p. 1603).

Delamont (2009) concurs with Tolich, suggesting that autoethnography is 'almost impossible to write and publish ethically' (Delamont, 2009, p. 59). Citing the personal works of Ronai's (1996) published 'My Mother is mentally retarded' and Clough's (2002) 'who published poems about a Lover's Genitalia' (Delamont, 2009, p. 59) questioning their ethical approaches. She suggests that readers will always wish to read autoethnography as an authentic and consequently 'true' account of the writer's life. Therefore, the other actors will be whatever disclaimers or statements about fiction are included, identifiable and identified (Delamont, 2009, p. 59). She argues here that the conventions and assumptions around reading AE make it almost impossible to disguise or protect the identities of other people in the research.

Hung (2006), on the other hand, argues that it is our ethical responsibility to voice, preserve and transmit personal testimonies and memories about traumatic pasts. She further suggests that cultivating an ethical relationship with memory is essential for reconstituting personal and collective identities disrupted by trauma (Hung, 2020). For me, the ethical dilemma was around ownership of my life stories, stories that other people had imposed on me. Ethically, AE demands that the author's voice be heard; the ethical dilemma arises in balancing the right of the author to tell their story and the potential harm that could befall those described in the narrative (Edwards, 2021). Adams (2008) problematises the notion of fully 'owning' autoethnographic narratives. Adams (2008) highlights the complexities around voice, representation, and the contingencies involved in constructing personal narratives that implicate others. He calls for a contextual, reflexive approach to narrative ethics rather than prescriptive rules around story ownership. Ethical and moral considerations were imperative and reflected upon throughout my research (Adams, 2008; Bochner, 2000; Lapadat, 2017; Tolich, 2010).

However, no set guidelines can be universally applied to all situations, 'other than the vague and generic 'do not harm' (Ellis, 2007, p. 6). Ellis (2007) offers ethical guidance for those new to AE, and she argues that researching intimate others requires a situational, case-based approach to ethics focused on care, responsibility and upholding interpersonal bonds beyond just procedural guidelines. Relational ethics demands continual reflection on impacts and ethical choices throughout the research process. Advising researchers to 'think of the greater good of their research—does it justify the potential risk to others' (Ellis, 2007, p. 24). Even when thinking of the greater good, the author must accept that their rights as a researcher do not overrule or outweigh the rights of others (Levinas, 2009). It is impossible to contemplate ethical issues of the self without understanding how the self is connected to Others (Roth, 2008). To address ethical concerns, 'I engaged in ongoing reflexivity throughout the research process' (Ellis, 2004, p. 137), critically examining my motivations and the ethical implications of my choices as a researcher. Integrity and respect were my drivers throughout. Cooper & Lilyea (2022) emphasise that an ethic of personal care, in addition to a relational ethic towards others involved, is crucial for autoethnographers.

Ethical considerations of the self are essential for surviving autoethnography (Pearce, 2020). By its auto/biographical nature, it can reveal ‘unresolved parts of ourselves’, and this vulnerability can be distressing and negatively impact mental health (Cooper & Lilyea, 2022, p. 204; Sikes & Hall, 2018). The intimate nature of revealing traumatic lived experiences has the potential to cause secondary trauma as personal experiences are re-lived and retold (Pearce, 2020). Such undertakings should not be ill-considered (Denzin & Lincoln, 2011). The process, especially for marginalised researchers, evokes emotional turmoil so intense that they alone should not be responsible for their survival (Pearce, 2020). I underestimated the emotional trauma of this method. I was late in acknowledging the importance of self-care and emotional safety. Whilst I had a pre-arranged support system to tend to my well-being and help me cope with difficult emotions (Cooper & Lilyea, 2022), I found it hard to make contact as a distance learner with personal barriers. Unfortunately, due to my lack of engagement with self-care initially, the personal costs became too harmful, and I almost abandoned my research. Eventually, I engaged in talking breaks with close colleagues, my father, and my husband, and emotional reflexivity (Pearce, 2020) was a kind of debriefing (Sikes & Hall, 2020). I underestimated the power of self-study, and having something positive to share from harrowing stories gave my research and life a retrospective purpose (Ellis & Bochner, 2000). If I had one piece of advice for autoethnographic researchers, it would be to engage with self-care from the beginning.

Further criticisms

Sara Delamont (2007) suggests AE is ‘essentially lazy – literally lazy and also intellectually lazy’ (Delamont, 2007, p. 2). Having spent four long and difficult years on my autoethnography, I can personally refute any claim that AE is a lazy pursuit. It is probably the most challenging piece of research I have ever undertaken. Stephens and Griffin (2019) argue that dismissing AE as ‘intrinsically lazy is reductive’, oversimplifies and fails to capture the full complexity of AE research (Stephens Griffin & Griffin, 2019, p. 10). This oversimplification does not fully grapple with the nuances, challenges, and potential benefits of this research method. If one has never undertaken such a study, it would be hard for one to know the work involved.

Delamont (2009) further argues that an AE researcher overloads their research with emotions. As a result, the reader learns only about the person and not the culture they are a member of (Delamont, 2009). I would argue that AE is a qualitative research method that combines autobiographical narratives with cultural analysis, so it can indeed be culturally applicable. Autoethnographers critically examine their own experiences and positionality within a cultural context. AE, therefore, offers a means to explore and understand cultural phenomena from an insider's perspective (Chi et al., 2022; Christians, 2007; Denzin, 2003; Dissinger, 2019; Manning & Adams, 2015). AE is widely acknowledged as 'effective for transformative intercultural learning' by reflectively writing or telling personal cultural stories (Chi et al., 2022, p. 521). The process of reflecting on and articulating cultural influences, assumptions, and worldviews leads to a greater self-awareness and critical examination of the researcher's cultural lenses. Engaging in this reflexive introspection about our cultural conditioning can enable perspective shifts and transform how the researcher understands themselves, others, and intercultural interactions (Chi et al., 2022). Through the process of AE, the researcher critically examines and questions their own cultural background, prejudices, and preconceived notions by engaging in deep self-reflection. This level of self-interrogation produces more ethical, contextualised and insightful research, especially for understanding cultural experiences (Dissinger, 2019). Dissinger's (2019) research illustrates how interrogating the researcher's cultural positionality through self-reflective methods can shed light on cultural gaps, biases, and challenges. Each autoethnographer functions as a 'universal singular', representing their own unique and social experiences of a particular historical moment or cultural context (Denzin, 2006, p. 268). Denzin (2006) further argues that the autoethnographer engages in 'performative cultural politics' that challenge dominant cultural narratives and ideologies through their embodied experiences, which allows for the exploration of cultural tensions. Again, the cultural application of my AE was important to me. I used my positionality and experiences as an entry point to critically examine the sociocultural differences between 'normal' and 'disabled' lives within historical, political, and theoretical frameworks.

Similar to Delamonts (2009) accusations of AE as self-indulgent, (Sparkes, 2000)was told that AE was 'an academic wank' (p.10), in other words, hedonistic, narcissistic navel-gazing (Holt, 2003;

Silk et al. 2017; Soyini Madison, 2006). Holt (2003) argues that such accusations are due to the 'misapprehensions of the genre due to a mistrust of the work of self' (Holt, 2003, p. 25). Ellis and Bochner (2000), on the other hand, argue that claims of navel-gazing are used as an attempt to strengthen ethnographic dogma to resist change. Carroll (2016) also suggests that such claims are driven by the 'fortress around positions of power which hold claims of ownership, superiority and authorship' through scientific objectivity (Carroll, 2016, p. 256). Holt (2003) advocates for developing appropriate criteria to evaluate autoethnographic work on its own merits rather than dismissing the entire genre as narcissistic or self-indulgent. Of course, AE researchers may become self-absorbed and emotionally focused during the research, which could lead to a 'culture of inflated self-importance' (Edwards, 2021, p. 4). However, this is not isolated to AE; it is a journey many researchers have to traverse when conducting social research (Adams, 2017).

Finally, I consider generalisability. Ellis and Bochner (2000) suggest that although our lives are unique, they are also generalisable, as we inhabit few institutions and cultures. They argue that the reader will determine if 'it speaks to them' and therefore check the generalisability of the stories. In other words, 'it brings felt new from one world to another' (Ellis & Bochner, 2000, p. 751). I consider my AE in line with Marin's (2022) a 'contribution of the academe to the general well-being of society' (Marin, 2022, p. 94). As I have looked back over the years, I recognise myself in the literature. So, whilst I thought everything that happened to me was my 'fault', the literature tells me that my life was predictable (Cohen, 1962; Goodman et al., 1963; Jordan, 1962; Lister, 1970; Pringle, 1964; Richardson, 1970; Richardson et al., 1964; Schechter, 1961; Sharrard et al., 1969; Tizard, 1966) maybe life stories are, therefore, generalisable.

To conclude this section, I discuss the last criticism, the lack of academic rigour (Atkinson et al., 2001; Delamont, 2007, 2009). I will discuss how I have addressed these criticisms to ensure academic rigour whilst remaining faithful to the method. Traditional criteria for establishing rigour and trustworthiness in research, such as validity, reliability, credibility, and transferability, have been criticised by some autoethnographers as too closely resembling objectivist criteria and not suitable for autoethnography's subjective nature (Bochner, 2000; Denzin, 2006; Ellis, 2009; Gannon, 2006). They argue against any predetermined criteria at all. Other autoethnographers have proposed alternative criteria more in line with autoethnography's goals, such as aesthetic merit, evocative power, resonance with readers, and ethical considerations (Holt, 2003; Richards, 2008).

Academic Rigour

When the author tries to be too academic, sticking to notions of scientific rigour, the personal voice is sacrificed (Dauphinee, 2010). Academics are trained to research objectively, and it is difficult to leave this training behind and striking a balance is challenging (Doloriert & Sambrook, 2012). As qualitative research evolves, so do discussions around academic rigour and scientific accountability (Le Roux, 2017). There is much debate and wide-ranging guidelines that question what research should or must contain to qualify as genuine AE (Ellis, 1999; Ellis & Bochner, 1999; Feldman, 2003; Hamilton et al., 2009). One of Anderson’s (2006) central arguments was that evocative AE is not academically rigorous. AE is not a traditional research method, so it cannot be subjected to conventional measures of academic rigour (Ellis & Bochner, 2006). I feel I have not relied on AE to dilute my responsibility to rigour; without rigour, ‘research is meaningless’ (Le Roux, 2017, p. 195). AE presents ‘Graphy (the application of the research process)’ as the rigour of the research (Wall, 2006, p. 39).

Establishing the validity of autoethnography can be challenging due to its subjective and personal nature. The research process and reporting should demonstrate ‘verisimilitude, plausibility, trustworthiness and… permeated by honesty’ (Le Roux, 2017, p. 204). Feldman (2003) argues that validity is crucial because self-studies have moral and political implications that can affect practice and policies. The validity and trustworthiness of AE rely on the aesthetic merit and resonance of the autoethnographic writing and how compellingly it represents the author's lived experiences and cultural meanings (Rolfe, 2006). By engaging in rigorous self-reflection, critical analysis, and interpretation of my experiences, I have actively addressed the criteria for validity (Roberts et al., 2019). I have examined my positionality, biases, and assumptions, as well as situating my experiences within broader cultural, social, and theoretical contexts by including a literature review and rich analysis (Feldman, 2003; Rolfe, 2006). Trustworthiness emerges from my reflexivity, the quality of my storytelling, and the reader's assessment of its credibility and cultural insight based on the evidence I present (Rolfe, 2006). Using a structured analytical technique, such as Braun and Clarke, and philosophically grounding the analysis also contributes to demonstrating that I have been rigorous. Autoethnography's transferability, I would suggest, lies in its ability to extract knowledge from my experiences to facilitate personal and professional growth, making the insights transferable to other contexts (Roberts et al., 2019). Autoethnography becomes transferable when the researcher moves beyond just describing personal experiences to systematically analysing how those experiences relate to shared cultural processes, using conceptual tools and theoretical frameworks (Tsuchimoto, 2021).

The criticisms of AE, as discussed here, all point out not only the shortcomings of AE but also points to be mindful of when conducting this method. Some would say they are occupational hazards (Ellis & Bochner, 2000; Le Roux, 2017). When considering this method of research, I did not dismiss or ignore these criticisms. Critically engaging with and addressing them appropriately, I have strengthened the validity, reliability, and ethical integrity of my autoethnographic study while also contributing to the ongoing discourse and development of this research approach. Addressing criticisms prompted me to provide thick descriptions and rich contextual details to improve the transferability of my findings. Acknowledging and reflecting on my positionality, biases, and subjectivity throughout has evidenced that academic rigour and ethical procedures were followed. AE’s strength lies in its ability to provide rich, nuanced insights into personal experiences and their broader cultural contexts. By embracing subjectivity, I was able to offer a unique perspective and a deeper understanding. AE’s ability to assert the epistemic rights and authority of disabled people and to construct knowledge from their own lived realities rather than being confined to dominant able-bodied narratives reassured me that it was the correct method.

Participant and Participant Researcher

During my school life, I identified as ‘normal’ despite a visible disability; what I mean by this is that at no point was I told I was disabled. I was sick or known as the ‘poorly one.’ So, I present the memories of a ‘normal’ child, failing to understand disability and difference. My participant’s voice was this child co-constructed by the many voices of the privileged, social norms, doctors, educators, family, and those who dictate social acceptance (Wertsch, 1991). The child’s voice then merges with the reflexive adult I became, offering an insider perspective. This combination creates a cohesive life story, adding context to the events experienced as a child.

To understand who I am and how I am positioned in the research, I will now discuss how I was affected by the violence I endured. Disabled children are socially marginalised (Romstein, 2015) and growing up, I felt the loneliness of this rejection. To protect my childhood self, violated and beaten, my mind fragmented and was soothed by the voices in my head, my imaginary friends (Dorahy et al., 2014). One by one, they joined me, usually after an overly traumatic event; one of them would take over whilst I rested. These periods of amnesia would often get me in trouble as I failed to recall what happened during this time. Eventually, my childhood imaginary friends who offered unconditional friendship and love were medicalised and labelled. My father was told I had epilepsy, multiple personality disorder and later dissociative identity disorder (DID), post-traumatic stress disorder (PTSD) and obsessive-compulsive disorder (OCD). DID is often linked to severe childhood trauma (Dell, 2006; Dorahy et al., 2014; Lilienfeld et al., 1999). There are many symptoms attached to DID; the ones I had were voices, amnesia, depersonalisation, visual hallucinations and withdrawal (Dell, 2006). An adult-centric ideology of normative development underpins these diagnostic labels (Holt, 2004), relegating my long-term imaginary friends to the realms of mental health issues.

I mention my DID here as my journey makes no sense without it. I have struggled throughout my thesis, plagued by differing writing styles, which would usually indicate plagiarism. In my case, it is a sign that not all of us are academics, and we (my personas) do not always agree on what information should be shared or how we (my personas) present it. I would read chapters as though I were reading a research paper produced by someone else. As I have retold stories, I have never accounted for their (my persona's) views in my ethical consideration, and some were enraged and continually tried to sabotage my work, causing it to be written and rewritten many times. I am a logical person. I know these are not people living in my head; however, they are genuine friends who help me when needed and sometimes when not. These are the many lenses I use to make sense of my life and offer a unique insight into bullying disabled children in the English education system.

Not Just One Voice

Life traverses many spheres, and the external voices we encounter daily (political, social, and personal) are diverse and impactful. By recognising the co-constructed and contested nature of my personal narratives, I acknowledged the complex interplay of social, cultural, and institutional forces that have shaped my understanding of my history and identity (Wertsch, 1991). As Holt (2003) argues, 'people do not accumulate their experiences in a social vacuum' (Holt, 2003, p. 25). Determining whose voice speaks at any given time within a narrative is not always as it might first seem (O'Dell et al., 2012). Mizzi (2010) defines this as multivocality, the multiple voices within research, suggesting that a multivocal approach places the narratives of the self into a social and political context to provide an objective understanding of events (Mizzi, 2010). AE is engagement, and this multivocal methodology of the self-embraces marginalised voices whilst recognising the multiple parts of a single voice (Bochner, 2000).

The lack of research participants in AE leads to criticism, and there are claims that the credibility of research emanates from the voices of the stakeholders, not just that of the researcher (Anderson, 2006a; Diwany, 2020; Wells et al., 2020). However, there is 'no single and temporally fixed voice that a researcher possesses' (Mizzi, 2010, p. 8), and multivocality provides representational space for plural narratives (Mizzi, 2010). Embracing the many voices I use, multivocality offers another layer to my research, acknowledging that the voice was not always that of me as the researcher and the researched. O'Dell et al. (2012) refer to this as 'multi-voicedness', which adds depth to AE research. I, 'the self,' define a lifetime of vocal collaboration (McAdams, 2019). Accommodating this 'plural consciousness' has been complex and has enriched the analysis and narratives (Lee, 2019).

To conclude my discussion on autoethnography, I refer to Hayler (2010), who suggests that whilst we live our lives moving forward, understanding comes from hindsight. While our memories link us to the past, they are not always accurate reflections; they are shaped by unconscious selections, which, as a process, gives symbolic meaning to AE. Graham Ogilvie captures the essence of AE (Hayler, 2010, p. 6). This picture demonstrates how our memories link our past and our present selves to understand who we are and how we became who we are. Autoethnography puts all of this in a cohesive order to see beyond us and our place in society and actively change our futures.

Figure 1 The journey is all about linking.

My AE provides an ‘embodied sense of the lived experience of Otherness’ (Tsalach, 2013, p. 79). It is not a ‘happy-ever-after narrative’ (Richards, 2008) but a ‘methodology of the heart’ (Badley, 2022, p. 73). They are stories and narratives of human experiences that challenge what is known and accepted. I would argue that such collective texts can potentially change the world (Badley, 2022). Challenging the beliefs of a dominant group using autoethnography is complex and often leads to further discrimination or research criticism (Worley, 2021). Such criticisms initially worried me; however, I embrace ‘epistemic disobedience’ (Mignolo, 2009, p. 160). Mignolo (2009), discussing colonialism, calls for ‘epistemic disobedience’ that disobeys the active suppression and devaluation of non-Western ways of knowing. It asserts the epistemic rights and freedom of formerly colonised people to construct knowledge from their perspectives. I found this quite poignant and relatable to my research. So, epistemic disobedience, for me, means disobeying the dominant ableist epistemology that devalues disabled knowledge and experiences. Creating my anti-ableist autoethnography enables the epistemic reconstruction of disability from my lived perspective. I am adding my narratives to those of Allsopp (2019), Castrodale & Zingaro (2015), Couser (2016), Loveland (2017), Ozougwu (2023), Patsavas (2022), Shah (2022) and others who challenge the raison d’etre of disability. Such research aims to generate anti-ableist knowledge systems that affirm diverse embodiments and ways of being rather than treating able-bodiedness as the universal norm. Using the principles outlined by

Mignolo (2009) from the perspective of disability studies, I am affirming the epistemic rights of disabled people to generate knowledge from a lived perspective.

Evocative/emotive researchers ask the reader to share their emotions as the story’s moral evolves, but most importantly, to remember and share (Ellis & Bochner, 1996). It can, of course, be an emotional journey for the reader. As an insider and research participant, I present emotive stories for self-reflection. As a researcher, I make connections between these lived experiences and reflexive analysis to promote cultural understanding. As a researcher/participant, I make sense of my lived experience through interpretation. I have used evocative AE because it is a method that allows me to make sense of my lived experience within the culture I am ‘living, being, doing, and knowing’ (Keleş, 2022, p. 2027). I realised these stories could not be told devoid of emotion nor generalised. If we research only to generalise, society’s crucial nuances may be lost (Adams, 2017; Adams et al., 2014).

The Value of a Storied Life

Storytelling reconstructs our lives to provide rich experiences, and narratives ‘provide a valuable methodology’ (Woodhouse, 2011, p. 213). I have discussed autoethnography as a method of transforming stories into data to create a narrative. Now, I will justify the value of storytelling and stories. Events, encounters, and moments all shape our life stories, all woven together to create a unique and meaningful existence. The value of a storied life lies in its ability to provide depth, wisdom, and a profound connection to the human experience in an informal way (Woodhouse, 2011). Woodhouse (2011) considers the use of stories to teach in university education and argues that storytelling is a powerful pedagogical tool that engages children's emotions, imagination, and desire to learn by connecting ideas to human experience and life's inherent value. I use my stories to teach, share knowledge, and demonstrate that my disabled life is meaningful, as well as to foster personal growth, cultivate connections, preserve my wisdom, and inspire resilience. Our stories have the power to shape our lives, touch others, and leave an indelible mark on the world. I use storytelling as a way of humanising what I want people to learn (Woodhouse, 2011). The lack of historical narratives regarding disabled children is discussed in the ‘research gaps’ section, so I offer my historical experiences not only to challenge but to lay claim to a disabled history.

Whitburn and Goodley (2019) go so far as to suggest that theories are the stories that we 'tell about the world' and 'enlivened' by the stories of others (Whitburn & Goodley, 2019, p. 415). To substantiate this claim, they weave together theories from disability studies and narrative accounts to explore the potential of disability to challenge exclusionary curricula and pedagogies. Combining Garland-Thomson's theory of disability as a way of 'rethinking how we might engage in new ways with and making sense of the social world' (Whitburn & Goodley, 2019, p. 415) with Grummet's (1981) definition of curriculum as 'the collective story we tell our children about our past our present and our future' (Grummet 1981 p. 115 cited in Whitburn & Goodley, 2019, p. 417). They identify how disability is represented or erased in educational narratives. I use stories to breathe life into theories and assert the epistemic rights and authority of disabled children to construct their knowledge rather than being subjugated to dominant able-bodied narratives (Lindner, 2007; Mignolo, 2009; Whitburn & Goodley, 2019)

Constructing a personal narrative identity is a reflexive process of making sense of life experiences. Constructing personal life stories through narrative is tied to cultural modernity and individualism, the conception of the self as a 'reflexive project' that needs to be actively shaped and understood, challenging deficit-based narratives rather than being defined by external authorities (McAdams, 2019, p. 13; Walker et al., 2020). Walker et al. (2020) demonstrate how this is possible as they construct powerful counter-narratives that challenge the stereotypical deficit model of disability, using storytelling as a vehicle for cultivating passion, inclusive communities, and positive social change. Constructing a narrative identity provides me with a sense of temporal coherence, unity, and purpose as I bring to life my reconstructed past in the hopes of a better future. Schechtman (2007) argues that our 'narrative self-conceptions' draw from both subjective experiences and an objective understanding of the observable facts about our lives and the world. The narratives must adhere to reality to a large degree (Schechtman, 2007, p. 100) to capture the emotional undercurrents of experiences (Woodhouse, 2011).

I am handing down my stories to keep them alive, tell the story of a bodymind at the core of socially constructed 'Otherness,' and challenge the normative and ableist logic of deviance (Tarvainen, 2019). I have defined ableism in the introduction. I now consider how ableism creates an Othering where disability is narrated as an unwanted difference, internalising oppressive narratives. This ableist lens is one of inability or tragedy (Tarvainen, 2019). I have offered a narrative of living that Othered life, a life of resistance to provide alternative narrative resources in the ‘cultural stock of stories,’ creating a more inclusive narrative around disability by consciously resisting ableist narratives and constructing counter-narratives centred on rights, lived experience, and disability pride (Tarvainen, 2019, p. 297). Although my journey of acceptance and disability pride has been an exceptionally long one, I would suggest that my thesis enabled this transition to take place.

Storr (2020) provides insights into the science behind storytelling and why stories are so powerful and meaningful to humans. It also enables an understanding of human behaviour, motivations, and the ‘why’ behind people's actions in a reflective manner. Beliefs, values and unquestioning faith in our cultural institutions force us to hold onto the safety of the status quo, in this case, existing narratives, that desecrate disability (Castrodale & Zingaro, 2015; Gallo, 2019; Gupta & Jha, 2022; Storr, 2020). I use my stories to enlighten and allow the reader to challenge the status quo that accepts the bullying of disabled children as an acceptable stage of development, if you will, part of life. I recognise that when confronted with a flawed reality, people may resist justifying and protecting their existing knowledge (Gallo, 2019; Storr, 2020). We are reassured by the accuracy of our vision of the world (the status quo) and fight to defend the beliefs we have used to form our identity and our values (Storr, 2020). However, my stories have made the status quo uncomfortable by presenting alternative knowledge and a different (lived) reality.

Stories and storytelling are proven methods of successful data/information transmission (Andrew & Rossignol, 2017; Gupta & Jha, 2022; Martinez-Conde et al., 2019) and offer a way to disseminate research findings in an accessible format. Storytelling, which draws the listener in and creates emotional connections, is, although not a new method of persuasion, an accessible format (Martinez-Conde et al., 2019). Adopting a ‘life history approach’ to provide a ‘natural framework for understanding’ my life (Goodley, 1996, p. 336) ‘The life history, on the other hand, has been appreciated as a more direct, less-jargonised and insightful method of representing the individual’ (Goodley, 1996, p. 336)

While storytelling is a universal human capacity, the modern notion of constructing an explicit personal narrative may be more tied to Western cultural conceptions of selfhood. In some cultures, personal narratives may be less emphasised compared to highlighting moral lessons, social roles, or historical events (McAdams, 2019). I recognise that my stories relate to Western cultures and that one person's stories may not have the power to change minds, modify entrenched perspectives and overcome biases. It is always possible that stories can reinforce flawed models of reality as much as illuminate 'truth' (Storr, 2020). However, I have argued that presenting lived experiences has the power to at least provoke questions and, at best, challenge a person's mindset. While a precise, universal definition of truth remains elusive, the pursuit of truth through empirical investigation, logical reasoning, and open discourse remains a fundamental goal across various fields of inquiry.

I recognise the complex and multifaceted nature of reality and truth. Stories are created, co-created, flourished, and embellished, but there is always an anchor, a memory, which unifies each retelling. Memory is 'an active process of 'working through' past experiences' (Bochner & Ellis, 2016, p. 251). They further suggest that it is not a passive retrieval of stored facts. Memories are shaped by the present context and purpose for remembering. Truth in autoethnography is not a literal, historical truth but rather a narrative, emotional truth. The aim is honesty, authenticity and meaningfulness in interrogating the past (Bochner & Ellis, 2016).

Fragments of memory anchor us to our childhood, trauma, places, and people. For me, it is trauma that has reconstructed my self-identity and initiated my storytelling (Hung, 2020). Hung (2020) suggests that this retelling is to seek justice or forgiveness. I, however, would suggest it is for understanding and sensemaking. Our narratives give 'meaning to experiences' based on our memory, which in turn 'retrieves history, the past, present, and future are intertwined in the moment of telling the story' (Abrahão, 2012, p. 36). Memory is not solely for recollection; 'it needs something from beyond the mind' (Hung, 2020, p. 1369).

Ricoeur (2006) suggests that the ambition of memory is always to be truthful. However, it is 'forgetting the uncomfortable truths of oppression and exploitations that should gnaw at consciences' (Clark, 2010, p. 4). Memories of trauma can remain untold until the person feels safe or supported. As a child, I refer to the ‘voice’ that kept me from reliving the trauma as my memory keeper, part of my dissociative identity disorder. The power to release these memories helps to make sense of happenings so that they become ‘teaching moments’ and we learn to prevent and keep ourselves safe (Hung, 2020). I would suggest that ‘memory is an active process of the creation of meaning’ (Abrahão, 2012, p. 30). In my search for sensemaking, I found reliving my personal stories challenging as they forced me to relive the visceral elements of my story, ‘especially the fear, anxiety, humiliation, anger, rage, indignation and disgust’ (Vickers, 2007, p. 223). Violence and a violated childhood are sensitive subjects, and reliving these uncomfortable memories can re-traumatise_(Storr, 2020; Vickers, 2007). I refer to this as a limitation of storytelling because oppression and violence limit the stories that need to be told the most.

As a disabled person, I find it difficult to articulate my pain, emotions and the challenges I have faced, and this is not uncommon (Groinig, 2023). Stories have provided me with a platform that separates the academic self from my enforced ‘vulnerable,’ disabled core. Stories are ingrained in our lives as they traverse times and ‘landscapes of consciousness’ (McAdams, 2019, p. 1). My life has been handed down to me through the stories of my parents; often, as a family, we share stories of memories. It was inevitable that I would retell my contested childhood through stories. I used the stories that lurk in the shadows of a painful past to evoke strong emotions of shame, fear, and humiliation because these stories make us human, and it was important to me that I used my stories to re-humanise disability (Storr, 2020). I question whether we can re-humanise a person who has never been recognised as human in the first place. However, these are semantics, and I do tell my stories from the standpoint of a disabled human. The bodymind and human acquisition are the ‘crux of ableism’ and can be ‘understood as epistemic injustice’(Tarvainen, 2019, p. 291)

Once stories are documented, they enter another emotional and literary permanence that ‘cannot be called back’ (King, 2008, p. 10). Many of my stories are too painful and explicit, enshrined in secrecy, and I choose not to share, while others I more willingly share (Tarvainen, 2019). I tell these stories to claim my disabled identity, ‘Story is central to human understanding - it makes life liveable because, without a story, there is no identity, no self, no other’ (Lewis, 2011, p. 505). My stories are not the emotive outpourings (Anderson, 2006) of a boring academic in search of pity (Delamont, 2009); they are told by a disabled woman with a strong and powerful voice to heal and challenge the status quo of ableist violence through understanding (Farrant, 2014; Tolich, 2010).

I chose storytelling to write myself into history to draw the reader in and create an emotional connection that allows me to persuade the reader of alternate ways to look at disability (Martinez-Conde et al., 2019). I have argued that stories are a powerful tool that impacts both the storyteller and reader psychologically, cognitively, and emotionally, making them an effective mode for learning, teaching, and fostering human connections (Gupta & Jha, 2022). I use my stories to enable the reader to connect with me on a more personal level and minimise sociocultural barriers (Gallo, 2019). Storytelling, for the reader, develops empathy, social connectedness, and mutual understanding. For me, it has facilitated a deep level of self-reflection. This narrative style of sharing knowledge of a lived experience leads to better retention of information (Gupta & Jha, 2022).

Not everyone recognises stories as a valid academic data source (Holt, 2003). However, autoethnography's creative underpinnings defy traditional rules and expectations, enabling the use of stories (Chang, 2016; Chang et al., 2012). Autoethnography (AE) resists ableist curtailing, which tries to silence disabled voices and promotes understanding (Tarvainen, 2019). I have discussed how memory and 'truth' are crucial to storytelling; the same can be said for autobiographical research. This disjuncture between truth and memory, Ricoeur (2006) suggests, is the difference between history and life stories (Ricœur, 2006). However, as he previously stated, and the stance that I adopt for my AE, the 'narrativisation of one's existence creates a human identity as a life in search of its own history' (Ricœur, 1990, p. 180). Analysing a narrated 'fact' is about knowing that a selective memory has generated it. This autoethnographic approach breaks with a more traditional form of data and may not be seen as valuable (Abrahão, 2012). However, just like all research, AE relies on the moral fortitude of the researcher. Both AE and personal stories as data, as a form of qualitative research, are contentious topics with proponents and critics. I have made a case for stories as data. In the next chapter, I make a case for AE. AE facilitates self-study within a cultural context 'in a scientific, active, and systematic manner' (S. Hughes et al., 2012, p. 209). However, as I will demonstrate, not everyone would agree with

Hughes et al. (2012) on the scientific nature of AE, as it challenges tradition and, as stated, relies on memory’s fragility (Wall, 2006).

Storytelling and autoethnography are inextricably linked, as both rely on the art of narration to convey meaning, evoke emotions, and foster understanding. However, autoethnography takes storytelling a step further by using personal narratives as a catalyst for cultural analysis and interpretation, transcending mere self-narration and contributing to the creation of new knowledge and deeper insights into the human experience (Andrew & Rossignol, 2017; Chang, 2016). I draw upon my ‘individual and social worlds’ to bridge the gap between my disabled life and the school culture that I occupied, where I did not belong (Goodley, 1996, p. 338).

Conclusion

In this chapter, I have outlined the methodological approach underpinning this research, explaining the rationale for employing evocative autoethnography as the primary investigative method. The discussion began with an exploration of my positionality as a researcher, acknowledging the complex interplay of personal experiences, cultural contexts, and academic training that have shaped my perspective. This reflexive examination was crucial in establishing the lens through which the research has been conducted and interpreted. The philosophical underpinnings of the study were then explained, situating the research within a constructivist paradigm that recognises the socially constructed nature of reality whilst acknowledging the existence of a tangible world. This ontological and epistemological stance aligns with the chosen methodology, allowing for an exploration of personal experiences within broader sociocultural frameworks.

A critical examination of autoethnography as a research method was presented, addressing both its strengths and limitations. The debate between analytic and evocative approaches was scrutinised, with a robust justification provided for the adoption of the latter. This choice was established on the method's capacity to convey lived experiences of disability in a manner that resonates emotionally and intellectually with readers, thereby challenging dominant ableist narratives. Ethical considerations were thoroughly addressed, recognising the unique challenges posed by autoethnographic research. Particular attention was paid to relational ethics and the ethical implications of self-disclosure, with strategies outlined to mitigate potential harm to both the researcher and implicated others.

The chapter also explained the use of personal storytelling as a form of data collection and analysis. The value of narrative in conveying complex lived experiences was emphasised, with a discussion on how these stories contribute to the broader discourse on disability and education. The concept of multivocality was introduced, acknowledging the multiple perspectives and voices inherent in the autoethnographic process. To address concerns regarding academic rigour this chapter has outlined the strategies employed to ensure the research's trustworthiness and credibility. These included ongoing reflexivity, thick description, and the application of theoretical frameworks to situate personal experiences within broader scholarly contexts.

This methodology chapter has provided a comprehensive overview of the research approach, demonstrating how evocative autoethnography, underpinned by a constructivist paradigm and rigorous ethical considerations, offers a unique and valuable perspective on the experiences of disabled children in educational settings. By centring the lived experience of disability, this research aims to contribute to a more nuanced understanding of inclusive education and to challenge prevailing ableist assumptions in both academic discourse and educational practice.

Chapter 3: - Literature Review

Introduction

In my literature review, I explore the complex interplay between hatred, disability, childhood, education, and societal attitudes through an autoethnographic lens. This approach interweaves personal narrative with academic discourse to provide a deeper understanding of lived experiences. Whilst some autoethnographic works blend personal narratives directly with academic literature (Castrodale & Zingaro, 2015; Ellis et al., 2018; Schneider, 2010; Shah, 2022; Wilkes, 2009), I have chosen to present a separate literature review section. This decision aligns with scholars like Dethlof (2005), who argue that a distinct literature review provides a crucial sociocultural context, also aligning with other studies such as Maric (2016), Neyman (2011), and Zabonick (2013). My approach allows readers to immerse themselves in the narrative whilst also benefiting from a comprehensive academic foundation.

Given the constraints of my thesis, I have focused on critical areas that illuminate the experiences of physically disabled children under the backdrop of hatred: the cultural construction of disability, disabled childhoods and identity formation, inclusive education and its challenges, and school bullying as a form of systemic violence. This review is framed within Disabled Children's Childhood Studies, which challenges deficit-based discourses and ableist attitudes (Curran & Runswick-Cole, 2014). A framework that 'represents a significant shift away from the long-standing deficit discourses of disabled childhoods' (Curran & Runswick-Cole, 2014, p. 1617). This understanding can only be achieved through the historical stories of disabled children who have 'functioned in different contexts' (Kafer, 2013, p. 149). By examining how disabled children have navigated different contexts throughout history, we can gain a more comprehensive and empathetic understanding of disability.

As a disabled researcher, I acknowledge the emotional challenges of engaging with literature that often presents a medicalised, pathologised view of disability (Stalker & McArthur, 2011). To maintain academic rigour whilst honouring my lived experience, I approach the 'self' as a cultural artefact (Sedikides et al., 2023), allowing for critical examination of both personal and societal narratives.

My literature review explores several interconnected themes, including the historical and political construction of disability, the impact of ableism and the concept of 'normalcy' (Campbell, 2009; Hacking, 1990). It also examines the formation of disabled identities and the concept of 'spoiled' identity (Goffman, 1990), the promise and challenges of inclusive education, and understanding bullying and school violence under a culture of hate from a sociological perspective, moving beyond individual psychology to examine systemic issues.

I have structured my literature review around three key themes: the cultural construction of disability, the disabled identity, and the emotional impact. The cultural imagining of disability enables me to understand how society constructs disability, which then shapes the disabled identity, leaving an emotional footprint on my life and that of other disabled children. I consider the 'hatred' that drives these constructions forward and investigate how these social constructions merge into the lived experiences of disabled children. This approach challenges homogenous assumptions about disabled bodyminds and advocates for a more nuanced understanding of diverse experiences and needs (Corson & Schwitzman, 2018; Ktenidis, 2020).

Historical Context

History favours the lives of ‘normal’ children, creating gaps in the literature which present a distorted view of disabled childhoods (Altenbaugh, 2006). To write myself into the history of disabled childhoods as a reflexive disabled scholar and reconstruct my identity (Curran & Runswick-Cole, 2014), first, I must understand my history. Knowing the history of disability helped me understand my place in society and my collective identity. It showed me that I was part of a long continuum of disabled people who have navigated and influenced my world. By reclaiming my history, I could reject the solitary world of invisibility and marginalisation imposed on me by society. Disabled history is woven into the broader fabric of society and culture. From medieval leper chapels to modern accessibility protests, I see how our lives and contributions have shaped the world. Studying our history helped me challenge stereotypes and misconceptions, highlighting our diverse experiences and resilience. Our history matters to me as a disabled woman because it provides a sense of identity, empowers me to advocate for myself and others, enriches my understanding of our social and cultural impact, challenges stereotypes, and promotes education and awareness about our rights and inclusion.

A Brief History of Disability

In this section, I examine the origins and core ideologies of the eugenics movement, tracing how it promoted an ableist worldview that categorised disabled people as burdens. It explores how eugenic thinking led to harmful policies of segregation, sterilisation, and even extermination of disabled people, most horrifically realised in Nazi Germany’s Aktion T4 program. While overt eugenic policies have largely been rejected, this analysis argues that the underlying ideologies of ableism and ‘normalcy’ promoted by eugenics persist in more subtle forms, continuing to marginalise and Other disabled people. By critically examining this history, I can better understand and challenge ongoing discrimination and work towards a more inclusive society that values all forms of human diversity.

Disabled children have constantly been subjected to negative messages shaped by the 'politics of ableism' (Campbell, 2009, p. 17). This ableist perspective can be traced back to ancient philosophers like Aristotle and Plato, who advocated for the abortion and infanticide of 'deformed' children (Torres, 2023). These early attitudes set the stage for centuries of discrimination and marginalisation.

18th Century

Advancements in medicine during the 18th century led to concerns about the dehumanising implications of medicine to preserve life at the cost of human agency. Sweet (2014) highlights the fear that scientific progress might go too far, and doctors were accused of creating ‘a lump of breathing, useless flesh’(Sweet, 2014, p. 15) [disabled people] through life-saving interventions, such as amputations. This medical advancement ignited societal debates about the nature of humanity and the value of life, with some questioning whether disabled people could be considered fully human. Literature of the time, such as Ernest George Henham's ‘A Human Bundle’ (1897), discussed by Sweet (2014), reflected these attitudes, suggesting that dependence on others for basic functions removed a person's human status (Sweet, 2014). There was a strong emphasis on physical wholeness.

Eugenics

The eugenics period of history is well documented and is inherently linked to disability study (Baker, 2002; Bumgardner, 2023; Gershon, 2023; Hudson, 2011; Morris, 1996; Mostert, 2002; Standish, 2023; Wilson, 2020). The eugenics movement of the late 19th and early 20th centuries had profound and lasting impacts on societal views of disability, shaping notions of 'normal' and 'deviant' that continue to influence attitudes and policies today. Eugenics combines 'socioeconomics, philosophy, and biology to create a pseudoscience' (Ploeger, 2018, p. 34) that promotes an 'ableist ideology' of compulsory able bodiedness' (Liddiard, 2014a, p. 34). Francis Galton's eugenics ideology aimed to eliminate undesirable humans from society, arguing that supporting the weak interfered with natural selection. Disabled people were like 'human vermin who crawl about doing absolutely nothing, except polluting and corrupting everything they touch' (Brignell, 2010, N.P). This ideology propagated a normalising gaze that deemed certain bodyminds desirable, socially acceptable and of value to society. While others, such as the blind, deaf, and mentally deficient, were labelled as unfit (Choudhury, 2015; Davis, 1995), a burden and a 'drain' on society, changing the discourse at the time from pity to resentment (Bauman, 2000).

The concept of 'normalcy' and a normalising gaze was central to the eugenic ideology. It refers to how society defines and enforces what is considered 'normal' or 'typical' regarding human bodies, abilities, and behaviours. This concept is deeply rooted in the history of statistics, medicine, and social control (Taylor & Mykitiuk, 2001). Disability was seen as a deviation from the norm, and disabled children were viewed as needing correction or improvement to fit into the norm. This perspective perpetuates the stigmatisation and marginalisation, reinforcing their social exclusion (Taylor & Mykitiuk, 2001). The pseudoscience of eugenics was documented in The Eugenics Movement, where researchers like Pearl (1912) claimed that traits such as eye colour, disease, and criminality were genetically transmissible and used to justify social cleansing efforts. Later, Watson discovered the human genome and suggested that he was like God rescuing people from genetic hells (Liscum & Garcia, 2021; Watson, 1990).

The dangers of eugenic social cleansing were deplorably realised when Action T4, a program undertaken by doctors and nurses in Nazi Germany before the war began. The objective of Aktion T4 was to eliminate disabled children and adults who were deemed 'unworthy of life' (Mostert, 2002). By 1945, approximately 5,000 children had been murdered through methods such as lethal injection, starvation, withholding of treatment, or chemical warfare weapons. The program was eventually halted in 1941. However, enforced 'euthanasia' was still carried out in hospitals (Malhotra, 2001). Action T4 was part of a larger ideology of racial purity and eugenics that ultimately led to the systematic murder of six million Jews and millions of others deemed 'undesirable' by the Nazi regime and the Holocaust (Mostert, 2002). The perpetrators of these heinous crimes were not exceptional or extraordinary; they were medical professionals, and society let this happen, highlighting the disturbing reality that even ordinary people can be complicit in or pay no heed to horrific acts when they are driven by ideologies that devalue certain groups of people, such as those with disabilities (Crow, 2009).

Crow (2009) further emphasises that the right to life and dignity for disabled people remains under threat from pre-natal screening and a rush to legal rights for newly disabled people to assisted suicide, the eugenic ideologies, and its modern manifestations. Eugenics sold a powerful vision of a 'perfect human race,' a world free of impairment (Ploeger, 2018, p. 36). What eugenics did and did well was present violence and inequality as an acceptable and natural phenomenon for disabled people. It sanctioned 'prejudice, discrimination, and differential treatment;' disabled people had no control over their lives, forcing them to occupy a space outside of society (Altenbaugh, 2006, p. 708).

1960s 1970s

The 1960s and 1970s in the UK were marked by significant political and economic shifts, characterised by economic upheaval, the rise of social movements, and evolving party ideologies (Steber, 2015). This period witnessed the emergence of neoliberalism in Western political and economic thought, signalling a departure from the post-World War II consensus of welfare state policies and Keynesian economics towards free-market principles and reduced government intervention (Steber, 2015). The contrasting perspectives of Keynesian economics and neoliberalism have profoundly influenced economic policies and debates, shaping the political landscape throughout the 20th and 21st centuries (Steber, 2015).

During this period, social history explored various aspects of education, including teacher-child interactions, discipline, and classroom routines (Altenbaugh, 2006). However, disability was predominantly viewed through the lens of the medical model, which originated from the rise of modern medicine in the 18th century and gained prominence following psychiatrist Thomas Szasz's critique in the mid-1950s (Zaks, 2023). This model framed disability as a medical issue within the individual, characterising it as a defect or abnormality that required cure or rehabilitation (Marks, 1997; Oliver, 1990; Zaks, 2023). Consequently, disabled children were often positioned as patients reliant on medical professionals, reinforcing the notion that they were not comparable to non-disabled children and ‘uses terms like ‘invalid’, ‘cripple’, ‘spastic’, ‘handicapped’ and ‘retarded’ to describe’ them (Retief & Letšosa, 2018, p. 3).

The education system of the 1960s and 1970s reflected society's exclusion of disabled people. Disabled children were routinely sent to 'special schools', which functioned more as places of control, therapy, and remediation rather than education (Altenbaugh, 2006; Armstrong, 2007). It was not until later that 'normal' schools, later termed mainstream schools, began integrating disabled children into general educational settings. Advances in medical knowledge and surgical techniques during the 1960s and 1970s expanded educational opportunities for disabled children, shifting the focus from mere care and management to education (Plowden, 1967).

In conclusion, the 1960s and 1970s represented a period of transition in the UK, marked by significant political and economic changes. While Keynesian economics brought some benefits to disabled people, their marginalisation persisted in historical accounts and societal structures. The dominant medical model of disability continued to shape perceptions and treatment of disabled children, particularly in educational settings. However, this era also laid the groundwork for future advancements in disability rights and inclusion.

Neoliberal (Eugenics)

Although out of the period of my stories, it does influence the literature and lives of disabled children today. Neoliberalism, a global phenomenon prioritising economic growth (Romstein, 2015), has significantly influenced societal perceptions of disability. This ideology values people based on their capacity to work, earn wages, and contribute economically, thereby positioning disabled people as 'negative human capital' and a societal burden (Opotow, 1990; Yates, 2015). The neoliberal paradigm perpetuates a 'winners and losers' discourse, fostering a civic responsibility to eliminate disability (Ringrose & Renold, 2010). This perspective is exemplified by incidents such as Councillor Colin Brewer's advocacy for euthanising disabled infants on economic grounds, comparing disabled babies to deformed lambs smashed against a wall at birth (Arnold, 2013; Pring, 2013), and the legal system's leniency towards parents who harm disabled children (Smith, 2015). These instances underscore the persistent devaluation of disabled lives within neoliberal societies. The irony is that Brewer did not violate any hate crime laws and was re-elected to his position after investigations (Arnold, 2013), reflecting social attitudes.

The neoliberal framework has transformed overt eugenic practices into more covert forms, including genetic research, over-medication, and assisted suicide laws that potentially disadvantage disabled people (Liddiard & Slater, 2017). Under this regime, disability is often portrayed as an inanimate condition to be endured rather than a lived experience (Jagani, 2017; Peuravaara, 2013). This ideology effectively dehumanises disabled children and reinforces societal hierarchies (Diebolt & Haupert, 2016). The pervasive influence of neoliberalism thus continues to shape societal attitudes towards disability, often to the detriment of disabled peoples' rights and social standing.

The cultural imagining of disability

In the 1960s and 1970s, disability was predominantly viewed through a medical lens. This perspective, known as the medical model, saw disability primarily as a medical condition or impairment that needed to be treated or cured (Campbell, 2013; Simplican, 2017). This approach focused on the bodymind and its perceived defects, viewing disability as inherent to the individual and shaping it as a form of social inequality (Altenbaugh, 2006). However, Campbell (2013) argues that this oversimplified way of thinking overlooks the systemic issues that create and perpetuate disability as a social construct. The medical model's narrow focus on individual impairments failed to account for the broader social and cultural factors that influence the experience of disability.

Contrary to the medical model, disability is increasingly recognised as constructed through social processes, interactions, and cultural interpretations (Birenbaum, 1979). Birenbaum (1979) emphasises the significant role that social institutions play, arguing that they define what constitutes a disability and how it should be addressed, thus constructing and reinforcing notions of disability. These institutions include medical establishments, educational systems, and social service agencies. As our understanding of disability has evolved, so too have calls for more comprehensive approaches. Goodley and Runswick-Cole (2016) argue that society, including researchers, policymakers, and activists, should move beyond simply including disability in existing frameworks. Instead, they advocate for fundamentally rethinking those frameworks with disability at the centre. Building on this idea, Liddiard et al. (2019) argue that disabled people's perspectives are central to reimagining frameworks that are more inclusive and expand notions of humanity in interconnected ways aligned with posthuman thinking. Feminist disability scholars (Crow, 2010; Liddiard, 2014b; Price, 2015; Simplican, 2017; Wendell, 1989) further champion the disabled voice through life-writing as a vehicle to 'challenge ableist stereotypes' and reframe disability as valuable diversity rather than tragedy or something to be cured (Simplican, 2017).

The shift from the medical model to a more social and cultural understanding of disability challenges traditional notions of normalcy, highlighting how societal structures and attitudes, rather than individual impairments, often define what is considered ‘normal’ and how this construct perpetuates the marginalisation of disabled people (Davis, 1995; Garland-Thomson, 1997).

The Persistence of Normalcy

In this section, I discuss the concept of normalcy, which has undergone significant evolution, transforming from a seemingly objective measure of human averages into a powerful ideological construct that shapes societal values and expectations. Initially rooted in sociological thought, normalcy was associated with perfection, categorising the positive as 'normal' and the negative as 'abnormal'. This shift has profound implications, particularly in the context of disability, where the ideology of normalcy often marginalises and depersonalises those who do not conform to established standards. Historically intertwined with movements such as eugenics, normalcy has enforced rigid classifications that exclude natural human variation, leading to the systematic stigmatisation of disabled people. As we explore the implications of normalcy, it becomes essential to recognise its dynamic nature and the need for a more inclusive understanding of humanity that celebrates diversity rather than enforcing conformity.

The concept of normalcy has undergone a profound transformation since its inception, evolving from an ostensibly objective measure of human averages into one of the most potent ideological tools of the twentieth century (Hacking, 1990). This metamorphosis is deeply rooted in sociological thought, where influential figures such as August Comte drew associations between perfection and normalcy, effectively categorising the positive as 'normal' and the negative as 'abnormal' (Misztal, 2002, p. 191). By the mid-nineteenth century, 'normal' had transcended its original meaning to become an identity construct, described by Misztal (2002, p. 191/192) as "a beautiful example of ideological illusion" that reflects the function of social norms.

The evolution of 'normalcy' as a concept has been significant; however, it persists as a culturally accepted paradigm, particularly in the context of defining and segregating disabled children (Stephens, 2021). Despite its problematic and inconsistent nature, this construct has led to the depersonalisation of disability, often presenting disabled children as a homogeneous and marginalised group (Barnes, 1991; Jayara, 2020; Opotow, 1990; Richardson et al., 1964). The ideology of normalcy has been further entrenched by the eugenics movement, which enforced a vision of perfection and created social expectations that classify all alternatives as deviant (Hacking, 1990; Priestley, 1997; Sheppard, 2020). The historical context for this ideological shift can be traced back to Francis Galton's drive for perfection, which led to the establishment of normative institutions such as segregated education, asylums, and prisons for those deemed 'less' than 'normal' (Foucault, 1996). This foundation laid the groundwork for the pervasive influence of 'normalcy' in shaping societal values and expectations. In contemporary times, neoliberalism has embraced this ideology, ostracising groups deemed 'abnormal' in an effort to maintain a white, ableist, heterosexual society (Davis, 2014; Wendell, 1989).

It is crucial to recognise that normalcy is not a static concept but is ‘constructed and reconstructed’ (Freud, 1999, p. 334). An illustrative example of this reconstruction is the historical view of Western women as the property of men, a normality that persisted until feminist consciousness emerged, creating a new 'normal' of women as independent of men (Freud, 1999). This enforced conformity produces ‘normality’ until the concept is opposed (Stephens, 2021), highlighting the dynamic nature of social norms and their potential for change.

The concept of normalcy is inextricably tied to ideas of standardisation, measurement, and control of human bodies and traits. However, it is a construct that is deeply intertwined with social interactions and attitudes, shaping how people perceive themselves and others within society (Campbell, 2013). These norms govern social interactions, as people constantly compare themselves to the 'average' and strive to fit within these parameters.

Challenging Normative Constructs

The pervasive nature of normalcy and its challenges to normative constructs have far-reaching implications for our understanding of humanity, particularly through the lens of disability. Disabled bodyminds serve as a powerful disruptor to the ideology of normalcy, challenging the 'carefully constructed myth of the 'able' body and self, which is foundational to a neoliberal social order where multiple forces are in play to keep all bodies 'tidy', manageable, and bound' (Liddiard & Slater, 2017, p. 321). This disruption invites us to reconsider our conception of what it means to be human.

Campbell (2009) argues that ableism constructs these 'untidy' bodyminds based on the concept of 'normal', forcing humanity on a trajectory of perfection. In doing so, disability is framed as an inferior, less-than-human state. This drive for perfection, furthered by Francis Galton, led to the establishment of normative institutions such as segregated education, asylums, and prisons for those deemed 'less' than 'normal' (Foucault, 1996). The historical context laid the groundwork for the pervasive influence of normalcy in shaping societal values and expectations. The problem arises when morals, beliefs, and normality cannot be agreed upon, leading to conflicting ideologies (Freud, 1999). Consequently, 'normal' transitions from objective, statistical thinking into unquestionable value judgements based on power-driven socially desirable outcomes (Taylor & Mykitiuk, 2001). Normality is thus understood as a social construct that defines what is considered an 'ideal' or 'real' body within specific cultural and temporal contexts, influenced by societal norms related to gender, ability, and aesthetics (Peuravaara, 2013).

Attitudes towards those who do not conform are often negative, viewing them as abnormal or deviant (Campbell, 2013). These attitudes have significant implications for disabled people, who are frequently excluded or stigmatised because they do not fit the constructed standard of normalcy. The societal focus on normalcy creates and perpetuates the 'problem' of disability, as it enforces a rigid standard that excludes natural human variation. Challenging notions of normalcy are seen as key to disability rights and justice (Zaks, 2023). This critical examination of normalcy and its impact on disabled people prompts us to rethink our understanding of humanity. By centring disability in our discourse, we can begin to challenge the narrow, ableist definitions of what it means to be human. This shift in perspective allows us to recognise the inherent value and diversity of all human experiences, including those of disabled people. Rethinking humanity through disability involves questioning the very foundations of our societal norms and values. It requires us to move beyond the limiting constructs of 'normal' and 'abnormal' and instead embrace a more inclusive and diverse understanding of human existence. This approach not only benefits disabled people but also enriches our collective understanding of what it means to be human in all its varied forms.

Stephens (2021) argues that attempts to oppose or critique normality often unexpectedly reinforce or unintentionally reaffirm the concept of cultural centrality and power. Despite this view, the ideology of 'normal' continues to shape many educational practices, policies, and societal attitudes. By discussing it, we can better recognise and challenge its ongoing effects (Annamma et al., 2013). The ramifications of normative cultural imaginings are extensive, affecting access to justice, experiences of public and private spaces, and an overall sense of safety and autonomy (Edwards & Maxwell, 2023). Challenging these normative imaginings through relational thinking and more inclusive policy approaches can help to create environments where disabled people are recognised as active agents in their own lives, capable of navigating and reshaping their experiences of safety and un/safety.

The disabled bodymind disrupts this ideology and 'endangers the carefully constructed myth of the 'able' body and self, which is foundational to a neoliberal social order where multiple forces are in play to keep all bodies 'tidy', manageable, and bound' (Liddiard & Slater, 2017, p. 321). Campbell (2009) implies that ableism constructs these 'untidy' bodyminds based on the concept of 'normal' and forces humanity on a trajectory of perfection (Campbell, 2009). In doing so, she frames disability as an inferior, less-than-human state.

Consequently, 'normal' transitions from objective, statistical thinking into unquestionable value judgments based on power-driven socially desirable outcomes (Taylor & Mykitiuk, 2001). Normality is thus understood as a social construct that defines what is considered an 'ideal' or 'real' body within specific cultural and temporal contexts, influenced by societal norms related to gender, ability, and aesthetics (Peuravaara, 2013). Attitudes towards those who do not conform are often negative, viewing them as abnormal or deviant (Campbell, 2013). These attitudes have significant implications for disabled people, who are frequently excluded or stigmatised because they do not fit the constructed standard of normalcy (Goffman, 1990; Kondrat & Teater, 2009). The societal focus on normalcy creates and perpetuates the 'problem' of disability, as it enforces a rigid standard that excludes natural human variation. Feminist disability scholars value the disabled voice through life-writing to 'challenge ableist stereotypes' and reframe disability as valuable diversity rather than tragedy or something to be cured (Simplican, 2017, p. 47). Challenging notions of normalcy are seen as key to disability rights and justice (Zaks, 2023).

Rethinking Humanity Through Disability

The concept of disability profoundly challenges our understanding of what it means to be human, disrupting normative, ableist notions that have long dominated societal discourse. As Goodley and Runswick-Cole (2016) argue, disability should not be viewed as a mere supplement to our concept of humanity but rather as an integral component that reshapes our understanding of ability, independence, and autonomy. This perspective necessitates a fundamental reconsideration of deeply ingrained assumptions about the human condition.

The presence of disability in society compels a critical examination of the concept of 'normalcy'. Far from being a mere statistical measure, normalcy has evolved into a potent social force that profoundly influences attitudes, behaviours, and societal organisation (Zaks, 2023). This transformation, rooted in the historical influences of eugenics and neoliberalism, has led to the marginalisation of those deemed 'abnormal'. The dynamic nature of normalcy, its role in governing social interactions, and its power to exclude and stigmatise underscore its constructed nature.

The 'non-human' vision of disability, as Goodley and Runswick-Cole (2011b, p. 15) posit, is a construct born of 'political arrogance' designed to perpetuate ableism. This perspective has contributed to the development of ableist prejudices and societal awkwardness surrounding disability. However, Simplican (2017) argues that these attitudes, being socially constructed, are amenable to change. A civilised society, as Bruneau et al. (2020) contend, requires humane principles that uphold empathetic behaviours, reject cruelty, and safeguard an individual's most precious gift: humanity. By challenging normative notions of humanity, I emphasise the urgent need to embrace diversity and dismantle exclusionary practices within society. The rigid enforcement of 'normal' standards, which exclude natural human variation, perpetuates the 'problem' of disability. This approach fails to recognise the rich tapestry of human experience and ability. This discourse encourages a fundamental rethinking of humanity. It challenges readers to move beyond narrow, ableist conceptions and embrace a more inclusive, diverse understanding of what it means to be human. By doing so, we can work towards a society that values and includes all people, regardless of ability, thereby enriching our collective understanding of the human experience.

In conclusion, the persistent ideology of normalcy has profoundly shaped societal attitudes and structures, often to the detriment of those who do not conform to arbitrary standards of 'normal'. As I challenge these deeply ingrained notions, I recognise the urgent need to reframe our understanding of humanity, embracing the full spectrum of human diversity. This shift in perspective is particularly crucial when considering disability, which has long been subject to oversimplification and generalisation. Indeed, the homogenisation of disability presents a significant challenge in our efforts to foster a more inclusive society. This tendency to view disabled children as a monolithic group fails to acknowledge the vast array of experiences, needs, and capabilities within the disabled community. Such oversimplification not only perpetuates harmful stereotypes but also undermines the development of nuanced, effective policies and support systems that can truly address the diverse needs of disabled people.

Homogenising Disability

A nuanced tension between homogenisation and diversity characterises the discourse surrounding disability. This section critically examines the multifaceted debate between conceptualising disability as a unified construct for advocacy purposes and acknowledging the diverse, intersectional experiences of disabled children. It scrutinises the distinctions between impairment and disability, interrogates the social and medical models of disability, and analyses the implications of these theoretical perspectives on our understanding and addressing of violence and bullying against disabled children within educational settings.

Bickenbach (2014)recognises that a homogenised view of disability can strengthen advocacy efforts by uniting people with disabilities around common goals and fostering a sense of community. By highlighting shared experiences, it becomes easier to communicate disability issues to the public and policymakers, potentially leading to broader support and understanding of disability rights. Conversely, others argue that homogenisation treats impairment as inherent, biological, and unchanging across all societies and cultures. This perspective assumes that impairments are purely medical conditions independent of social contexts (Soldatic & Grech, 2014). The discrepancy here is between disability, a broader social construct that encompasses the societal and environmental barriers that restrict people with impairments from fully participating in society (Garland-Thomson, 2012b) and impairment, a physical, mental, or sensory condition that deviates from typical human functioning, understood in medical terms as a limitation or loss of function in a body part or system (Garland-Thomson, 2012b). Disability has the potential to create a shared experience; impairments are not. The distinction between impairment and disability is a complex issue; however, as Garland-Thomson (2012b) argues, impairment and disability are often commingled but can, and on occasion should, be conceptually separated.

Within my thesis, I use disability as an umbrella to establish the contexts in which disabled children face school violence and bullying. Actions that are deeply rooted in societal structures and attitudes. The intersection of disability with other factors, such as socioeconomic status, race, or gender, merge to create contexts where disabled children are at heightened risk of experiencing violence and bullying (Watts & Erevelles, 2004), underscoring the urgent need for comprehensive, systemic changes in educational approaches and societal attitudes towards disability. In my approach to understanding violence and bullying, I avoid the simplistic bully-victim binary. Instead, I separate my intellectual analysis from individual physical and emotional experiences, allowing me to examine violence and bullying as behaviours shaped by social and cultural factors rather than inherent personal traits. Ktenidis (2020) argues against approaches that homogenise disability, instead advocating for recognising the diversity, intersectionality, and unique lived experiences of disabled children. This intersectional lens provides a more nuanced understanding of the challenges faced by disabled children. He critiques frameworks that treat disability as a monolithic category, ignoring the vast differences in experiences and needs among disabled children (Ktenidis, 2020). His person-centred approach to understanding and addressing the needs of disabled children moves away from reductive or overly generalised frameworks.

Goodley & Runswick-Cole (2011b) argue that homogeneous attitudes towards disability are rooted in ableist and functionalist perspectives. These views tend to see disability primarily as an individual deficiency or problem rather than considering the broader social and cultural factors at play. I base my separating bodymind from my discussion and disability on their critique, which emphasises the need to shift from an individual model of disability (focusing on personal deficits) to a social model that recognises how societal structures and attitudes contribute to the marginalisation and violence experienced by disabled children. Kavanagh (2018), however, argues that the social model of disability sees disability as primarily a social construct created by societal barriers. From this viewpoint, homogenisation could help shift focus from individual impairments to removing universal barriers (Kavanagh, 2018). While Kavanagh's view aligns with the social model of disability, it does not fully address the complexities highlighted by Goodley and Runswick-Cole (2011b). Their studies (Goodley & Runswick-Cole, 2011b, 2016) look beyond the social model to examine power relations, cultural representations, violence, and the lived experiences of disabled adults and children. This nuanced understanding of systemic violence may be lost in a homogenised approach.

Living with a disability can offer unique ways of knowing and understanding the world, a concept recognised as 'embodied cognition... not only to think and know but also to construct our social reality (Garland-Thomson, 2012b, p. 347)' posits that our bodily experiences shape the knowledge and perceptions of the world. Garland-Thompson (2012) argues that disability is inherent in the human condition and should be protected for its unique contributions to human diversity and culture. The challenge lies in fostering a disability discourse that is unified in its pursuit of rights and equality and diverse in recognising individual experiences and needs (Garland-Thomson, 2012b). I would suggest that homogenisation, a long-standing debate beyond this research, calls for a nuanced approach that pursues universality while remaining adaptable and sensitive to disability-related differences (Bickenbach, 2014). This balanced perspective could help inform more inclusive policies and practices that address the needs of all disabled people.

In conclusion, the tension between homogenisation and diversity in disability discourse reflects broader theoretical debates within disability studies, particularly concerning the applicability and limitations of various disability models. Ultimately, I have evidenced the need for a flexible, multidimensional understanding of disability that can inform policy, advocacy, and research. Such an approach would recognise the strategic value of unified advocacy whilst remaining sensitive to the diverse needs and experiences of disabled children, particularly in addressing complex issues such as hate school violence and bullying.

Models of Disability: Evolving Perspectives

This section explores the evolution of disability models, their impact on cultural imagining, and the importance of considering multiple perspectives to gain a comprehensive understanding of disability experiences. I discuss the cultural understanding and conceptualisation of disability, which various models of disability have significantly influenced. These models serve as frameworks for interpreting, discussing, and addressing disability in society. Historically, the medical model dominated discourse, viewing disability as an individual medical issue requiring cure or correction. However, this perspective has been challenged by more nuanced approaches, particularly the social model, which emphasises societal barriers as the primary source of disability. By examining these models, we can better appreciate the fluid and context-dependent nature of disability, moving beyond rigid universal standards to acknowledge the diverse lived experiences of disabled children. This understanding is imperative for developing more inclusive and effective approaches to disability in various domains, including education, policy, and social interaction.

I have identified models of disability as a critical theme in understanding the cultural imagining of disability. The cultural understanding of disability is significantly shaped by different models, which influence how disability is imagined and conceptualised (Waldschmidt et al., 2017). Historically, and in the time frame of the data, the medical model dominated this discourse, framing disability as an individual medical problem that necessitates fixing, eradicating, or curing (Altenbaugh, 2006). This perspective tends to medicalise and pathologise disability, focusing on impairment as a deviation from universally accepted norms that are presumed to apply across cultures, races, genders, and geographical locations (Retief & Letšosa, 2018; Ruesch, 1968). However, this outdated approach fails to capture the intricate, culturally specific, and socially constructed nature of disability (Cross, 2017). Towards the end of the 1960s, attitudes were slowly changing, and the social model rejected individualistic explanations, positing that disability results from ‘disabling’ societal barriers, such as attitudes, communication, environments, and organisation. It advocates for including disabled children by removing these barriers and shifting responsibility for change from children to society (Oliver, 1990; Sofokleous & Stylianou, 2023). From this perspective, disability is a socially constructed disadvantage built onto an impairment (Shakespeare, 1999; Sweet, 2016; Tremain, 2006). Social barriers can be more debilitating than impairments; the social model set out to remove these barriers (Jayara, 2020; Mitchell, 2020; Zabonick, 2013).

Just as the medical model was challenged, the social model, while influential, has faced criticism from some scholars. Critics argue that it may oversimplify the complex relationship between impairment and disability, potentially neglecting the lived experiences of pain or limitation that some disabled people face (Shakespeare & Watson, 2010). Additionally, Owens (2015) contends that the model's focus on societal barriers might underplay the role of medical interventions or rehabilitation that can improve the quality of life for some people (Owens, 2015). It is further argued that the social model should focus on societal barriers by considering intersectionality and how disability interacts with other social identities such as race, gender, class, and sexuality (Moodley & Graham, 2015). This intersectional approach recognises that disabled people may face multiple, overlapping forms of discrimination and disadvantage, leading to unique experiences and challenges that cannot be fully understood by considering disability in isolation (Erevelles & Minear, 2010).

This lack of intersectionality has incited a more contemporary understanding that acknowledges disability as an active interaction between people and their environments, influenced by social, cultural, and personal factors rather than rigid, universal standards (Garland-Thomson, 2012a; Liddiard, 2014b; Twardowski, 2022). This perspective recognises that disability is not merely a medical condition but a complex sociocultural phenomenon shaped by societal attitudes, power structures, and political agendas. Consequently, definitions of disability are equally unstable because disability is not a fixed or universal concept but rather an active interaction between disabled children and adults and their specific environments, shaped by various social, cultural, and personal factors. Disability is a complex sociocultural phenomenon that should be considered, moving away from rigid universal standards to acknowledge the fluid nature of disability experiences across different contexts.

Disability has historically been constructed through welfare law, linking it to functional incapacity and the inability to work (Eyer, 2021). This perspective is rooted in historical views, such as eugenics, which portrayed disability as a societal burden (Bauman, 1997), and later neoliberalism, which promotes a meritocratic narrative. The belief that success is exclusively constructed on individual merit overlooks the systemic barriers and discrimination faced by many disabled children, framing disability as a personal problem rather than a social or structural issue (Jagani, 2017). Grue (2016) notes that disability is increasingly defined in socio-political terms, focusing on discrimination protection, rights access, and resource redistribution. However, this expansion of disability as a legal and political category may lead to backlash, as adaptations and accommodations are framed as burdens imposed by a minority on the majority (Grue, 2016). The social meaning of disability remains fluid, with a fragmented category that includes hierarchies of prestige among different impairments. Medically defined conditions often hold more prestige than the general ‘disability’ label, influencing societal understanding and treatment of disabled children (Grue, 2016).

In conclusion, the exploration of disability models reveals the complex and evolving nature of disability conceptualisation. From the medical model's individualistic approach to the social model's focus on societal barriers and the emerging intersectional perspectives, each framework contributes to our understanding of disability. However, it is evident that no single model can fully encapsulate the multifaceted experiences of disabled children.

This complexity in conceptualising disability naturally leads us to consider the pivotal role of language in shaping perceptions and experiences of disability. The terminology used, the narratives that are constructed, and the discourses we engage in are inextricably linked to these models of disability. As the understanding of disability evolves, so does our language.

The Importance of Language in Discussing Disability

The language used to discuss disability is far more than just a collection of words. It is a powerful force that shapes perceptions, influences attitudes, and impacts the lives of disabled children. As the understanding of disabilities evolves, so does the nomenclature (terminology) surrounding them. This evolution reflects not only changing societal attitudes but also the ongoing struggle for recognition, respect, and equal rights for disabled people. The terminology used to describe disability has historically been fraught with stigma and dehumanisation. From outdated and offensive labels to subtle microaggressions, language has often served as a tool of oppression, reinforcing harmful stereotypes and creating barriers for disabled people. However, language also holds the potential to challenge these norms, promote inclusion, and redefine what it means to be human in a diverse society. This section explores the complex relationship between language and disability, examining how terminology has evolved, the impact of linguistic choices on societal perceptions, and the ongoing efforts to create more inclusive and respectful ways of discussing disability. By understanding the power of language in this context, we can work towards dismantling ableist structures and fostering a more equitable society for all.

The nomenclature of disability is constantly evolving as our understanding of disabilities and their impact on children and adults grows. Nomenclature refers to the specific terms and language used to describe and categorise disabled children and adults. The nomenclature of disability is essential as it influences how society perceives and interacts with disabled people (Jayara, 2020). As Mike Oliver, disability rights activist, points out, ‘If we believe that we can improve the quality of all our lives through better policy and changed practice, then we have to recognise that language has a central role to play in this improvement’ (Oliver, 1994, p. 11). Language is more than descriptive; ‘it can conceptualise a better world’ (Oliver, 1994, p. 11). The language adopted by a culture can be a powerful tool for dehumanising the ‘less’ powerful and marginalised other (Jenkins et al., 2020). Language can be controlled and manipulated to establish explanations that can distort the reality of disability and fail to produce a discourse that reflects the socially constructed barriers used to oppress disabled people (Ahmad, 2018; Brzuzy, 1997; Mutanga, 2019).

Historically, disability has been stigmatised, with societies viewing it as an ‘abhorrent defect’, leaving disabled children ensconced in a derogatory discourse creating a language of oppression that alienates disabled people, categorising them as ‘‘Changelings,’ ‘monsters,’ ‘sinners,’ ‘cursed,’ ‘invalids,’ ‘cripples,’ ‘handicaps,’ ‘freaks,’ ‘beggars,’ ‘retarded,’ ‘disabled’ (Jayara, 2020, p. 2). This language is constructed as a form of dehumanisation that operates beneath the surface of conscious awareness, making it particularly devious. These ableist microaggressions are brief and commonplace verbal, behavioural, or environmental indignities that communicate hostile, derogatory, or negative attitudes (Deroche et al., 2024). Deroche et al. (2024) suggest they are subtle and often unintentional forms of discrimination that convey derogatory or dismissive messages based on disability status. They are a manifestation of ableism, which is the discrimination or prejudice against disabled people (Deroche et al., 2024).

These subtle forms of dehumanisation are so refined that they go unchallenged, which can lead to a subconscious reduction of disabled people's perceived humanity. Creating deeply ingrained tendencies is to reject them to the point where acceptance of disabled people is seen as abnormal or a denial of reality (Bogdan, 1986). This perspective challenges society to question societal norms and the ways we categorise and treat those deemed different or deviant (Bogdan, 1986). When disabled people are morally excluded, they are denied their rights and fair treatment, placing them outside 'society's scope of justice' or 'moral community' and leaving them vulnerable to mistreatment, exploitation, or neglect (Opotow, 1990, p. 3).

Disability continues to be conceptualised, debated and defined using language that presents disability as an inanimate condition to be endured, a lifeless initiative that plagues society (Jagani, 2017). The political discourse will, however, always claim the 'norm,' and this creates a binary of disabled and human and subsequently questions what it is to be human (Goodley & Runswick-Cole, 2016). The language adopted by a culture can be a powerful tool for dehumanising the 'less' powerful and marginalised Other (Jenkins et al., 2020). However, language alone does not marginalise disabled people; this lies in attitudes and cultural beliefs (Rix, 2006). If we consider 'dis' as the prerequisite of 'ability' we see, as pointed out by Goodley & Runswick-Cole (2016), the linguistic negative of disability, 'dis' defined as 'to put down, fail to show respect, abuse and disparage' suggests disability is a dis of 'normal' 'the register of the normal and the condition of the human' (Goodley & Runswick-Cole, 2016, p. 5). Cultural discourse generates stereotypes and metaphors that drive forward ableist imaginings of normativity (Campbell, 2013).

In conclusion, the language used to discuss disability is not only evolving but also profoundly influential in shaping societal perceptions and interactions with disabled children and adults. Historically, disability has been stigmatised, resulting in a discourse filled with derogatory terms that alienate and oppress. Ableist microaggressions, often subtle and unintentional, use language to contribute to the dehumanisation of disabled people, reinforcing harmful stereotypes. The political discourse creates a binary distinction between 'disabled' and 'human', prompting me to reflect on the very essence of humanity. Importantly, I acknowledge that while language plays a crucial role in marginalisation, the underlying issue lies in societal attitudes and cultural beliefs. The prefix 'dis' in disability serves as a linguistic negative, suggesting a lack of respect, which further perpetuates ableist notions of normality. I have considered how language can either empower or oppress and the shared responsibility to create a more inclusive dialogue around disability. Oliver (1994) emphasises the power of language, suggesting it plays a central role in improving lives, recognising how the political discourse that continues to claim the ‘norm’ creates a binary of disabled and human, which subsequently questions what it means to be human. The evolving nomenclature of disability reflects our growing understanding of disabilities and their impact on children and adults. Cultural discourse generates stereotypes and metaphors that reinforce ableist notions of disability. As we consider the profound effects of language on societal perceptions and treatment of disability, it becomes crucial to examine how these linguistic frameworks influence the development and implementation of coping mechanisms for disabled children, who must navigate a world shaped by ableist terminology and attitudes.

Learning to cope with the cultural imagining of disability

The cultural imagining of disability plays a significant role in shaping the experiences and coping strategies of disabled children. Society's perceptions, often rooted in ableist attitudes and misconceptions, create an environment where disabled children are expected to navigate complex social and emotional landscapes while simultaneously managing their disabilities. This expectation stems from a cultural narrative that often views disability as something to be overcome or compensated for rather than as a natural part of human diversity.

This section explores why and how disabled children are expected to cope with their disabilities, delving into the various mechanisms they develop in response to societal pressures. It highlights the intersection of cultural attitudes, medical models of disability, and personal experiences, illustrating how these factors collectively influence the coping strategies adopted by disabled children. By examining these aspects, we gain insight into the profound impact that cultural imaginings of disability have on the lived experiences of children.

Why Disabled Children Are Expected to Cope with Their Disability

Disabled children frequently encounter significant challenges that necessitate the development of coping mechanisms. These challenges stem from various sources, including physical and social barriers, stigma and discrimination, and a lack of appropriate accommodations (Adji, 2021). The pervasive ableist attitudes in society often result in disabled children experiencing exclusion, bullying, and lowered expectations from others (Adji, 2021). Additionally, the medical model of disability, which frames impairments as individual deficits rather than societal barriers, places undue pressure on disabled children to 'overcome' their disabilities (Adji, 2021). The development of coping mechanisms is primarily driven by the pervasive cultural tendency to view disabled people as incomplete or dependent, which can significantly erode their sense of personhood (Luborsky, 1994). In navigating these cultural biases, disabled children must continually assert their worth and capabilities whilst grappling with complex trade-offs between physical functioning, social perceptions, and maintaining a robust sense of self (Luborsky, 1994).

Sutherland et al. (2024) note that women with disabilities face intersecting forms of discrimination based on both gender and disability and compound their experiences of violence and disadvantage, creating unequal power dynamics. Children are not only coping with their disability in an ableist society; they are coping with social rejection, violence, and trauma (Adji, 2021).

How Disabled Children are Expected to Cope with their Disability.

In response to these societal pressures, disabled children in the 1960s developed various coping mechanisms to navigate daily life and maintain their sense of self-worth. These strategies can be exhibited in numerous ways, including denial of their disability, which is often the most prevalent coping mechanism (Lipp et al., 1968). Some children may display aggression, particularly boys, who might express unrealistic demands on their families or blame their parents for their circumstances. Humour can also serve as a coping strategy, enabling children to deflect attention from their disabilities and gain acceptance among their peers (Schechter, 1961). Apathy is characterised by a disinterested and emotionless state that serves as a defence against overwhelming experiences (Schechter, 1961). Others may engage in fantasy, which enables children to escape their reality through imaginative play or daydreaming (Richardson et al., 1964). Other coping strategies include displacement, which consists of redirecting frustration and anger towards others (Pringle, 1964), and a reliance on religious and spiritual beliefs, which can provide comfort and resources for coping. Disabled children often withdraw and have fewer social interactions, which serves as a defence against rejection or negative social experiences (Pringle, 1964). Additionally, projection may occur, where disabled children project their feelings of inadequacy onto others, leading to distorted views of social interactions (Pringle, 1964). Dissociation is also a common coping mechanism involving a lack of connection in thoughts, memories, feelings, or sense of self (Lev-Wiesel, 2005; Şar, 2017).

It is important to note that these coping mechanisms, while potentially beneficial in the short term, may have long-term implications. For instance, Russell et al. (2009) found that physically disabled children are more likely to have suicidal thoughts and are twice as likely to act on these thoughts compared to their non-disabled counterparts. In more severe cases of disability-related trauma, dissociation may occur as a coping mechanism. Dissociation involves the disruption of usually integrated mental functions such as consciousness, memory, identity, and perception (Şar, 2017). In extreme cases, this can lead to Dissociative Identity Disorder (DID), characterised by the presence of two or more distinct personality states within a single individual (Dorahy et al., 2014). The development of DID is thought to result from a complex interaction between traumatic experiences (especially in childhood), developmental processes, and neurobiological factors (Herman et al., 1989; Okano, 2021). Ataria and Somer (2013) argue that internalised othering, when accompanied by childhood trauma, can lead to 'dissociation from one's tormented and conflicted inner world [which] can create a temporary sense of relief by providing the illusion of control' (p. 23).DID is often viewed as a 'highly creative survival technique because it allows people to endure hopeless, overwhelming circumstances and thus preserve some areas of healthy functioning' (Lev-Wiesel, 2005, p. 379).

Critique of the Expectation for Disabled Children to Cope

While accepting that these coping mechanisms are crucial in helping disabled children traverse their daily lives, it is equally important to critique the societal expectation that disabled children should have to cope with trauma, violence, and disabilities. Elklit et al. (2023) emphasise that society bears the responsibility to prevent violence against vulnerable children and to provide appropriate support rather than placing the onus on disabled children to cope with abuse. There is a growing recognition that the focus should shift towards prevention, protection, and intervention rather than expecting disabled children to adapt to an exclusionary environment. Sutherland et al. (2024) strongly argue that the onus for preventing violence should be on changing societal attitudes, structures, and systems rather than forcing disabled children to cope with or prevent violence themselves. They consider this to be a rights-based concern requiring a society-wide approach is needed to address this issue.

In conclusion, my exploration of the coping mechanisms employed by disabled children reveals a complex interplay between individual resilience and societal expectations. These coping strategies, while often necessary for navigating an ableist world, are symptomatic of deeper systemic issues rooted in the cultural imagining of disability. The various coping mechanisms discussed, from denial and humour to dissociation and the development of alternative personalities, highlight the immense psychological burden placed on disabled children. These strategies, while potentially adaptive in the short term, can have long-lasting impacts on mental health and social integration, as evidenced by higher rates of suicidal ideation among physically disabled children.

Importantly, the need for these coping mechanisms points to a fundamental power imbalance in society. Disabled children are often placed in a position where they must constantly negotiate their identity, worth, and place in a world that is not designed for them. This negotiation occurs within a framework of unequal power dynamics, where ableist norms and structures dictate the terms of acceptance and inclusion.

Power Dynamics

The social construction of disability is viewed through the lens of power dynamics. Those who have the authority to define and categorise disabilities (often professionals and institutions) hold significant power over how society perceives and treats disabled children (Birenbaum, 1979).

Understanding the nuances of power dynamics is essential for addressing the challenges faced by disabled children in society. The interplay between ‘power over’ and ‘power to’ shapes the experiences of disabled people, influencing their opportunities for agency and self-determination. In this section, I explore the systemic barriers that hinder inclusivity and the cultural attitudes that perpetuate stereotypes and prejudice against disabled children. I will illuminate the ongoing struggles for empowerment and recognition within educational and social frameworks by examining historical contexts and current practices.

Understanding Power Dynamics

The distinction between 'power over' and 'power to' is pivotal in the discourse of power dynamics, particularly within the context of disability studies. Avelino (2021) defines 'power over' as the capacity of one group to exert dominance over another, a phenomenon that manifests through systemic barriers that limit the opportunities available to disabled people. Conversely, 'power to' underscores the ability to act and achieve objectives, advocating for environments that nurture agency and self-determination. Empowerment initiatives that focus on skill development and advocacy are instrumental in enabling disabled people to reclaim their power (Avelino, 2021). However, such empowerment initiatives must prioritise the voices and leadership of disabled people themselves to avoid perpetuating existing power imbalances.

Hate functions both as a mechanism for acquiring and maintaining power, and because of power imbalances, it operates in complex ways that do not always align with objective power dynamics. The relationship between hate and power is often self-reinforcing (Michener, 2012). Michener (2012) further posits that fear is a fundamental component of hate, particularly within the context of group dynamics. Fear of harm, the unknown, and retaliation can all contribute to the development and intensification of hatred towards outgroups. Understanding this relationship is crucial for addressing and mitigating hate within society. Ideologies that propagate hate frequently exploit fear (Michener, 2012).

In sum, the interplay between 'power over' and 'power to' provides a clearer understanding of power dynamics, particularly as they relate to disabled people. Empowerment initiatives must be conscientiously designed to amplify the voices of disabled people, thereby fostering environments that promote self-determination and agency. Additionally, comprehending the intricate relationship between hate and power and the role of fear therein is essential for devising strategies to mitigate hate and its pernicious effects on society (Michener, 2012).

Social Divides

In the context of disability studies, the intricate power dynamics that significantly influence the lives of disabled children and adults, particularly within educational and social spheres, warrant thorough examination. (Cleall, 2022) posits that the historical disavowal of disability has engendered substantial power imbalances, which have not only profoundly affected disabled people but have also shaped the experiences of those perceived as 'normal'. This disavowal, Cleall argues, fosters a pervasive lack of understanding and empathy among non-disabled people, who often view disabled people through a lens of pity or as spectacles, thereby entrenching social divides and diminishing their perceived responsibility to advocate for inclusivity.

The absence of understanding and empathy can be directly attributed to historical attitudes that have marginalised and stigmatised disability, leading to limited awareness of the lived experiences of disabled children. Wendell (1989) contends that whilst non-disabled people might experience sympathy, genuine empathy is often lacking due to their inability to fully project themselves into the experience of being disabled. Consequently, a societal 'norm' becomes so deeply entrenched that people perceive themselves as separate from and superior to disabled people, resulting in a diminished sense of responsibility for advocating inclusivity, thus reinforcing social barriers (Wendell, 1989). The complex interplay of historical attitudes and power dynamics has created significant social divides and empathy gaps between disabled and non-disabled people, reinforcing barriers to inclusivity and understanding in educational and social contexts.

Michener (2012) elucidates that hate acts as a powerful force for social division by creating stark boundaries between groups, motivating conflict, distorting perceptions, and interfering with empathy and rational problem-solving between groups. This 'us vs. them' mentality separates people into ingroups and outgroups (Runswick-Cole, 2014), further exacerbating the social divide. Shakespeare (2012) highlights a particularly troubling aspect of violence against disabled people, noting that, unlike other hate crimes, perpetrators are often known to their victims. This indicates a complex social relationship that involves betrayal and exploitation, adding layers of complexity to the issue (Shakespeare, 2012). Furthermore, he emphasises that disabled people are disproportionately victims of hate crimes and violence, and society and institutions often fail to address or prevent these crimes adequately. This highlights how hate, social division, and violence against disabled people are deeply intertwined with existing power structures (Burch, 2021a). The intricate web of power dynamics, historical attitudes, and social divisions presents a formidable challenge in the pursuit of inclusivity and understanding for disabled people. The perpetuation of these dynamics not only reinforces existing barriers but also creates new ones, necessitating a comprehensive approach to addressing these issues in both academic discourse and policy implementation.

The power of hate

The hatred towards disabled people is deeply ingrained in historical prejudices, societal attitudes, and media representations (Ralph et al., 2016). Addressing the feelings of hatred towards disabled people needs broader societal change, including more accurate and empathetic media portrayals, better support systems, and a shift in how disability is perceived and treated legally and culturally (Ralph et al., 2016). The relationship between hate and power is presented as multifaceted and self-reinforcing in many cases (Michener, 2018). When people or groups perceive a threat from an outgroup, this fear can quickly transform into hatred. The anticipation of harm or danger from the outgroup can trigger a defensive emotional response, which includes hate (Michener, 2018). This fear of the unknown can lead to the categorisation of unfamiliar groups as enemies, which in turn can foster hatred. Michener (2018) argues that ideologies that promote hate exploit fear. By amplifying fears about outgroups, leaders and propagandists can manipulate people into adopting hateful beliefs and behaviours. This manipulation can create a feedback loop where fear and hate reinforce each other (Michener, 2018).

Social Power

The complex interplay between prejudice, disability, and social power significantly shapes societal attitudes and experiences of disabled people. Petric (2020) argues that prejudice confines disabled people to narrow stereotypes, devaluing their capabilities and worth. This perspective is further developed by Susan Wendell, a disabled feminist scholar, who critiques cultural ideals that ascribe high social value to specific body types while marginalising others (Wendell, 1989, 1996). Wendell's analysis reveals how these ideals alienate both disabled and non-disabled people from their natural bodies, perpetuating a culture that devalues physical diversity and vulnerability. This cultural hegemony serves as a foundation for more overt forms of discrimination and oppression. Englander (2007) posits that hate-based bullying and hate crimes function as mechanisms for establishing and maintaining social power hierarchies, with perpetrators exploiting their dominant position over marginalised groups. Burch (2021) extends this argument, suggesting that the social power behind hate lies in its ability to reinforce societal boundaries and create climates of fear and exclusion. This power imbalance often results in victims' reluctance to report incidents due to fear of retribution.

The relationship between hate and power is complex, as Michener (2012) notes, operating both as a tool for gaining and maintaining power and because of existing power imbalances. This complexity is evident in phenomena such as 'mate crime', described by Shakespeare (2012), where disabled children are befriended for the purpose of exploitation, instilling fear of loneliness and isolation. However, it is crucial to recognise that disabled people are not merely passive victims of these power structures. Burch (2021, p. 75) argues that experiences of hate can also lead to unique forms of knowledge, resistance, and 'affective possibility' in how disabled people navigate their social worlds. This perspective highlights the potential for agency and resilience within the disabled community, even in the face of systemic oppression.

Educational Power Dynamics

The power dynamics between teachers and disabled children shape the cultural imagining of disability within schools. Teachers' authority manifests in many ways, from deciding educational access and accommodations to influencing peer beliefs and social dynamics. As Goodley (2014a) argues, teachers are critical agents in reproducing ableist norms within educational institutions, often unconsciously reinforcing societal expectations of 'normalcy' that marginalise disabled children (Goodley, 2014a). This power dynamic is further complicated by the lack of adequate preparation among teachers to meet the needs of disabled children, which can lead to the perpetuation of stereotypes and misconceptions about disability (Hasson et al., 2024).

The power vested in teachers extends to disciplinary measures and classroom management strategies, which can disproportionately affect disabled children. Fraley and Capp (2024) discuss how some teachers impose strict penalties and lack understanding of disabled children's needs, leading to humiliating practices that marginalise them (Fraley & Capp, 2024). This issue is not new; in the 1960s and 1970s, school environments were often characterised by authoritarian practices, with corporal punishment widely used as a disciplinary measure. Skiba & Peterson (1999, p, 376) argue that educators did not punish children for changing behaviour but rather to assert 'the power of authority,' enabling them to impose harsh punishments indiscriminately.

Education

The systemic failures of adults to protect and empower disabled children create what Giroux (2011) terms a 'culture of cruelty' and a 'discourse of humiliation'. The misuse of power exposes disabled children to what Sadhwani et al. (2020) describe as 'angry brutality' (p.1284). This abuse of authority manifested in teachers and headteachers favouring some children while discriminating against others, often subconsciously or intentionally (Bruneau et al., 2020). This autonomy creates a power imbalance where teachers have considerable control over children without stringent checks and balances (Eckstein, 1966). Children were left at 'the mercy of those who chose to beat them without explanation or justification' (Aron & Katz, 1970, p. 585), a practice that unfortunately persists in some educational settings (Gudyanga et al., 2014).

Teachers' broader socio-political beliefs and values can affect their attitudes towards inclusion. Those with more progressive or less authoritarian views support inclusive practices (Avramidis & Norwich, 2002). The severity of punishment inflicted under the guise of discipline serves as a stark indicator of the long-term impact this violence had on children's mental health (Gunnell et al., 2009). Examining the injustice and brutality imposed on children sheds light on the power dynamics that dominated educational institutions during this era. Teachers' attitudes stay pivotal in successfully implementing inclusive education policies in contemporary educational settings. Their acceptance and commitment significantly influence the effectiveness of these policies (Avramidis & Norwich, 2002). The power to define what constitutes 'normal' academic progress or behaviour gives teachers significant control over how disability is perceived and responded to within the school context (Maunder, 2013; Voulgarides et al., 2023).

Despite the ideology of inclusive education, policies and practices often marginalise disabled children in educational settings (York et al., 1972). Many face exclusionary barriers that impede participation, illustrating a systemic failure to accommodate diverse learning needs (Goodley & Runswick-Cole, 2011b; Hassan, 2024; York et al., 1972). Disabled children are often at a power disadvantage compared to their peers, making them more vulnerable to peer violence. The higher rates of violence experienced by disabled children show an imbalance in peer relationships that puts them at greater risk (Banks et al., 2016).

Hidden Power

Visible and invisible power imbalances create barriers for disabled children, affecting their social, familial, and personal development. The cultural emphasis on physical ability disadvantages them, affecting self-perception and limiting social interactions. Research from the 1960s often reinforced these biases, ranking disabilities and perpetuating ableist attitudes (Goodman et al., 1963; Richardson et al., 1964). Goodman and colleagues (1963) used pictures of obese and disabled bodies to be categorised according to preference. Their findings suggest that societal values and implicit biases regarding physical appearance and disability are shaped as they socialise or from the adults around them. While these findings are significant when images of disability are used to create a hierarchy of preference, they can reinforce existing societal biases and stereotypes. Inadvertently, this method of research, by its nature, suggests that some disabled bodies are more acceptable or preferable than others, thereby perpetuating a hierarchy of impairments (Deal, 2003). Many disabled children are pressured to conform to societal norms through medical interventions aimed at ‘normalising’ their bodies (McLaughlin & Coleman-Fountain, 2014). Suggesting bodies can be ranked reflects a broader societal tendency to view disability as a deficit that needs to be remedied rather than a valid identity. By adopting a more nuanced understanding of disability, research can contribute to a society that values all bodies equally. Pringle (1964) asserts that disability research of this era is flawed due to poor research design and lack of representative samples, leading to ongoing debates about the reliability of existing literature in this field. Highlighting how societal structures and attitudes, often invisible or taken for granted, can create significant barriers for disabled children. It also points out that even academic research has historically contributed to these biases, emphasising the pervasive nature of ableism in various aspects of society.

In conclusion, the literature review reveals a complex web of power dynamics that create a troubling landscape for disabled children, characterised by systemic barriers, cultural prejudice, and inadequate support within educational settings. Despite progress towards inclusivity, the persistence of ableist norms and the marginalisation of disabled voices continue to pose significant challenges. For genuine empowerment to occur, it is crucial to prioritise the leadership and perspectives of disabled people, fostering environments that promote agency and self-determination. Addressing these power imbalances is vital for creating a fairer society that values diversity and inclusivity.

Bullying and Violence

Building on our understanding of power dynamics, in this section, I turn my attention to a critical manifestation of these dynamics, bullying, with a particular focus on its impact on disabled children. The 'bodymind' concept underscores the intricate connection between our physical selves and our mental experiences, both of which are profoundly shaped by societal norms and expectations. In schools, these norms often create hierarchies that can lead to the marginalisation and victimisation of those perceived as different.

Bullying, especially when directed at disabled children, represents a complex interplay of social, cultural, and institutional forces. It is not merely an interpersonal issue but a reflection of broader societal attitudes towards disability and difference. I will explore how the neoliberal framework of education, combined with deeply ingrained ableist attitudes, contributes to an environment where bullying can flourish. I will examine the various lenses through which bullying has been studied and consider how the understanding of this phenomenon must evolve to address its root causes effectively. By analysing the definitions, manifestations, and impacts of bullying, particularly disablist bullying, I aim to uncover the systemic nature of this issue and its far-reaching consequences. This exploration will challenge us to reconsider our approaches to bullying prevention and intervention, emphasising the need for a more holistic, culturally sensitive, and rights-based approach to creating truly inclusive educational environments.

The ‘bodymind’ concept emphasises the deep connection between our bodies and minds, shaped by the societal ‘norms’ that dictate how we perceive and value different bodies. Society has created certain ‘rules’ or expectations about how bodies should look and function. These rules are often unwritten but powerful and visible in the socio-political rejection of bodies that fail to meet normative standards (Bell, 2011; Boda, 2023; Edwards & Maxwell, 2023; Wolbring, 2021). Unfortunately, bodies that do not fit society's expectations are often treated unfairly, from subtle discrimination to outright exclusion. As a female child with a physical disability, I was more likely to experience violence (Stephens, 2021) and sexual abuse (Alriksson-Schmidt et al., 2010), and as a disabled child more likely to be bullied (Chatzitheochari et al., 2014). Having experienced this triad first-hand, I have a personal stake in this research, and my theory is that without addressing values and attitudes of the neoliberal cultural imagining of education and disability, sustained hierarchies of power will continue to drive forward and maintain the sequence of trauma and systemic violence.

Bullying has reached epidemic proportions in schools, and the fact that we see it seeping into society, prisons, workplaces, and neighbourhoods demonstrates it to be more than a school problem (Brooks, 2014). The significance and long-term impact of bullying has been recognised globally (Bortolon et al., 2017; Canty et al., 2016; Hamza & Jabir, 2022; Kirves & Sajaniemi, 2012; Mittal, 2017; Nasheeda et al., 2017; Nikiforou et al., 2013; Nunn, 2010; Rigby, 2004; Volk et al., 2012). The United Nations Educational, Scientific and Cultural Organisation (UNESCO), based on the report ‘Behind the Numbers: Ending School Violence and Bullying,’ suggests the global impact of bullying and its ability to inhibit learning and infringe on children’s rights is reaching epidemic proportions (UNESCO, 2019). While the recommendations of UNESCO’s (2019) report are aimed at all countries, these recommendations are familiar to the UK.

In the UK, the growing epidemic of school bullying was revealed in the Elton Report' Discipline in Schools', set up to investigate the ‘considerable suffering’ and ‘long-term damage’ caused by bullying in English schools (Sharp & Smith, 1991, p. 47). These findings subsequently led to a government-funded initiative in Sheffield, ‘Don't suffer in silence’ (1994, 2000, 2002), followed by anti-bullying strategies and policies that made headteachers legally responsible for implementing bullying prevention measures (DfE, 2017). There is no shortage of guidance for educators in the UK, offering legislation and advice on tackling bullying (DfE, 2016, 2017; Respect for All, 2017; The Equality Act 2010). Nevertheless, statistically, bullying is as prevalent, if not worse, today as before policies and strategies were introduced. Such poor results would suggest that schools alone cannot prevent or reduce bullying (O'Brien, 2019; Smith & Sparkes, 2008; Woods & Wolke, 2010).

Bullying is recognised to have a negative impact on every child, either as a victim, bully, bystander, or fear of being bullied. While this is accepted as damaging (Englander, 2007), there is an air of acceptance within education (Catone, 2015) dismissed as an inevitable stage of development (Ringrose & Renold, 2010). This acceptance has failed to recognise the ubiquitous effect on mental health and well-being in adulthood, evidenced by the UK's growing number of mental health issues directly related to bullying in school (Ganesan et al., 2021; Mental Health Statistics for England: Prevalence, Services and Funding, 2020; Takizawa et al., 2014). A more significant consequence of ignoring bullying can lead to suicidal thoughts, suicide, and murder (Klomek et al., 2007; Wagner, 2007). This global phenomenon and its tragic consequences stunt academic and economic growth. Researchers seek answers and search for an educational strategy to prevent or minimise childhood suicides and bullying-related revenge killings (Polanin & Vera, 2013). Nevertheless, the drive to address bullying remains superficial (Astor et al., 2005; Polanin & Vera, 2013).

Many lenses have been used to research bullying. A psychological lens is frequently used to establish the power dynamics between 'victims' and 'bullies' and the psychology behind these dynamics (Arseneault, 2018; Catone, 2015; Ganesan et al., 2021; Kelleher et al., 2008; Moffa et al., 2017; Narvaez, 2014; Sharp et al., 2000; Smith & Hart, 2002). There is a strong focus on personalities and power differentiation, adopting the traditional view that bullying is born of maladaptive development. The aim is to 'cure' the 'bully' and empower the 'victim' (O'Brien, 2019); both are individualised and pathologized (Ringrose & Renold, 2010, p. 576). Applying this approach to the bullying of disabled children exonerates the perpetrators 'because there is something at 'fault' within the disabled person…. so they are blamed for their victimisation' (Liasidou & Ioannidou, 2021, p. 501). It is a lens that tends to homogenise bullying experiences and ignores the sociocultural influences, complexities of childhood, and the multifaceted nature of bullying (O'Brien, 2019).

The socio-ecological and sociocultural lens (Brooks, 2014; Hong et al., 2015; Maunder, 2013; Rigby, 2004) consider the 'power relations of political, historical, and ideological contexts' of bullying and how they influence children's behaviour in educational spaces (Walton, 2005, p. 55). Bullying is not seen as a fixed behaviour but a socially constructed concept that evolves over time and in different contexts (Ganesan et al., 2021), rooted in the marginalisation and oppression of certain social groups (Walton, 2005). Schools have histories, social norms, and practices that are consistent and reproduced through the participation of peers and teachers (Maunder, 2013). Bullying arises from this cultural context, peer culture dynamics, and the enforcement of social norms within a school or community setting (Hong et al., 2015). The socio-ecological lens looks more at understanding how characteristics of children interact with their different environmental contexts or systems to either promote or prevent bullying involvement.

The solution to ending bullying is not straightforward; Rigby (2004) suggests that schools need to address prejudice and discrimination within the curriculum, which would also indirectly address bullying by promoting cooperation, emotional sensitivity, and critical thinking (Rigby, 2004). However, the neoliberal education system, with its emphasis on market-driven principles, standardised testing, and preparing children for the workforce, is not conducive to nurturing critical thinkers (Goodley, 2014a; Romstein, 2015; Runswick-Cole, 2014). Instead, it prioritises the acquisition of skills and knowledge that serve the needs of the economy over the development of independent thinkers, cooperative behaviour, emotionally sensitive attitudes, or critical minds (Romstein, 2015). The dismissive nature of neoliberalism towards difference advocates that 'an individual is responsible for their well-being, regardless of the conditions he/she lives in' (Romstein, 2015, p. 327). The neoliberal school is built around the concept of 'winners and losers', where children are held up to a scale of normativity, academic standards and competition, suggesting bullying is a developmental stage to overcome (Ringrose & Renold, 2010, p. 575). As social institutions, schools are fundamental in shaping the 'norms,' values, and power structures that influence bullying behaviours (Duncan, 2013). Duncan (2013) postulates that a neoliberal education system is willing to accept that 'the cost of bullied children in schools is a price society will pay to uphold an aggressively compulsory system aspiring to economic competitiveness and social discipline rather than to real social inclusion' (Duncan, 2013, p. 261).

Twemlow & Sacco (2013) argue that schools are a 'natural portal of entry into community violence' and that 'bullying is not a disease of people, but, instead, a symptom of a social process gone wrong' (p.73). School leaders seem to negate the messiness of childhood in favour of a one-size-fits-all approach, telling children what bullying is and is not (Brooks, 2014). Bullying should be viewed as a 'universal dysfunctional social process' in which children are not responsible for this dysfunction (Twemlow & Sacco, 2013, p. 74). Bullying should be seen through a multi-level lens, considering both individual risk factors as well as the broader social environments and contexts that can enable or prevent bullying behaviours (Hong et al., 2015).

Defining Bullying

How we define bullying and how it is perceived and responded to is influenced by societal norms, power dynamics, and the broader cultural context. The Department for Education (DFE), in the document 'Preventing and tackling bullying' (2017), defines bullying as a 'behaviour by an individual or group, repeated over time, that intentionally hurts another individual or group either physically or emotionally' (DFE, 2017, p. 7). This document sets out the legal obligations to have measures in place to address school bullying. It states that 'bullying in itself is not a specific criminal offence in the UK' (DFE, 2017, p. 6); subsequently, the UK does not have a legal definition (Long et al., 2018). Long and colleagues (2018), on behalf of the House of Commons, use the definition of DFE (2017) and the inclusion of repetition intent. In addition, they suggest that to qualify as bullying, it should be 'aimed at certain groups because of race, religion, gender or sexual orientation' and that it takes the 'form of physical assault, teasing, making threats, and name-calling' (Long et al., 2020, p. 4). The power of these political descriptors lies not in what is stated but in what is neglected. For example, there is no mention of disability as a targeted group. Although the document later refers to the 'vulnerability' of disabled children, I would argue that disability should always be included alongside race and gender to demonstrate equal weight and recognition of disability as a marginalised group.

The range of behaviours included in the UK definition reflects physical and verbal acts, neglecting to mention power imbalances and the exercise of social control (Smith, 2016; Volk et al., 2014). Repetition is also contested; it is argued that a single severe incident should also be considered bullying due to the impact on the victim rather than just the nature of the acts (O'Brien, 2019; Smith, 2016; Volk et al., 2014). The UK definition is broad and vague, making it difficult to consistently identify and address bullying behaviours, leaving it open to interpretation. However, more importantly, behaviours are missed or dismissed depending on the personal view of the teacher (Furedi, 2017). The lack of a clear, consistent legal definition has made it difficult for schools to identify and respond to bullying incidents effectively. Schools need explicit guidance and a more standardised definition of school bullying (Furedi, 2017).

There is a dissonance between academic and government definitions, but many fail to address bullying as unjustified (Lester et al., 2012; Smith, 2004). Volk and colleagues (2014) from the USA offer a definition based on adolescent research and suggest that bullying is 'aggressive goal-directed behaviour that harms another individual within the context of a power imbalance' (Volk et al., 2014, p. 328). This definition is based on the intentionality of bullying and the fact that accidental or reactive behaviours should not be classed as bullying. Volk and colleagues (2014) include power differences, both physical strength and social power, based on children's feedback, who believe they do not have the power/ability to resist or protect themselves.

When asked to define bullying, children do not consistently refer to repetition or intent, which challenges adult-centric definitions used in research. A meaningful definition would be determined by children or at least in conjunction with adults (O'Brien, 2019). Repetition is generally included to avoid trivial instances (Olweus, 1993). However, the level of harm inflicted outweighs the frequency. To decide if a child has been bullied or victimised, 'harm from the victim's perspective is likely to be the most powerful predictor of the outcomes of that victimisation'(Volk et al., 2014).

Bullying Disabled Children from a Cultural Perspective

I have previously discussed how dehumanisation leads to Othering, violence, and systemic oppression. Dehumanisation is evidenced in schools in the contempt for difference and disability that enables children to violently attack their disabled peers without empathy, compassion, or shame (Provis, 2012). Goodley and Runswick-Cole (2011) advocate that disablism/ableism is a process that distorts disability and damages social relationships, further suggesting that violence is the product of an education system that advocates or fails to challenge disablism.

Disablist bullying is a specific form of bullying that targets disabled children or children identified as having special educational needs and can take various verbal, social, and physical forms defined as ‘hurtful, insulting or intimidating behaviour related to a perceived or actual disability’ (Purdy & Mc Guckin, 2015, p. 202). Disabled children face complex forms of physical, cultural, and systemic violence (Ktenidis, 2022b). Purdy and McGucking (2015) identify indicators of disablist bullying as:

- The regular use, consciously or unconsciously, of offensive and discriminatory language
- Verbal abuse and threats
- Public ridicule
- Jokes about disability
- Exclusion from social groups
- Refusal to cooperate with someone because of their impairment.
- Refusing to meet a disabled person's access needs (Purdy & Mc Guckin, 2015, p. 202)

Disablist bullying is socially constructed, traversing oppression and discrimination, which is evidenced in their ‘lived’ experiences of disability as ‘difference’’ (Liasidou & Ioannidou, 2021, p. 500). It is a form of disability discrimination and a violation of disabled children's rights to be treated with dignity and respect (Ktenidis, 2020; Liasidou & Ioannidou, 2021). Ktenidis (2022) offers a counter-narrative to dominant discourses around bullying that often portray disabled children as passive victims or suggest their disability triggers the bullying against them. He did this by focusing on the voices and lived experiences of young people with dwarfism. He calls for a sociological analysis of bullying that examines how schools and disabling cultural attitudes perpetuate violence against disabled children.

Disabled children are not responsible for the disablist bullying and violence they endure. The responsibility lies with the broader societal attitudes and structures that enable such discrimination (Ktenidis, 2020). Disabled children live in a society where disabled adults are disproportionately exposed to violence and hostility, hate crimes, discrimination and stigmatisation that occurs in public and private spaces (Edwards & Maxwell, 2023). School is an institution that mimics sociocultural expectations, and it is a place where disabled children's experiences are not dissimilar to those of disabled adults. Both occupy the 'spatio-temporal dynamics of ableist spaces' of 'un/safety' again, increasing vulnerability (Edwards & Maxwell, 2023, p. 171). Walter Gershon (2023) suggests schools are a reproduction of society and states that American 'schools have a gun problem because the nation has a gun problem' (Gershon, 2023, p. 301). The same cultural predispositions for disabled adults exist for disabled children (Elklit et al., 2023).

In conclusion, I have argued that schools alone have tried to resolve the issue of bullying without success. Societal attitudes and structures enabling discrimination need to be addressed inside and outside education. I have previously discussed educational structures and the cultural imagining of disability intersecting to construct discursive places 'within which childhood experiences are formed and influenced by dominant conceptualisations of normality' (Liasidou & Ioannidou, 2021, p. 501). The culturally accepted 'normative' assumptions have gone unchallenged and have become profoundly embedded in society and schools (Holt & Espelage, 2007). Reconceptualising bullying as systemic abuse recognises that the 'violence experienced by disabled children and their families says more about the dominant culture of disablism than it does of the acts of a few seemingly irrational, unreasonable, mean, violent individuals' (Goodley & Runswick-Cole, 2011a, pp. 1–2). While society continues to isolate bullying as the responsibility of the people involved and neglects the sociocultural and institutional factors that sanction it, nothing will change (Walton, 2005). There is a sociocultural responsibility to change how children are influenced, with a focus on disability and difference. The bullying of disabled children is systemic violence, and once Othered, they are viewed as less than human, dehumanised and animalistic. Bullying often leads to taunts that compare them to animals, allowing them 'to distance themselves emotionally and physically', enabling inhumane treatment free from moral obligations (Shaffner, 2019, p. 6). The impact of this rejection is far-reaching and will remain with the child for life.

Bullying is Violence

Muehlenhard and Kimes (1999) discuss the social construction of violence and suggest that violence is constructed in much the same way as disability. It reflects the power relationships and discourse of the time. They claim that power-driven definitions are privileged by those orchestrating them. For example, those defining violence or abuse may exclude and dismiss their behaviours from descriptions or have a hidden agenda, creating bias and inaccuracy (Muehlenhard & Kimes, 1999). As with disability, definitions of violence can create a discourse that influences behaviour by outlining what is acceptable (‘normal’) and unacceptable (Clifton, 2020; Muehlenhard & Kimes, 1999).

Hollomotz (2013) argues that disability leads to oppression, which results in violence, which reinforces oppression and marginalisation. Experiences of oppression and violence are so ingrained in disabled people's daily lives that they no longer understand where oppression ends, and violence begins.

> ‘Violence is an act that causes pain, suffering, societal prejudice, humiliation, ostracism, marginalisation or even death. Any action carried out intentionally or unintentionally, but which affects an individual negatively in an injurious or destructive manner, maybe perceived as violence. Violence may be political, social, emotional or religious, depending on the situation surrounding a given society’ (Ifechelobi, 2017, p. 125).

This definition provides a more comprehensive understanding of violence, viewing it as a multifaceted phenomenon that extends beyond physical harm. It acknowledges the diverse ways in which violence can evolve, from overt acts to those more subtle forms of oppression, marginalisation, and discrimination. Recognising the importance of considering the societal and cultural context in which violence occurs, as perceptions and experiences of violence can vary across different communities and situations. As I reflected on the violence I encountered throughout school (See Table 2), this definition recognises the violence outside of that identified by UNESCO (2019). Figure 2 - Conceptual framework of school violence and bullying (UNESCO, 2019, p. 11) identifies three categories of school violence: physical, psychological, and sexual. It recognises that school bullying is a form of violence that nestles in between physical and psychological. Bullying and violence are often used interchangeably within research and society. Violence makes a more significant statement than bullying; as I have stated, bullying is seen as a natural stage of development (Ringrose & Renold, 2010). The same thing cannot be said about violence, indicating that a discourse change is needed to replace bullying with school violence to avoid it being trivialised and overlooked.

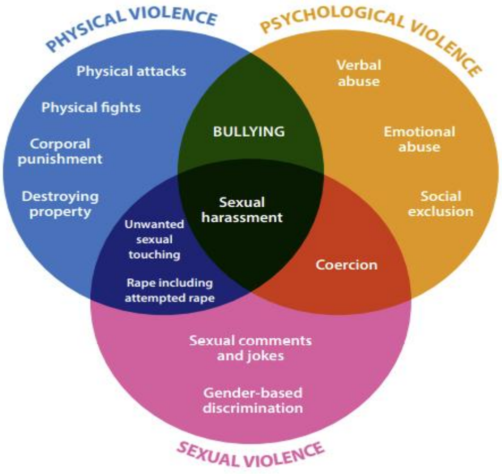


Figure 2 - Conceptual framework of school violence and bullying (UNESCO, 2019, p. 11)

The conceptual framework focuses on individual-level factors of violence, failing to consider the broader social-ecological context. I created Table 2 to illustrate additional forms of violence taking place in schools. Incorporating these into the conceptual framework and adopting a more inclusive approach can better support schools and policymakers in creating safe and inclusive learning environments for all children, regardless of their gender, ability or cultural background (Fenaughty, 2019).

Oppression and violence are mutually detrimental (Hollomotz, 2013) and are both critical drivers for violence and disablism, driven by the unwillingness of normative bodies to relinquish ability and privilege (Wolbring, 2021). It underscores the need for a comprehensive, disability-inclusive approach to addressing violence, which goes beyond just tokenistic legal protections and tackles the underlying societal attitudes and structures that enable such violence to occur (Hollomotz, 2013). Ableist schools cannot be relied upon to stem violence because the cultural imaging of disability is so embedded (Ganesan et al., 2021). Violence is no longer exceptional or rare; it is routinely accepted as part of disabled lives (Ganesan et al., 2021).

Table 2: Taxonomy of disablist violence

Taxonomy of Disablist Violence	
Inflicted Violence	
Epistemic Violence	
Physical, sexual, emotional, and systemic violence	The silencing of the Other, epistemic injustice and denial of authenticity The use of language and the politics of agency is rooted in 'epistemic violence'. (Kabel & Phillipson, 2021, p. 6)
Violence as a Control Mechanism	
Sexual violence epistemic violence	Violence is often used as a means of control and domination by those in power over marginalised groups. (UNICEF, 2005)
Cultural Violence	
Rape, exorcism, unnecessary medical interventions	Socially sanctioned violence and ease of victimization of disabled children. (UNICEF, 2005) Cultural narratives and stereotypes portraying certain groups as ability-deficient have been used to justify violence, oppression and discrimination against them. (Wolbring, 2021)
Interpersonal Violence	
Physical assault, sexual violence, bullying, and emotional abuse	Interpersonal violence refers to the intentional use of physical force or power, threatened or actual, against another person or group that results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation. (UNICEF, 2005)
Infanticide and 'Mercy Killings'	
Extreme physical violence.	Denying a child the right to life is justified by beliefs that the child is evil, will bring misfortune, or is better off dead. (UNICEF, 2005)
Structural violence	
Power imbalances, marginalisation, oppression, adversity, and trauma	Structural violence refers to the systemic ways in which social, political, and economic structures harm or disadvantage people or groups (Wolbring, 2021)
Symbolic Violence	
Language, social structures, and cultural norms,	Symbolic violence refers to the subtle, often invisible forms of violence that are perpetuated through cultural norms, social structures, and language. Symbolic violence of 'being talked about' in simplistic ways, generalising, in both emotional and cognitive terms. (Ahmed & Blount-Hill, 2022, p. 95)
Sociocultural Violence	
Systemic Violence	
Policies, practices, and norms	Systemic violence refers to the violence that is embedded within social, political, and economic systems and structures, often perpetuated through policies, practices, and norms that disadvantage certain groups while privileging others (Goodley & Runswick-Cole, 2011a, p. 611)

Humiliation as violence

Neoliberal educational policies have been criticised for fostering exclusionary practices that marginalise disabled children. Giroux (2011) argues that these policies have normalised humiliation, creating a 'culture of cruelty' that legitimises organised violence against those deemed 'disposable'. This approach, rooted in hyper-individualism, has cultivated a society that 'has learned to hate' (Giroux, 2011, p. 42). Humiliation, whilst not necessarily involving physical harm, can cause severe emotional and psychological consequences, and this may include low self-esteem, paranoia, depression, anxiety, and even post-traumatic stress disorder (Chen, 2023; Collazzoni et al., 2014). Fernández et al.(2015) define humiliation as the profound dysphoric feeling associated with being unjustly degraded or devalued, particularly in terms of one's identity.

The concept of 'Public Humiliation Type Education' (PHTE) has been introduced by Chen (2023), describing situations where educators employ humiliating tactics to control and oppress children. This approach creates a self-perpetuating cycle of trauma representation and oppression, particularly affecting disabled children who experience these tactics as part of their educational environment. Fraley and Capp (2024) contrast oppressive disciplinary practices with more inclusive approaches that value diversity and understanding. They argue for a shift from 'power over' to 'peace power' methodologies, which would create a more supportive and inclusive educational environment for disabled children.

The psychological impact of humiliation is profound and far-reaching. Collazzoni et al. (2014) distinguish humiliation from shame, noting that while shame is an internal negative self-reflection, humiliation depends on interpersonal interactions and is often seen as undeserved by the victim. They also link humiliation to depression and increased risk of suicide, particularly in cases of childhood bullying. Lindner's theory of humiliation (2001, 2003, 2007) posits that humiliation is a universal human experience that occurs when an individual or group is subjected to a loss of dignity or status. Lindner’s theory argues that for most of human history, humiliation was seen as a legitimate tool for maintaining hierarchical social order (Lindner, 2001). However, in modern contexts, this view is increasingly challenged. Humiliation has become viewed as a violation of human dignity and rights rather than an acceptable social tool (Lindner, 2001). The work of Judith Herman (2015) highlights the connection between humiliation and the development of trauma-related disorders. Herman suggests that dissociative identity disorder (DID) can result from humiliation in the same way as physical, sexual, or emotional abuse. This perspective is supported by (Ataria & Somer, 2013), who describe dissociation as a defence mechanism revealing the trauma of being the 'Other'.

In conclusion, in light of the pervasive nature of bullying, particularly disablist bullying, in schools, it is clear that current approaches are falling short. The complex interplay of power dynamics, societal attitudes, and systemic issues calls for a fundamental shift in how we conceptualise and structure our educational environments. This understanding naturally leads to the consideration of the principles and practices of inclusive education. Inclusive education represents a paradigm shift from traditional models that often marginalise or segregate disabled children. It offers a promising approach to creating school environments that not only prevent bullying but also celebrate diversity, promote equality, and foster a sense of belonging for all.

By embracing inclusive education, there is an opportunity to create learning environments that are not only safer for disabled children but also richer and more equitable for all. In the next section, I examine the principles of inclusive education, exploring how this approach can transform schools into spaces that actively combat bullying and promote the full participation and development of every child, regardless of their abilities or backgrounds.

Inclusive Education

In this section, I discuss inclusive education as a vital framework aimed at ensuring that all children, regardless of their abilities or disabilities, have equal access to quality education within mainstream settings. This approach challenges long-standing ableist ideologies that have historically marginalised disabled children, viewing them as inferior and in need of segregation. The shift began with significant reforms like the Warnock Report (1978) and the Education Act (1981), which introduced the concept of Special Educational Needs (SEN), emphasising the importance of recognising every child's right to education. Despite these advancements, the UK education system continues to face challenges in fully implementing inclusive practices. Issues such as inadequate teacher training, systemic biases, and a focus on standardised testing often hinder the successful integration of disabled children into mainstream classrooms. As I explore the complexities of inclusive education, it becomes clear that addressing these barriers requires a comprehensive approach that involves policy changes, enhanced teacher training, and a cultural shift towards valuing diversity in education. Ultimately, inclusive education aims to create a more equitable and supportive learning environment for all students, fostering a sense of belonging and promoting their overall well-being.

The English education system continues to adopt ableist ideologies that promote the idea that disabled children are inferior and need to be segregated and managed (Annamma et al., 2013). The Warnock Report (1978) and the subsequent 1981 Education Act marked a significant shift in understanding. These reforms challenged the notion that there were ‘two types of children, the handicapped and the non-handicapped.’ Instead, they introduced the concept of ‘special educational needs’ (SEN), which focused on the educational needs of children rather than their impairments. This shift aimed to integrate disabled children into mainstream education, recognising them ‘as learners with an entitlement to education’ rather than mere recipients of care (Armstrong, 2007, p. 8)

To understand inclusive education, we first must understand the purpose of education and how it contributes to the socialisation of children. If we do not question the purpose of education, there is a ‘risk that statistics and league tables’ dictate its purpose (Biesta, 2009, p. 44). The UK education system is undoubtedly geared towards exam results, making the question of education's purpose moot. It is a system that places value only on what can be measured and fails to ‘engage in measurement of what we value’(Biesta, 2009, p. 43). To rehumanise education, we should assess its role for all members of society and if the ‘neoliberal destruction of social solidarities in favour of competitive individualisation’ works for these members (Beckmann & Cooper, 2005, p. 168). The question for an inclusive education system is ‘what constitutes a good education, rather than just paying attention to effective education’ (Biesta, 2009, p. 43). Such measures will require a multi-pronged approach involving policy changes, training, accountability measures, and a cultural shift toward true inclusion.

This systemic failure to adapt the education system to accommodate the diverse learning needs of disabled children has been a persistent challenge (Goodley & Runswick-Cole, 2011a; Hasson et al., 2024; Pless, 1969; Tizard, 1966; Watson, 2023), the citations here demonstrate how these failures have stemmed many decades. The drive for inclusive education was built into the Education 2030 Sustainable Development Agenda under Sustainable Development Goal 4 (SDG4) to be achieved through policy, guidance, capacity development, and monitoring. Disabled children globally have the right to be educated in an inclusive education system (Human Rights Code, 1990; United Nations Convention on the Rights of the Child, 1989), a goal that, in practice, is proving problematic, with many barriers being identified (Robertson, 2022). Wiseman & Watson (2021) suggest that the lived experience of school for many disabled children, targeted because of their disability, is bleak, and the daily occurrence of violence erodes their well-being, sense of safety, and belonging.

A comprehensive school system for all children in a catchment area (located in their neighbourhood) regardless of ability was the imagining of the 1960s. However, disabled children were placed into the normative bodymind hierarchy of exclusion from mainstream education (Henderson, 1968). The Plowden report (1967) ‘warned’ educators to be prepared to face the challenges of severe and complex ‘handicapped’ children due to medical advances and integrated education (Lister, 1970; Plowden, 1967). However, physically ‘handicapped’ children were in the 1960s routinely placed in special education, which was deemed the best place for them (Pless, 1969). There was little thought to what was being taught in special schools or how children cope emotionally within their school environment (Robinson, 1969). The idea was that physically disabled children were being introduced to new interactions and engaging with the outside world. A world they otherwise may not access, which supersedes educational content, the aim was to give ‘him’ a sense of worth and achievement (Pringle, 1964).

However, this was a time when it was assumed that physically disabled children were also all cognitively impaired, and they struggled with the emotional adjustment to their new surroundings (Cruickshank, 1951; Gever, 1970; Pless, 1969; Pringle, 1964; Schechter, 1961). It was argued at the time that the emotional and educational adjustments for physically disabled children were hampered by fear, anxiety, and guilt, resulting in below-average attainment and a less-than-satisfactory social adjustment (Cruickshank, 1951). In reality, the education in special schools was inadequate, and all children's progress was ‘if anything, retarded’ (Pless, 1969, p. 256). Kellmer Pringle (1964) identified a lack of data regarding physically disabled children in special schools; however, he suggested that there was some evidence that their behaviour was not dissimilar to that of ‘able-bodied’ counterparts in mainstream education.

The Plowden report (1967) championed inclusive education, presenting an idyllic education system for ‘some’ ‘handicapped’ children. However, children were placed into ' regular classrooms’ without support and teacher training (Plowden, 1967). Teachers have been demanding training to help them educate disabled children, yet it has been a slow or non-existent process (Pritchard, 1960). Evidently, this problem continues as disabled children suggest their needs should be met by teachers who are trained to understand these needs (Souza, 2023). ‘Over 60% of mainstream teachers in England believe their initial training did not adequately prepare them’ to meet the needs of disabled children (Hasson et al., 2024; Iarskaia-Smirnova et al., 2024, p. 2). Training is essential for changing teachers' attitudes towards disability, and inevitably, teachers' attitudes dictate the success of inclusive education (Iarskaia-Smirnova et al., 2024).

Inclusive education can provide significant social and academic benefits if implemented thoughtfully with the necessary support and resources (Hasson et al., 2024). However, the reliance on ‘normative’ developmentalism is a culture of ‘norms’ that permeate educational spaces across all ages and continues to jeopardise successful inclusive education (Goodley & Runswick-Cole, 2011a). This method of assessment indoctrinates children to the social and cultural perception of the ‘normal’ bodymind and negative attitudes towards disability from an early age (Abberley, 1987). Disability becomes a concept for separating groups of children according to their impairment, embracing the medical model of disability, and creating an official discourse that disseminates inequality, exclusion, and ‘Otherness’ (Brzuzy, 1997; Haegele & Hodge, 2016; Jayara, 2020). We are left with an ableist educational system that raises questions about equality and inclusion within an education system that promotes able-bodied privilege (Dirth & Branscombe, 2017; Moriña & Carnerero, 2022). This kind of ableism ‘operates at the macro (legal), miso (organisational), and micro (child and teacher) levels, shaping how disability is perceived and responded to within educational systems’ (Voulgarides et al., 2023, p. 5).

Many perceived barriers to inclusive education seem to be embedded in the entrenched interests and biases of the educational elite, the lack of coordination and coherent policy, and the failure to view education as a comprehensive social service rather than a system for training an academic elite (Jordan, 1968). The fundamental barriers include a lack of training, finances, administration, responsibility, public understanding, the severity of child needs, and a lack of resources (Reynolds, 1962). UNESCO (2009), however, from a global perspective, suggested that the barriers are linked to policy, legislation, data, system-wide approaches, infrastructure, teacher capacity, curriculum, and monitoring. This criticism from UNESCO highlights the need to overhaul the education system and adopt a comprehensive, multi-faceted approach to promoting inclusive education, starting with policymakers in each country. Later, we begin to see that the barriers move towards unfair assessment processes, resource allocation, attitudinal resistance, definitional ambiguity, and inadequate support for mainstream schools, which indicates a more in-depth look at the practicalities of inclusive education (Farrell, 2001). Some ten years later, Goodley (2014) draws attention to how the cultural imagining of disability and the persistence of deficit views are driven forward by powerful language that constructs and perpetuates negative perceptions of disability. Here, we see education being linked to the wider population and its role as a barrier to inclusive education. Taking the blame for exclusionary practices away from schools by identifying policy-practice gaps (Goodley, 2014b).

The conceptual ambiguity around inclusion is created by a lack of clear directives on what inclusion is and how this plays out inside authentic educational establishments, which is a substantial barrier to inclusive education (Merrigan & Senior, 2023). Indeed, all the barriers considered thus far will remain until the underlying ableist assumption is that mainstream education is ‘normal’ (Merrigan & Senior, 2023). Inclusive education continues to be troubled by ableist stereotypical assumptions driven by a misguided perception of ‘normal’, driven by those who have the power to manipulate language and facts, assigning roles based on false ‘normative’ expectations (Hay, 2016). Merrigan & Senior (2023) suggest that inclusion should be redefined as the responsibility of the entire education system, including special schools, to reach out and provide equitable access to learning for all children rather than just focusing on placement in mainstream settings (Merrigan & Senior, 2023). I would, however, suggest that tackling ableist attitudes is a cultural responsibility and must be addressed outside of educational spaces first or alongside. The dismantling of systemic barriers and directly supporting the well-being of disabled children are paramount to successful inclusive education, but overcoming these barriers requires a radical rethinking of the purposes and practices of education (Goodley, 2014b).

UK schools and education are being built on the ableist foundations of eugenic/neoliberal education policies, segregation, the prioritisation of academic standards, and harmful attitudes/discrimination (Goodley, 2014b). Ableist attitudes and discrimination by educators and systemic issues rooted in eugenics continue to have a detrimental impact on disabled children's well-being, safety and academic success (Bumgardner, 2023). Disabled children are left unprotected by an ableist system that lacks critical examination of the exclusionary practices in the contemporary inclusive classroom, allowing disabling exclusionary education spaces to continue under a pretence of inclusion (Watson, 2023).

The Consequences of a Failing Inclusive Education System

The legacy of failed attempts at inclusion causes disabled children to be perceived as having fewer rights and less social value than their ‘normal’ peers (Wiseman & Watson, 2021). Education represents the power of knowledge, and just as learning is portrayed as powerful, those who cannot learn are equally powerless. These children struggle to internalise the rejection this brings (Provis, 2012). Provis (2012) suggests that ableist practices transform disabled children into the bully or the bullied because they are angry and seek relief from their powerlessness and self-loathing. As with other forms of abuse in childhood, bullying has a ubiquitous effect on mental health and well-being in adulthood, evidenced by the UK's growing number of mental health issues related to bullying in school (Takizawa et al., 2014).

In conclusion, the persistent challenges in implementing truly inclusive education have far-reaching consequences, particularly in shaping the identity formation of disabled children. As evidenced by the historical and contemporary barriers discussed, the UK education system continues to struggle with ableist ideologies, inadequate teacher training, and systemic biases that hinder genuine inclusion.

These shortcomings in the educational environment can profoundly impact how disabled children perceive themselves and their place in society. The consequences of failed inclusion attempts, as noted by Wiseman & Watson (2021), lead to disabled children being perceived as having less social value than their non-disabled peers. This perception can be internalised, affecting their self-worth and future aspirations. Moreover, the power dynamics within educational settings, as highlighted by Provis (2012), can transform disabled children into either bullies or victims, stemming from feelings of powerlessness and self-loathing. These experiences in formative years have lasting effects on mental health and well-being into adulthood, as evidenced by the increasing prevalence of mental health issues related to school bullying in the UK (Takizawa et al., 2014).

Disabled Identity

In this section, I investigate the intricate relationship between identity formation and disability, particularly focusing on how societal perceptions shape the self-concept of disabled children. The discussion will highlight key theoretical frameworks, including Erikson's psychosocial theory, Dunn and Burcaw's model of disability identity, and Ahmed's Social Exclusion Framework. By examining the impact of labels, stereotypes, and societal acceptance, the text aims to uncover the challenges disabled children face in asserting their individuality and humanity. Ultimately, I gain insights into the complexities of identity construction, the significance of acceptance, and the ongoing struggle for recognition within a society that often marginalises disabled children.

The concept of the self is a fundamental aspect of human consciousness, reflecting awareness of individuality and the capacity for self-reflection. This awareness constructs a self-concept that is dynamic and multifaceted, shaped by our choices and experiences rather than being confined to fixed, predetermined categories (Murugami, 2009). Acceptance is a crucial element of successful inclusion; children soon learn who is a valuable member of society and use this information to find their identity and place in life (Moriña & Carnerero, 2022). Erikson's theory suggests that identity formation is a psychosocial process influenced by the interaction between the child and their social environment. For disabled children, this interaction can be complex (Erikson, 1968). Erikson (1968) suggests that a 'negative identity is the sum of all those identifications and identity fragments which the individual had to submerge in himself as undesirable or irreconcilable or by which atypical people and marked minorities are made to feel different' (Erikson, 1968, p. 733). He highlights the internal and external pressures that shape a person's sense of self negatively and how children who do not conform to societal norms or belong to marginalised groups are made to feel different or excluded. People identify themselves by how others respond to them. When confronted with physical disability for the first time, they feel uncomfortable and unsure of how to react or interact. It is, however, suggested that the more these interactions take place, the easier it is to 'overcome' the physical disability of another person (Kleck, 1969). We see this in some families who do not recognise the disability of family members (Cruickshank, 1951).

For disabled children, their identity as a complete person is often called into question rather than being accepted without doubt (Luborsky, 1994). From conception, disabled children are labelled and classified, subjected to derogatory language that dehumanises and Others them, reinforcing negative stereotypes and perpetuating discrimination (Jayara, 2020). These labels lead to disabled children being seen as deviations from the norm, requiring care, control, and remediation rather than education (Armstrong, 2007). Curran & Runswick-Cole (2014) argue for moving beyond deficit-based views of disabled children that focus solely on impairment, inequality, and abuse, calling for recognising disabled children's full identities and experiences as children. They call for understanding disabled childhoods in their local, historical, and global contexts. Disabled children have the right to develop positive cultural identities (Runswick Cole et al., 2018).

Disabled children often develop unique coping mechanisms and strengths that become integral to their identity (Erikson, 1968). By ensuring that disabled children receive the necessary support and opportunities, caregivers and educators can help them develop a strong, positive identity (Erikson, 1968). Disability identity development is a complex process that involves negotiating both physical impairments and their associated social meanings. This dual aspect is considered crucial in the formation of disability identity. Various models have been proposed to understand identity development, with Forber-Pratt & Zape (2017) offering a 'model of psychosocial disability identity development, acceptance, relationship, adoption and engagement (p.350).

These models differ in their theoretical underpinnings and structure, with some adopting a linear stage theory whilst others describe non-linear phases or statuses.

Conceptual frameworks of disability identity

Conceptual frameworks play a crucial role in understanding complex phenomena like dehumanisation. Two notable models in this field, in relation to this thesis, are Dunn and Burcaw's (2013) theoretical model and Ahmed's (2022) Social Exclusion Framework. Dunn and Burcaw's model outlines Six aspects of disability identity derived from narrative accounts: Affirmation of Disability, Communal Attachment, Self-worth, Pride, Discrimination, and Personal Meaning (Dunn & Burcaw, 2013). This model focuses on qualitative narrative accounts to understand the personal and communal aspects of disability identity. This psychosocial framework, based on qualitative research, aims to provide a comprehensive understanding of how disabled children integrate their disability into their identity over time. Their conceptual focus highlights the role of personal stories and experiences in shaping disability identity, emphasising self-worth, pride, and communal attachment. Their model is more descriptive and exploratory, providing insights into how disabled children and adults narrate their experiences and construct their identities. Ahmed's (2022) Social Exclusion Framework provides an analytical tool for examining the experiences of disabled people in society. This framework explores the intricate relationships between Othering, identity formation and recognition as they pertain to disabled identity, highlighting the complex processes of exclusion, marginalisation, and identity negotiation that disabled children navigate in society (Ahmed, 2022).

Ahmed's (2022) framework acknowledges that disabled people often face othering processes whereby they are perceived as different or divergent from societal norms. This Othering can lead to marginalisation and exclusion from various aspects of social life. The framework considers how disabled people construct their identities in response to societal attitudes and experiences of exclusion, recognising that identity formation is a dynamic process influenced by social interactions and cultural contexts (Ahmed, 2022). It examines how disabled people seek and obtain recognition from society, as well as the barriers to participation in education, employment, and social activities. Moreover, the framework considers the intersectional nature of disability, acknowledging that disabled people may face multiple forms of discrimination based on other aspects of their identity, such as gender, race, or socioeconomic status. It also examines the power dynamics at play in society that contribute to the exclusion of disabled people and the perpetuation of ableist attitudes. By applying this framework, researchers and policymakers can gain a more comprehensive understanding of the social experiences of disabled people, helping to identify the root causes of exclusion and discrimination, as well as potential strategies for promoting greater inclusion and recognition of disabled identities in society (Ahmed, 2022).

Ataria's and Sommer's (2013) work, whilst more of a theoretical insight rather than a framework, could be seen as a prerequisite to the work of Ahmed (2022). They integrate embodied, trauma-based, and psychoanalytic frameworks to examine the fragmented nature of identity and selfhood in DID, with a focus on the experience of Otherness. The analysis moves between first-person experiential accounts and more theoretical conceptualisations of identity processes. The concept is that Otherness and Dissociative Identity Disorder (DID) involve experiencing oneself as Other. There is a focus on the embodied nature of identity and how dissociation consists of disconnection from one's body and bodily experiences. The paper discusses concepts like a 'sense of ownership' of one's body and a 'bodily-egocentric perspective.' (Ataria & Somer, 2013, p. 6) There is a focus on the embodied nature of identity and how dissociation involves a disconnection from one's body and bodily experiences (Ataria & Somer, 2013).

In conclusion, the exploration of disability identity reveals a complex interplay between individual self-concept, societal perceptions, and the struggle for recognition. The frameworks discussed, particularly Ahmed's Social Exclusion Framework, highlight how disabled children navigate the challenges of identity formation within a society that often marginalises them. This struggle for identity and acceptance leads directly to the concept of Othering, a process that further complicates the experiences of disabled children. Understanding Othering is crucial in addressing the barriers that disabled children face in asserting their full humanity and individuality.

Othering

In this section, the concept of Othering is examined through the lens of a disabled identity. I have used Othering with a capital O to refer to those 'who have been produced and marked as different subjects by means of discursive power' (Thomas-Olalde & Velho, 2011, p. 32). Othering or the Other are those referred to as humanly or fundamentally different from the group or self (Thomas-Olalde & Velho, 2011). The other, small o, is simply a person perceived as separate from the self. Historically, disability has been blighted by a narrative of objectivity of curiosity or the ‘monstrous other’ (Goodley et al., 2016, p. 8), insignificant, inferior, excluded, exploited, and marginalised (Akter & Islam, 2023; Staszak, 2008; Watson, 2023), relegating them to the margins of society (Standish, 2023; Vehmas, 2004).

Othering is a phenomenon most people have experienced, often as a fleeting sense of not belonging (Powell, 2015). For some, however, the consequences of being Othered are severe and long-lasting. It involves the conscious or unconscious belief that a particular group poses a threat, driven by fear of the Other. It is not a personal act, as the Other is often not known personally (Powell, 2017). People may insult or exclude groups to feel more powerful or better about themselves (Curle, 2020). This behaviour creates 'us' and 'them' binaries, leading to feelings of non-belonging and marginalisation (Akbulut & Razum, 2022; Fatou, 2023). A sense of belonging allocates power and resources, creating spaces where the Othered are denied access (Adams et al., 2016). It goes beyond mere categorisation and involves power relations between in-groups and out-groups (Akbulut & Razum, 2022) and is influenced by societal power structures used to marginalise groups based on race, gender, disability, and other factors (Davis, 2014; Liddiard, Whitney, et al., 2019).

Emmanuel Levinas’s ethical philosophy emphasises responsibility to the Other, prioritising their recognition over the self (Levinas, 2009). However, this ideology has been criticised for ignoring political and cultural structures that demonise the Other (Bauman, 1997; Garrett, 2017) and for assuming the Other’s weakness, potentially reinforcing stereotypes. The concept of Othering draws on Hegel’s theory of self and Other, suggesting that self-awareness is formed through interactions with others (Hegel & Inwood, 2018; Jensen, 2011). The consequences of Othering have been historically severe, as evidenced by the treatment of disabled and marginalised groups during the eugenics movement (Bernardi, 2023; Davis, 1995).

Disabled people face multiple layers of Othering in society. Based on my experiences, I created Figure 3- Layers of Othering, which demonstrates how multiple Othering should not be confused with intersectionality. While related, this concept differs from intersectionality. Othering involves treating certain groups as different and inferior, while intersectionality examines how various social categories (like disability, race, and gender) interact to create overlapping forms of discrimination (Cole, 2009). Understanding this distinction is crucial for grasping the complex realities of disabled identities. It provides a more comprehensive framework for addressing the diverse challenges disabled people face in society. Recognising the distinction between multiple Othering and intersectionality offers a more thorough and accurate framework for understanding and addressing the complex realities of disabled identities and experiences in society.

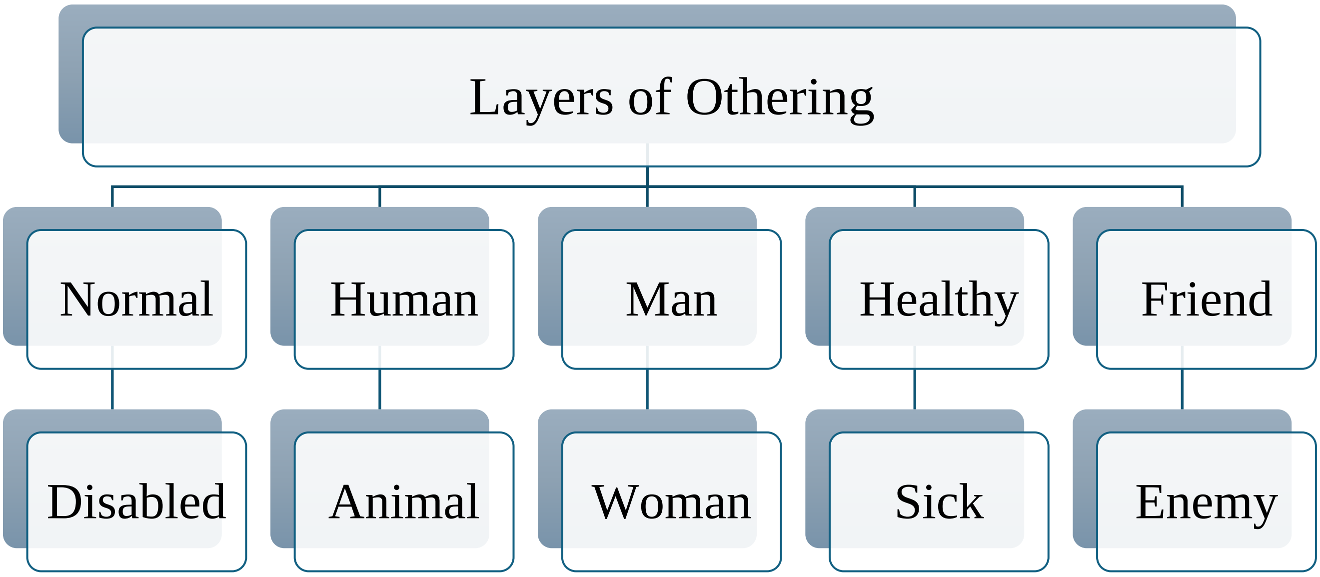


Figure 3- Layers of Othering

Othering is a social process that creates and maintains imaginary boundaries between different identities, portraying them as incompatible (Akbulut & Razum, 2022). This process helps perpetuate social inequalities and existing power structures. Multiple Othering takes this further by creating ‘layers of alienation,’ resulting in complex, often unclear identities for those who do not fit societal norms. This layered approach provides numerous opportunities for society to alienate and exclude people who challenge the status quo. Both Othering and multiple Othering are major concepts for understanding how social inequalities are maintained and reinforced, particularly for those with identities that deviate from what society considers ‘normal.’

Eugenics created a world in which disabled people did not belong, presenting disability as a ‘primitive savage, the abnormal subhuman’ (Akbulut & Razum, 2022; Altenbaugh, 2006, p. 708).

This Othering has led to the ‘marginalisation, social exclusion, physical segregation… and educational inequality’ (Choudhury, 2015, p. 282). This strategy is a classic example of political Othering, used as a political tool when policymakers or those in power believe the public must adapt their behaviours (Ahmed & Blount-Hill, 2022; Ahmed, 2022; Akbulut & Razum, 2022). This form of Othering is a social construct that maintains or generates a social reality of ‘symbolic boundaries between supposedly mutually incompatible identities’ (Akbulut & Razum, 2022, p. 4). Expertly, Galton socially constructed disability as a negative incompatible Other (Kewanian et al., 2023). This incompatibility creates conflict and justifies ‘…the multifarious forms of violence against the other party through the idea of otherness’ (Jin, 2020, p. 216). Disability became the political focus of eugenics, exposing the bodymind to the ‘brutality of political power’ (Bernardi, 2023, p. 45; Cleall, 2022). With some bodyminds centralised and others marginalised, humanity was divided into a hierarchy of the valued ‘normal’ and devalued, disabled/dysfunctional bodyminds defined by their faults (Adams et al., 2016; Kewanian et al., 2023; Staszak, 2008; Watson, 2023), leaving disabled people at the mercy of a ‘profit-monger capitalist system’ (Akter & Islam, 2023, p. 185).

Disabled children are not ‘Othered’ solely due to their impairments but rather because of how these impairments are manipulated and misrepresented, often by those in power, to create a negative narrative surrounding disability (Powell, 2017). These narratives present a hegemonic bias frequently framed as universal knowledge, evoking the disenfranchisement, violence, and alienation experienced by many disabled people within mainstream society (Cleall, 2022). The Othering of disability is perpetuated by ‘the majority,’ who disseminate the misconception that disabled people are a threat to resources (Powell, 2017). The process of othering disabled children leads to their social exclusion by stripping them of their individuality and uniqueness. This results in shaming their interconnected physical and mental experiences (bodyminds) and presenting them as a dehumanised, stereotypical group (Ahmed, 2022). Such representation helps to ease societal conscience and can be exploited to advance political agendas, often at the expense of genuinely addressing the needs and rights of disabled children (Ahmed, 2022).

Ahmed (2022) further argues that Othering profoundly affects the identity of disabled children. Denying them their uniqueness and individuality leads to internalised negative perceptions, social exclusion, dehumanisation, and barriers to self-advocacy. This process not only harms their self-esteem and mental health but also perpetuates a cycle of marginalisation and invisibility (Ahmed, 2022). The dominant discourses and human rights frameworks concur with Ahmed (2022), suggesting that Othering prevents disabled children from speaking or having their agency recognised (Kowitz, 2022). The UN Convention on the Rights of the Child (CRC), Article 12, paragraph 1 (1989) allocates rights to children' capable of forming their own views.' Creating a binary of 'capable' and 'incapable children, further diminishing the agency of disabled children (Kowitz, 2022, p. 32). Such narratives validate the epistemic violence that constructs disabled identities, imposing dominant frameworks of knowledge and representation that deny agency. These narratives position disabled children as inferior Others to be controlled and exploited, shaping how disabled children are perceived and how they perceive themselves (Spivak, 2004).

In conclusion, there is a need to challenge the rhetoric of Otherness, and the way to do so is to empower the Othered and present success stories to the world. Success stories for Mocan (2022) are of 'Others' who reveal the personhood and humanness to reveal the faceless, marginalised, and dehumanised Other. To present stories that empower the 'Othered' and prevent 'self-othering' (Mocan, 2022), further suggesting a need for 'powerful examples of activism' (Mocan, 2022, p. 73). This positive image reinforcement happens in the UK with mixed-gender advertisements and diverse, influential figures. To escape oppression, the Other must create a positive identity (Staszak, 2008). Unfortunately, we are a long way from seeing all disabled people presented in a positive light. We are more likely to see disabled children presented to raise funds for charity.

Dehumanisation

In this section, I explore the pervasive issues of dehumanisation and Othering in relation to disabled children. I will examine how societal narratives and oppressive power dynamics contribute to the marginalisation of disabled identities, often framing them as 'subhuman' or less than fully human (Campbell, 2009). Drawing from various scholarly perspectives, I examine the psychological and social mechanisms that perpetuate these harmful stereotypes, leading to internalised stigma and discrimination. By highlighting the historical and contemporary discourse surrounding disability, I highlight the urgent need to challenge these narratives and foster inclusive environments that affirm the humanity and individuality of disabled children. Ultimately, it advocates for a deeper understanding of disability identity, aiming to dismantle stigma and promote acceptance in society.

Dehumanisation and Othering are deeply intertwined with oppressive power dynamics that enable violence against disabled people. Dehumanisation, as Bandura (1978) notes, allows aggressors to dissociate from their behaviour towards marginalised 'subhuman' groups, fostering self-exoneration. This process is evident in how the identities of disabled children are often constructed to reinforce negative perceptions of disability rather than recognise the child's full humanity (Runswick-Cole, 2014). The feminist framework adopted by Campbell (2009) challenges the normative assumptions embedded in legal reasoning, which marginalise disabled people by framing them as less than fully human. This dehumanising perspective profoundly impacts how disabled children are perceived and treated from birth, creating an environment where their inherent worth and humanity are questioned. Consequently, this leads to internalised stigma and pressure to overcome or conceal their disabilities rather than embracing their whole selves.

Historically, when a person relies on another person for their daily functions, their humanness has been removed (Sweet, 2014, 2016). The prevailing narrative continues to label disability as dependent and in need of 'fixing' and a condition 'lacking wholeness' (Boda, 2023, p. 117). A powerful political discourse is embedded within this narrative, distorting the understanding of disability by stripping people of their personhood, dividing society, and creating a stigma that manifests as stereotypes. Once these stereotypes gain acceptance, they are hard to remove and reinforce prejudice (Pescosolido et al., 2008). Such discourse perpetuates 'bad attitudes' and 'bad behaviour' towards those deemed 'less than human' (Stollznow, 2008, p. 177). Denney (1992) suggests deconstructing official discourse could initiate a process that challenges dominant and discriminatory conventions.

Denney (1992) suggests that deconstructing official discourse could initiate a process that challenges dominant and discriminatory conventions. (Hughes, 2015) argues that neoliberal rhetoric and policies undermine the status of disabled people as full human citizens, portraying them instead as counterfeit, parasitic, and less than fully human. This perspective aligns with historical patterns of dehumanisation of disabled people.

The psychological mechanisms underlying our perceptions of human differences reinforce dehumanising attitudes in practice, as Wilson (2021) observes. He contends that negative evaluations remain deeply entrenched, evidenced by thought experiments that challenge societal norms. For instance, imagining a world where traits typically devalued by eugenic thinking, such as intellectual disabilities, are positively valued reveals the persistence of dehumanising attitudes. The likelihood of celebrating disabilities rather than fearing them remains low, which underscores the difficulty of separating eugenic ideals from their problematic real-world applications. Dehumanisation is a social and psychological process that strips disabled people of their human qualities, traits, or rights, manifesting in various forms with significant social, ethical, and moral implications (Wilson, 2021b). It can take the form of animalistic dehumanisation, which likens people to animals, and mechanistic dehumanisation, which views disabled people as devoid of feelings or emotions, akin to objects or machines.

Furthermore, this phenomenon can manifest as moral exclusion, cultural and social dehumanisation, medical dehumanisation in healthcare settings, and psychological dehumanisation that denies others' mental and emotional complexity (Haslam & Loughnan, 2014). Such processes can occur in interpersonal relationships, social institutions, or even within oneself, often facilitated by factors such as status, power, and social disconnection (Bogdan, 1986; Haslam, 2006; Lammers & Stapel, 2011). The consequences of dehumanisation are severe, potentially justifying violence (Opotow, 1990), cruelty, and even genocide (Crow, 2009; Wilson, 2021a). It fosters social division, prejudice, and discrimination, leading to diminished self-worth and mental health issues for those who are dehumanised. The process itself can erode empathy and compassion within society. Specifically, dehumanising disabled children undermines their identity and well-being by perpetuating harmful stereotypes and fostering discrimination. Research indicates that disabled children often experience both subtle and blatant forms of dehumanisation, resulting in reduced social support and increased hostility towards them (Andrighetto et al., 2014). This dehumanisation leads to negative social judgments, particularly regarding perceived competence and human uniqueness, which can severely impact their autonomy and self-esteem.

Dehumanising disabled people undermines their identity and well-being by perpetuating harmful stereotypes and fostering discrimination. Carola Lingaas (2021) dehumanisation is fundamentally about constructing and imposing a dehumanised identity on the disabled person to justify their destruction. These Imposed unchangeable identities mark them as fundamentally different and less than human, portraying them as subhuman, inferior, and a threat to the in-group (Haslam, 2006). They are stripped of their human identity and are instead seen as animals, pests, or diseases. Wilson (2021) emphasises the importance of considering the standpoint and lived experiences of disabled people to understand the full impact of the dehumanisation of their identities and lives. The disabled identity for disabled people is actively constructed through intimate, accepting relationships rather than being determined by clinical diagnoses or visible impairments alone (Bogdan & Taylor, 1989).

Bullying significantly impacts the identity development of disabled children, who are often targeted precisely because of their disability identity. This highlights the complex relationship between bullying, disability, and identity development. Research shows that bullying is positively associated with animalistic dehumanisation towards friends, suggesting that bullies may dehumanise their peers to justify their behaviour (van Noorden et al., 2014). Being bullied represents a threat to social identity and self-esteem, making disabled children feel devalued or inferior.

Muntanga (2019) examined cultural (discourse) terminology and how everyday people define or describe disability and found that the layperson described disability as ‘having something missing’ or ‘literally stupid or abnormal’ (Mutanga, 2019, p. 63). One disabled girl in this study stated, ‘They [disabled] don’t look very nice, which makes me feel very sad because they don’t choose to be like that’(Mutanga, 2019, p. 64). The girl describes disability as a state of being that evokes tears and pity, a vision used by charities that present disabled people as powerless and in desperate need of the public's sympathy and financial support (Harpur, 2012; Osborn, 2020). As the girl suggests, the powerful images and stories are designed to move the audiences, evoke tears and sympathy and raise funds (Retief & Letšosa, 2018). Most schools in the UK engage with Red Nose Day and Children in Need campaigns, charities that reinforce the powerless, sad, and pitiful misconception of disability. Schools take these harmful stereotypes into educational spaces, reaffirming the principles of the charity model of disability (Retief & Letšosa, 2018). Children from an early age are indoctrinated into a society that rejects disability, and they learn the ‘rules of identity or constitutive norm of social life’(Birenbaum, 1979, p. 79). Cultural values and social norms have influenced the girl's perception of disability (Edwards & Maxwell, 2023), reinforced by the disabling gaze of the charity model, which generates a negative self-awareness in disabled children (Edwards & Maxwell, 2023). The charity model, therefore, uses ‘images of tragedy and despair… depicted as suffering a devastating impairment that deprives them of a potentially happy life’ (Sofokleous & Stylianou, 2023, p. 62). The child in question (Muntanga, 2019) is visually impaired, has separated herself from her disabled identity, and has normalised herself to hide her disability/impairment (Edwards & Maxwell, 2023; Taylor, 2016). This girl’s view highlights the embodied nature of the disability and how it is co-constructed as pitiful and loathsome. I have used this example to demonstrate how disabled bodyminds are measured against fabricated normative standards and how humanness is distributed according to perfection, beauty and ability (Siebers, 2010). Davis (2002) argues that the medical model of disability visually categorises disability, and doctors re-craft disabled bodyminds to emulate that of the dominant culture. Cultural imagery of perfection is so ingrained as a dominant discourse that disabled people also accept or reject the disability of others (Shildrick, 2007).

In conclusion, the identity formation of disabled children is profoundly influenced by societal perceptions and the dynamics of Othering. The frameworks discussed highlight the complex interplay between individual experiences and external societal narratives that often marginalise and dehumanise. By recognising the unique challenges faced by disabled children, including the impact of labels and stereotypes, we can better understand the significance of fostering inclusive environments that affirm their identities. Ultimately, promoting a more nuanced understanding of disability identity can lead to greater acceptance and recognition of the individuality and humanity of disabled children within society.

Ableism

This section explores the pervasive impact of ableist norms and the pressure to conform to arbitrary standards of 'normal' development and behaviour. It examines the psychological and social consequences of these expectations for disabled children. It explores how ableism, much like racism, operates as a system of oppression, creating stereotypical assumptions and internalised negative feelings. It highlights the intersectionality of disability with other social markers and the common thread of oppression that binds them. Furthermore, it scrutinises the societal pressure to 'pass' as able-bodied and the detrimental effects this has on children's mental health and sense of identity. By unpacking these complex issues, I aim to challenge the constructs of normalcy and the power dynamics that perpetuate ableism. This exploration seeks to foster a more inclusive understanding of disability and advocate for a society that values diverse abilities and experiences.

Ableist norms based on unstable comparisons of bodies create stereotypical assumptions that generate ‘internalised oppression thoughts and feelings’ (David, 2013, p. 284). (Jóhannsdóttir et al., 2022) suggest that the internalisation of ableism is also influenced by social norms and the hostile and derogatory terminology associated with disability, an internal discourse of stigmatisation and negative attitudes. The unrealistic bodymind expectations create an ideology that portrays a negative, undesirable image of disability, causing disabled children and adults to assume a pseudo-identity. As they distance themselves from their devalued identity, disabled people demonstrate defensive Othering and enter a hierarchy of disability (Campbell, 2009). The resulting feelings of shame and humiliation have a negative impact on the identity, health, and well-being of disabled people (Jóhannsdóttir et al., 2022). As disabled children try to replicate a state of ‘near-able-bodiedness,’ they live in a constant state of fear, fear that their disabled identity will be revealed (Campbell, 2009, p. 25). The assertion that disability is something to ‘overcome’ prevents cultural cohesion, and disabled children fail to ‘develop a collective conscious, identity or culture’ (Campbell, 2009, p. 22). Ableism within our culture, where disability is, at its best, tolerated and never celebrated (Campbell, 2009).

Both racism and ableism lay claim to oppression and operate under a transferable framework intersecting oppressions of race and disability. Elsewhere, I have linked to feminist scholars

(Garland-Thomson, 1997; Morris, 1996; Simplican, 2017; Wendell, 1989, 1996), and I make these connections to make visible multiple discourses and intersecting oppressions. Disability is always inextricably linked to other social markers, and all have a 'common identity and a historical narrative bound up in oppression' (David, 2013, p. 284). I began by discussing powerful discourse and derogatory language, and I conclude here by summarising the impact of these narratives. Acknowledging the normative political narratives as accurate, they become part of the 'personal self-concept' (David, 2013, p. 287). I have highlighted the shame, self-loathing, and humiliation that become part of the internal narrative. Language and values create discourse and explanations. However, it distorts the reality of disability and fails to produce a discourse reflecting the socially constructed barriers that oppress disabled people (Ahmad, 2018; Brzuzy, 1997; Mutanga, 2019; Rix, 2006). Ableism as oppression values bodyminds based only on ability and privileges normality, separating disability from other kinds of oppression (Wieseler, 2020). Studies persistently argue that disabled lives are worth living, yet they continue to be dehumanised (Reynolds, 2022).

The pressure on children to be 'normal' is so intense that many conceal or hide their disability to 'pass' as 'normal' or able-bodied, a concept known as 'passing' (Cureton, 2018; Francisco, 2023; Goffman, 1990; Smart, 2009). Although well-intentioned, this pressure to avoid stigma and discrimination can leave children feeling inferior and insecure about their identities, living in fear of being 'found out.' This exhausting process can lead to loneliness and isolation (Cureton, 2018; Francisco, 2023; Smart, 2019). This pressure to conform to arbitrary standards of 'normal' development and behaviour creates immense psychological strain, leading to internalised ableism, poor self-image, and vulnerability to exploitation (Goodley, 2011; Lanzer, 1950; Richardson et al., 1964; Watson, 2023). Negative self-evaluations result from living in a society that rejects disabled children, who know they will never live up to the aesthetic expectations devoted to 'normalcy' (Richardson et al., 1964). This cultural imagining of disability as non-human, abnormal, or deviant has far-reaching consequences for mental health, social relationships, and life trajectories (Jóhannsdóttir et al., 2022).

The pervasive influence and reliance on 'normal' as a concept that constructs and reconstructs 'normal' places it in flux. However, this notion remains static until actively challenged. The power dynamics inherent in the definition of normalcy reveal how societal values are shaped by those in positions of authority, often at the expense of disabled people. The societal pressure to conform to an idealised version of normalcy leads to internalised ableism that compels disabled children to hide their disabilities or alter their identities to fit within accepted norms. This cycle of oppression is maintained by a culture that pathologises differences and individualises impairment, ensuring that the narrative of normalcy continues to dominate societal discourse.

In conclusion, the pervasive influence of ableist norms and the concept of 'normalcy' continues to shape societal attitudes towards disability, often with detrimental effects. The pressure to conform to arbitrary standards of 'normal' development and behaviour creates significant psychological strain, leading to internalised ableism, poor self-image, and social isolation among disabled people. The intersectionality of disability with other forms of oppression highlights the complex nature of this issue. It is crucial to challenge the constructs of normalcy and the power dynamics that uphold ableism to foster a more inclusive society. By recognising the fluidity of 'normal' and advocating for diverse representations of ability, we can begin to dismantle oppressive structures and create a world where all people are valued for their unique contributions, regardless of their abilities or disabilities. The pervasive nature of ableism and its impact on disabled children's self-perception and societal interactions often leads to a critical yet underexplored consequence, social isolation, which further compounds the challenges faced by disabled people in navigating an ableist world.

Social Isolation and Social Exclusion

Social exclusion and social isolation are critical issues that significantly impact the lives of disabled children. Whilst these concepts are closely intertwined, they are not identical, and understanding their nuances is crucial for addressing the challenges faced by disabled children. Social exclusion often encompasses broader systemic barriers and discrimination, whilst social isolation typically refers to a lack of meaningful social connections. For disabled children, these issues can significantly impact their development, well-being, and prospects. In this section, I investigate the complex relationship between social exclusion and social isolation, examining how they manifest in the lives of disabled children and the far-reaching consequences they can have on their overall quality of life.

Social exclusion and social isolation are related concepts but not entirely the same, especially when it comes to disabled children. Social isolation typically refers to a lack of social connections, interactions, or relationships. Social exclusion, on the other hand, is a broader concept that encompasses social isolation. It also includes systemic barriers that prevent full participation in society, discrimination or stigma based on disability, and exclusion from decision-making processes that affect their lives (Goodley, 2011; Moriña & Carnerero, 2022). For disabled children, social exclusion can lead to social isolation, but it is important to note that they are not always synonymous. A child might be socially excluded from certain activities or opportunities without necessarily being completely socially isolated. Research on children with autism spectrum disorder (ASD) provides an example of how these concepts can intersect. The study found that children with ASD experienced difficulties that limited their opportunities to interact with peers and family members, which could lead to social exclusion and, consequently, social isolation (Gomez-Campos et al., 2023).

Social isolation is a universal issue for disabled children, often resulting from institutional practices and societal attitudes. Disabled children are frequently segregated from their non-disabled peers, both physically and socially (Gomez-Campos et al., 2023). This segregation is reinforced by educational practices that fail to accommodate their needs adequately, leading to a sense of exclusion and alienation (Goodley, 2011; Moriña & Carnerero, 2022). The lack of social acceptance and the powerful language of exclusion further isolate disabled children, making it difficult for them to form meaningful relationships and integrate into their communities (Cage et al., 2019; Carter & Spencer, 2006; Houchins et al., 2016).

In the 1960s, disability existed when ‘the impaired’ were excluded. Ruesch (1968) refers to this as a ‘social disability’ based on an individual's inability to communicate effectively, function socially, or take advantage of available societal facilities. Social impairment can result from cultural deprivation, ‘inadequate education, or an inability to communicate’ (Ruesch, 1968, p. 397). These factors could historically potentially lead to social isolation in disabled children, and this clearly demonstrates the ableist undertones of the time. Social competence is critical for childhood development and lifelong social skills, but disabled children often lag behind their peers in this area (Rodriguez et al., 2007). They continue to emphasise that peer interactions are essential for developing social competence in disabled children. However, disabled children often struggle more with peer relationships (e.g. acceptance and friendships) compared to typically developing peers, highlighting the importance of promoting positive peer interactions for disabled children. Some disabled children faced purposeful exclusion and isolation from peers who singled them out for being different (Nowicki et al., 2014). This type of rejection can severely impact social development and self-esteem (Lindsay & McPherson, 2012; Rodriguez et al., 2007). Social isolation and loneliness are significant concerns for disabled children, with potentially severe and long-lasting impacts on health and development (Kwan et al., 2020). Many disabled children experienced persistent verbal abuse, name-calling, and, in some cases, physical bullying from peers. This negative treatment can make children reluctant to engage socially (Lindsay & McPherson, 2012).

While peer interactions are an essential part of social development, disabled children often face significant barriers to positive peer relationships due to exclusion, bullying, and lack of inclusive opportunities. These barriers hinder their social skill development and overall social integration. More effort is needed to foster inclusive peer environments and equip disabled children with skills to navigate social interactions(Lindsay & McPherson, 2012). There is a need to teach proactive social skills to all children in inclusive classrooms to promote positive interactions (Nowicki et al., 2014). Social isolation remains a significant issue for many disabled children despite their physical inclusion. Disabled children can be physically present in mainstream classrooms. However, they are still socially and educationally isolated. Addressing this requires changes in teacher training, classroom practices, and the overall conceptualization of inclusive education (Söderström, 2016). Social exclusion and bullying are intricately linked to disabled children, with exclusion making them more vulnerable to bullying. However, social inclusion and friendships can help protect against it (Bourke & Burgman, 2010).

In conclusion, social exclusion and social isolation present formidable challenges for disabled children, significantly impacting their social development and overall well-being. These intertwined issues create barriers to meaningful relationships and full participation in society, often leaving disabled children feeling marginalised and disconnected. The consequences of such exclusion and isolation extend far beyond the social realm, profoundly affecting their emotional landscape. The ripple effects of social exclusion and isolation play a crucial role in shaping their emotional experiences. Understanding this connection is vital for developing comprehensive strategies to support the holistic well-being of disabled children, addressing both their social needs and the complex emotional challenges they face in navigating a world that often fails to include them fully.

Emotional Struggles Discussion

The landscape of emotional well-being is indeed a complicated one, often presenting significant challenges for disabled children navigating their personal lives. This section investigates the intricate tapestry of emotional struggles, exploring the myriad ways in which these difficulties arise and impact daily functioning. As Gross and Muñoz (1995) posit, ‘Emotion regulation is a critical component of mental health’ (p.151), underscoring the importance of understanding and addressing these emotional hurdles. From the pervasive sense of inadequacy to the grip of anxiety, we shall examine the various components of emotional distress that many disabled children grapple with in their quest for psychological equilibrium and personal fulfilment.

Goodley and colleagues (2022) reflect on the impact of the pandemic on disabled people, identifying a resurgence of ‘dangerous Social Darwinist ideas’ and discussing how the designation of the ‘risk’ group served to reassure ‘normal’ people (Goodley et al., 2022). They call for a critical understanding of how broader sociopolitical forces shape the emotional lives of disabled people. Their paper employs a psycho-political lens to comprehend the emotional experiences of disabled people. For this section, I focus on how social interactions and emotional experiences shape behaviour, development, and well-being, as evidenced by the struggles of my disabled childhood. I choose to study only the emotions relevant to my stories because, as previously discussed, I will not homogenise disabled bodyminds. By adopting a socioemotional lens, I can gain better insights into the complex interplay between social relationships, emotional experiences, and human development. This perspective enriches my understanding of human behaviour and has the potential to be more effective in bringing about change.

The emotional and educational adjustments for disabled children are further hampered by fear, anxiety, and guilt, resulting in below-average attainment and less-than-satisfactory social adjustment (Cruickshank, 1951). Fear is the essence of 1960s education, where failure is humiliating, dishonourable, and inevitable for some. Children who will never achieve normative goals accept that failure is unavoidable, harbour hatred towards their teachers and peers for their failings, and may turn to aggression (Gever, 1970). He suggests that 'School bullying is rooted in this same expression of hatred, and these children long only for power and status' (Gever, 1970, p. 316). Gever (1970) dismisses this self-destructive behaviour, attributing it to the attention-seeking of those who 'passively negate their capabilities' (Gever, 1970, p. 317). Consistent failure leads to extreme emotions and self-deprecation, causing these children to erect a protective wall to soothe their pride and enter a self-fulfilling cycle of aggression and despair (Gever, 1970, p. 317). These circumstances ensure that learning is restricted only to guaranteed success. Gever refers to children with learning difficulties, and at that time, it was assumed that physically disabled children had learning difficulties. Pringle (1964) noted that 'handicapped' children have realistic expectations and acknowledge their limitations. When faced with failure and frustration, they raise their aspirations, setting their goals higher, unlike their non-disabled counterparts, who lower theirs. Gever (1970) failed to account for how teachers' negative attitudes towards disabled children often set a precedent for peers, who may mimic these behaviours, leading to increased social exclusion and bullying. Disabled children frequently report feeling isolated and excluded due to the lack of understanding and support from their teachers, which peers pick up on and replicate (Lindsay & McPherson, 2012).

William Cruickshank (1951), in his paper 'The Relation of Physical Disability to Fear and Guilt Feelings,' documented disabled children's voices to provide insight into their emotional experiences to 'identify inhibiting factors to healthy social, emotional, and academic adjustment and achievement' (Cruickshank, 1951, p. 298). He found that disabled children speak of living in a constant state of fear and anxiety. Although it is not unusual for children to be afraid of 'things,' it is the 'feeling of fear' (not being able to pinpoint the source of the fear) that they long to be free of (Cruickshank, 1951). He further notes that children who are ashamed of their disability mistreat their families, so on top of the fear, they are overwhelmed with guilt—guilt for wrongdoing and guilt for simply being. Due to their insecure interpersonal relations, they try to make up for what they have done, desperately trying to hold onto their unpredictable social status. Cruickshank (1951) concludes that children are compliant and obedient. Figure 4 Children’s voices in research - Cruickshank (1951) shows the voices documented by Cruickshank (1951) using the Projective Sentence Completion Test. These feelings are echoed in ‘We all have a voice. Disabled children’s vision for change’ (Souza, 2023), where children still report feeling afraid, lonely, sad, unsafe, fearful of bullying, fearful of crime, and worried for their families. Souza (2023, p. 19) states, ‘A much wider, systemic problem of disabled children’s voices not being heard. This must be a wake-up call to all of us.’ The problem is not hearing these voices. They have been collected for decades; therefore, the problem is more likely to be that no one is acting upon them.

Figure 4 Children’s voices in research - Cruickshank (1951)

“My fears sometimes make me - "Afraid," "nervous," "cry," "worry," "unhappy," "ashamed," "feel bad," "regress," "sick," "sad," "dream," "stay home," "depress," "irritable," "upset” “Shy”.

"At times I have felt ashamed of

“My ill treatment of my family” ”myself” “my personality” ”my appearance”

“I am afraid of …. "Family," "people," "being alone in the dark," "war," "speaking before others," and " "dreams," the "unknown” “being looked at”.

“I am worried about - "Handicap," "disease," "health," "hospital," and "handicapped people” my “family” ”education”

“When I do or think something which I know is wrong. “I change it," "I make up for it," "I think of an alternative," "I don't do it again," "I make it right," "I do what's best” "I am worried” “I feel guilty," "I feel bad," "I try to forget it” "I turn to religion," "I feel sorry," "I withdraw”

Hated

Burch (2018) suggests that emotionally, hate can stem from feelings of anger, fear, or frustration. These emotions are projected onto disabled children, who are seen as different or vulnerable (Michener, 2012). This projection can lead to derogatory treatment and bullying, which significantly impacts the emotional well-being of disabled children. How hate speech reinforces ableist narratives that make disabled people feel inferior. Disabled children may develop hypervigilance and mistrust of others as a defence mechanism against potential threats or attacks (Michener, 2012). It can lead to internalised ableism, where disabled people start to believe negative narratives about themselves (Jóhannsdóttir et al., 2022). Hatred can have a 'blurring effect' where disabled children struggle to distinguish between acceptable and unacceptable treatment due to the normalisation of hate speech. Burch (2018) defines hate speech as using derogatory language and slurs to refer to disabled people, such as calling them 'parasites', 'scum', or 'retards'. In schools, this is not considered a hate crime. It is defined as calling someone names and devaluing the impact of hate speech (Englander, 2007).

Socially, hate towards disabled children is deeply entrenched in societal perceptions and biases, making them feel unsafe and threatened in society. The hostile rhetoric creates a climate of fear for many disabled children (Sherry, 2016). Hate, as expressed through bullying and hate crimes, acts as a mechanism for social control by targeting, intimidating, and marginalising those perceived as different or non-conforming to mainstream norms (Englander, 2007). This process reinforces the power and status of those who align with perceived societal norms while attempting to control or suppress those who deviate from them.

Cultural narratives and societal norms play a significant role in shaping these attitudes. The normalisation of hate speech and the prevalence of disability hate crimes highlight the urgent need for awareness and action against such discrimination (Burch, 2018). Disabled children often face social isolation and rejection, which exacerbates their sense of being unwelcome in society (Sherry, 2016). Both bullying and hate crimes involve a rejection of tolerance and diversity, which are closely tied to individual and group identities. Bullying and hate crimes marginalise identities by targeting people based on perceived differences, reinforcing societal stigmas, and causing psychological trauma, social exclusion, and the internalisation of negative stereotypes (Englander, 2007). The media and political discourse further reinforce negative stereotypes, dehumanising disabled children and justifying acts of aggression against them (Michener, 2012; Opotow, 1990). Hate crimes are 'less concerned with individuals as it is the boundaries between groups' (Burch, 2021a, p. 76). The political gain is in reinforcing these group boundaries and power dynamics.

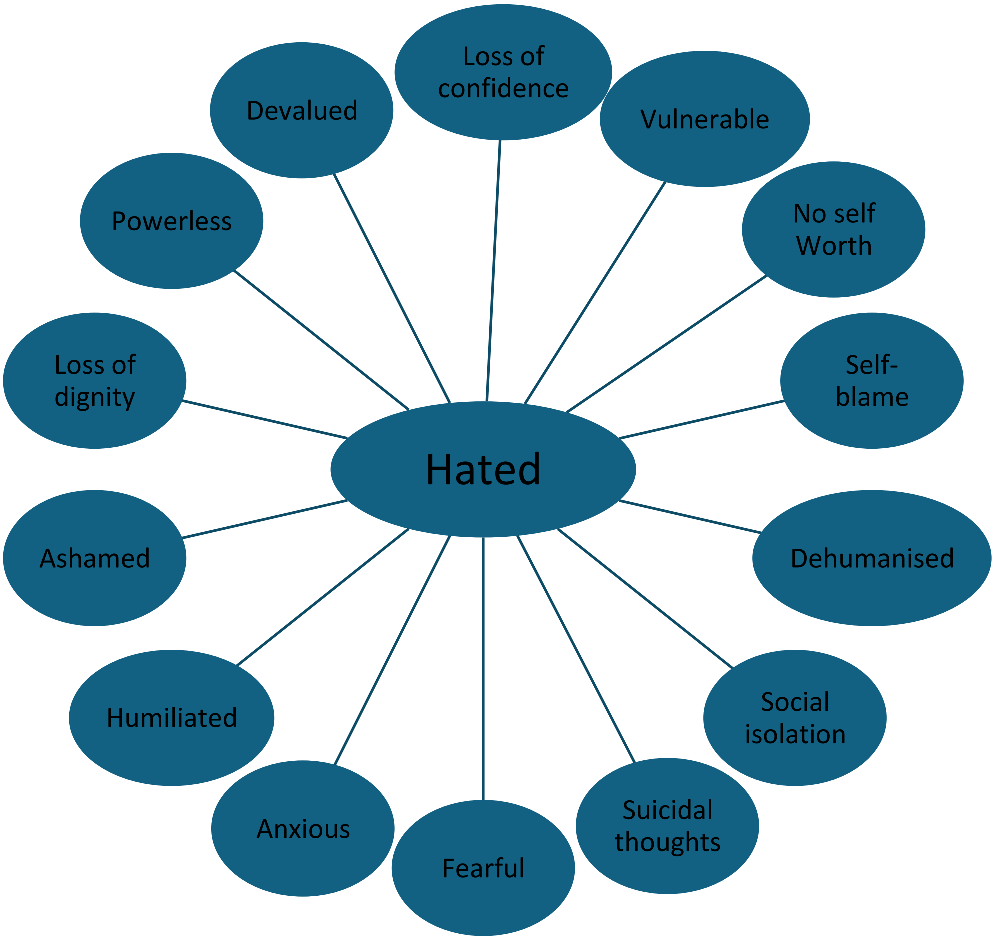
Psychologically, being targeted for group identity rather than personal actions can be particularly damaging (Michener, 2012). Constant exposure to hatred may lead some children to internalise negative beliefs about their group. Knowing that your group identity is hated undermines a basic sense of safety and security in society. Being part of a hated outgroup can lead to feelings of fear and anxiety about potential attacks or discrimination (Michener, 2012). Many disabled people experience bullying and negative encounters on a regular basis (Sherry, 2016). This form of hate triggers feelings of fear and anxiety, leading to long-term psychological effects. Hated groups are often seen as less than human, which can severely impact one’s sense of self-worth and dignity (Michener, 2012; Sherry, 2016). Hate crimes or violence can lead to psychological trauma and post-traumatic stress (PTSD) (Michener, 2012).

Michener (2012) states that hatred inhibits empathy towards the targeted group, leading to a ‘coldness’ in how they are treated. This lack of empathy from others can be psychologically damaging. The perpetrators of hate often feel morally justified in their hatred, which occurs automatically and unconsciously, motivating and justifying hostile actions against the targeted group (Michener, 2012). The misconception that crimes against disabled people are solely due to their perceived vulnerability overlooks the bias and hatred underlying these actions, which should be recognised as hate crimes under bias legislation (Sherry, 2016).

Burch (2018) argues that cultural and political narratives significantly shape societal attitudes towards disability. The portrayal of disabled people as economic burdens in political discourse and media representations perpetuate harmful stereotypes and justify discrimination. This framing reduces the complex lives and needs of disabled people to financial calculations, dehumanising them and normalising disabled language and attitudes (Burch, 2018). The historical prejudices against disabled people continue to be reinforced through contemporary narratives, resulting in significant harm, exclusion, and marginalisation. Hughes (2015) argues that political narratives portraying disabled people as frauds and burdens have revived historical prejudices, fuelling hate and resentment that serves to justify policies harming disabled people. Political rhetoric can generate and amplify hate towards marginalised groups.

Addressing hate towards disabled children requires a fundamental shift in how disability is perceived and discussed in political and cultural spheres. The normalisation of disabled language and the portrayal of disabled people as economic burdens must be challenged to combat disability hate crimes and achieve true inclusion. The urgent need for awareness and action against such discrimination cannot be overstated, as highlighted by Ralph et al. (2016) and Burch (2018).

Figure 5 The Wheel of Hatred



I have collected the emotions and consequences of being hated to construct Figure 5, The Wheel of Hatred (Burch, 2018; Michener, 2012; Ralph et al., 2016; Sherry, 2016). (Michener, 2012). I have done this to illustrate the immense power of being hated and the impact it has on a person's life. What I note from this diagram is that it forms an umbrella for each of the themes identified in my analysis, creating a cultural imagining of disability that has a negative impact on their identity, with emotional consequences.

Humiliation

Humiliation is a profoundly distressing experience that can leave lasting psychological scars. Unlike chastisement or punishment, which are often considered justified actions within the context of transitioning to adulthood, humiliation is characterised by an unjustified disempowerment inflicted by another person (Palshikar, 2005). For humiliation to occur, the individual must perceive themselves as being disempowered, a feeling distinct from shame, which is more commonly associated with social exclusion, anger, and a lack of empathy (Tangney & Dearing, 2002; Zavaleta Reyles, 2007). Fernández et al. (2015) describe humiliation as a complex emotional phenomenon that arises when children are forced to view themselves as unjustly treated and demeaned yet simultaneously accept the devaluation imposed by the perpetrators. This dual appraisal often leads to contrasting behaviours, such as avoidance and heightened aggressiveness (Fernández et al., 2015).

Elshout et al. (2016) further elucidate that humiliation involves feelings of powerlessness, inferiority, and smallness, particularly in situations where an audience is present, thus amplifying these emotions. The unfairness of the situation gives rise to a mix of emotions, including disappointment, anger, and shame. This emotional cocktail makes the acceptance of one's inferiority particularly challenging as the individual grapples with the internal conflict of feeling demeaned (Elshout et al., 2016). Personal anecdotes and studies alike underscore the enduring impact of humiliation, with adults recalling childhood experiences of humiliation as vividly as if they had occurred yesterday. These memories are often intertwined with fear, not of physical harm, but of emotional torment.

Research has shown that humiliation is not only a self-conscious emotion of high intensity but also one that can lead to aggressive tendencies and a desire for revenge (Thomas et al., 2012) (Thomas et al., 2012). This outward-directed focus of hostility contrasts with the inward-directed emphasis, which is typical of shame, which often results in withdrawal and a desire to hide. The psychological effects of humiliation are manifold, contributing to low self-esteem, school-related difficulties, and various psychosocial maladies, including social phobia and delinquency (Zavaleta Reyles, 2007).

In Conclusion, the emotional landscape for disabled children is complex and challenging, marked by a range of intense experiences, including fear, anxiety, guilt, and humiliation. These emotions, often stemming from societal attitudes, educational environments, and personal interactions, can have profound and lasting impacts on their well-being and development. The persistent themes of being hated and humiliated emerge as particularly damaging, creating a cycle of negative self-perception and social isolation. The 'Wheel of Hatred' illustrates how cultural narratives and societal norms contribute to a hostile environment that perpetuates discrimination and marginalisation.

Despite decades of research documenting these emotional struggles, there remains a significant gap between understanding and action. The voices of disabled children, consistently expressing fear, loneliness, and a desire for change, have been recorded for years, yet meaningful interventions are lacking. To address these issues, a fundamental shift in societal perceptions and political discourse surrounding disability is crucial. This change must encompass challenging negative stereotypes, promoting inclusive practices, and actively combating hate speech and discrimination. Only through such comprehensive efforts can we hope to create a more supportive and empathetic environment for disabled children, fostering their emotional well-being and enabling them to reach their full potential.

Conclusion

As I conclude this literature review, I find myself reflecting on the profound emotional journey that has unfolded through the exploration of the experiences of disabled children. The narratives I have encountered are not merely academic; they resonate deeply within me, evoking a sense of urgency and a call to action. The emotional landscape of disabled children is fraught with challenges that are often overlooked, yet these challenges are critical to understanding their lived realities. I have examined the pervasive impact of societal attitudes, educational practices, and cultural narratives that shape the identities of disabled children. The historical context of disability reveals a legacy of ableism that continues to marginalise and dehumanise. I am particularly struck by the concept of ‘Othering,’ which not only alienates disabled children from their peers but also instils within them a sense of inferiority that can be devastating. This process of Othering, as I have explored, is not just a theoretical construct; it manifests in the daily lives of disabled children, shaping their self-perception and emotional well-being.

The emotional struggles faced by disabled children, fear, anxiety, guilt, and humiliation, are often compounded by the societal pressure to conform to arbitrary standards of normalcy. I cannot help but feel a profound sadness for those who navigate these treacherous waters, often feeling isolated and unsupported. The 'Wheel of Hatred' I have designed encapsulates the cyclical nature of these emotions, highlighting how societal narratives can trap disabled children in a cycle of despair. It is heartbreaking to consider how many children internalise these negative perceptions, leading to a diminished sense of self-worth and a longing for acceptance that often goes unfulfilled. Moreover, the exploration of bullying and violence against disabled children has revealed a grim reality: the very institutions meant to protect and educate them can perpetuate harm. The inadequacies in our educational systems, coupled with the pervasive culture of ableism, create environments where disabled children are not only excluded but are also subjected to ridicule and violence. This is a societal failing that demands our attention and action.

In light of my literature review, I advocate for a comprehensive approach that prioritises the voices of disabled children in shaping policies and practices that affect their lives. Dominant narratives that dehumanise and marginalise must be challenged, replacing them with stories of resilience, strength, and individuality. It is imperative that we create spaces where disabled children can thrive, free from the constraints of prejudice and discrimination. Ultimately, this literature review serves as a clarion call for action. The emotional toll exacted by societal attitudes and structural barriers is profound, and it is our collective responsibility to address these injustices. By fostering a culture of empathy and understanding, we can create a world where disabled children are not only included but are also celebrated for their unique contributions to our shared humanity. Together, we can work towards a future where every child, regardless of ability, is afforded the dignity, respect, and opportunities they deserve.

Chapter 4: A Storied Life (The Data)

Content Warning: This section openly discusses sensitive topics, including sexual abuse, physical and psychological abuse, humiliation, and extreme acts of violence against a disabled child within educational settings. Reader discretion is advised.

Data Selection

Choosing the data was difficult. I had a plethora of accounts of being bullied at school. Alongside this, I had many stories of abuse and relationship violence. My initial review of the literature demonstrated that, as a disabled child, I was twice as likely to be bullied (Chatzitheochari & Platt, 2019). So, although my school life felt unique, they were and continue to be shared with many disabled children (Ability Path, 2012; Fink et al., 2015; Ktenidis, 2022b; Liasidou & Ioannidou, 2021; Purdy & Mc Guckin, 2015). Even so, little attention is paid to the bullying of disabled children, both in actively addressing it (Purdy & Mc Guckin, 2015) and collecting data (UNESCO, 2018).

With my research questions in mind, I have selected five life stories spanning my school life from 1969 to 1980, all evoking different discussions around bullying and violence. These stories show the process of bullying and make visible my vulnerability, and inevitably, they are emotionally distressing. However, autoethnography is more than the data because it goes beyond the stories to 'abstract and explain' to construct meaning and the 'values in the social worlds' being investigated (Bunde-Birouste et al., 2018). The stories I selected with a brief explanation as to why they were chosen:

Story 1: Infant School – Corporal Punishment 1967 is a story about my first day at school and my experience with the school's Christmas play. I have a physical disability, spina bifida, and wear callipers. Both affect how I move and how others perceive me. This story provides insight into the challenges I faced in a 'normal' school setting in the late 1960s, highlighting issues of inclusion, discrimination, and the importance and impact of both supportive and unsupportive adults on a disabled child's experiences. By choosing to tell this story, I present a powerful narrative that not only educates readers about past injustices but also encourages reflection on current practices and attitudes towards disability inclusion in education and society at large. I bring attention to social issues, promote empathy, and contribute to ongoing discussions about inclusive education and the treatment of disabled children.

Story 2: Junior School – Not the Slipper 1972 – This story is a poignant account of my experiences with bullying, disability, and a traumatic encounter with school authority figures. It provides insight into the challenges and emotional turmoil faced by a child with a physical disability in a school setting during the 1970s. The story paints a vivid picture of a disabled child navigating a complicated world with limited support, highlighting the impact of disability, bullying, and inadequate adult intervention on a child's development and coping strategies. The story paints a picture of a child navigating a challenging world with resilience, struggling with trauma and disability, and finding ways to adapt and survive in a sometimes hostile environment. By sharing this story, I offer a powerful, personal perspective on disability, childhood trauma, and the complexities of navigating social and educational systems as a vulnerable child. I invite the reader to reflect on issues of disability rights, educational reform, childhood trauma, and the resilience of the human spirit. The narrative serves as both a cathartic expression and a means to foster empathy and understanding in readers.

Story 3 Senior School - An Hour in the Ditch is a deeply personal and disturbing account of my experiences with severe bullying, social isolation, and physical abuse at school in 1977. This story paints a picture of me as a vulnerable, isolated, disabled child facing extreme challenges in my daily life. It highlights the devastating impact of bullying, the importance of support systems, and the resilience of the human spirit in the face of adversity. By choosing to tell this story, I provide a robust, visceral account of bullying and its consequences, potentially raising awareness and empathy for those who experience similar situations.

Story 4 – Dig Your Boots - 1978 is a story that provides a raw and emotional insight into the life of a disabled child, highlighting the physical, emotional, and social challenges they may face, as well as the resilience and strength required to navigate such a difficult situation. The story describes a severe physical attack that leads to hospitalisation and potential long-term effects on mental health and well-being. It is about a girl who desperately wants to fit in and be liked by her peers, which often exasperates her vulnerability and prompts further bullying. By sharing this deeply emotional and personal story, I aim to evoke empathy and understanding and potentially inspire positive change in how society treats and supports disabled children navigating the world. I intend to shed light on the importance of self-image and acceptance. It is a raw and honest account of my life with a disability, hoping to help others in similar situations feel less alone.

Story 5

Finally, I *Snapped*- 1980 is a deeply troubling account of my experiences with sexual abuse, trauma, and its long-lasting effects. I was forced to keep secrets, felt isolated from my family and peers, and struggled with feelings of guilt, shame, and self-loathing. This story provides insight into the complex and devastating effects of childhood sexual abuse. It illustrates how trauma can impact a child's relationships, mental health, and behaviour, leading to long-term psychological consequences and difficulties in social interactions and personal relationships. By telling this story, I am not only working through my experiences but also contributing to a broader understanding of the complex and long-lasting effects of childhood trauma and abuse. By sharing this story, I am breaking the silence that often surrounds childhood sexual abuse and its aftermath, and potentially, I am helping others who have had similar experiences feel less alone.

Prelude

I was born at home in 1964. The midwife summoned a doctor, and he pronounced that my twin was dead and I had 'deformities' that required hospital treatment. The birth was a harrowing experience for all in attendance (Sharrard et al., 1969) and left my mother bed-bound, so my father accompanied me to the hospital, wrapped up in a blanket. He often recounted that during the ride to the hospital, he felt a surge of love and the need to protect me. When my father and I reached the hospital, I was examined. He was told that I had a congenital 'defect' of the spine called spina bifida cystica and would have 'hydrocephalus, paralysis and deformity of the lower limbs, and urinary bladder paralysis and its consequences' (John et al., 1963, p. 18). I had a little (35.40%) chance of surviving to the age of 12 years, and the survival rate of medical interventions was low (Laurence, 1964), quite a catalogue of problems for my father to comprehend. The doctors had stolen my cute, adorable baby status and distorted it into a non-human collection of 'deformities.' In Scotland, cases such as mine, Spina Bifida, would have been classed as stillborn and disregarded by the medical community, which could not justify operating due to low survival rates (Stark, 1971).

My father was advised to let nature take its course (let me die) rather than live a miserable life. Doctors suggested he leave me at the hospital to be disposed of and go home to his wife and 2-year-old daughter and move on with his life. He demanded a bottle and nursed me through the night, and he would say, I never cried. I just looked around with my big brown eyes. Realising he wanted me to live, the doctors took Figure 6: My birth photo, Spina Bifida, and he was told to take it home to show his wife and explain to her the problems I would have. However, he was afraid to leave me just in case they 'threw me away' and told them he had already decided.

Figure 6 : My birth photo Spina Bifida

I then began my long medical journey. Dr John and colleagues at Sheffield Children's Hospital recently (1963) published a research paper into the importance of early myelomeningocele closure, advocating that it be treated as a medical emergency. It was closed the two days after I was born (John et al., 1963). I was transferred to Sheffield Children's Hospital to have a subluxated and lateral rotation for the deformity of my hips; this was corrected by dividing my muscles and attaching them to my pelvis. This groundbreaking operation was performed by Dr Sharrard, who later became renowned for this procedure and his work with Spina Bifida children within the medical profession. The next operation was for the flexion deformity of my knee and involved the relaxation of my hamstrings, and my two club feet were corrected by breaking the joints and using plaster casts and splints. Later, Sharrard (1968) conceded that equinus feet were inevitable once corrected for many children, as shown in Figure 7. A condition that made walking and buying new shoes difficult for me. Hinged callipers in the early years of my life allowed me to hitch up my pelvis to swing my leg, forcing me into the upright position and enabling me to walk. Eventually, I achieved 'near-normal' limb movement and had them removed before I went to Junior School.

Figure 7: Equinus deformity.

My medical notes, discussions with my parents, and photographs all contributed to research and training that was open for discussion by the medical fraternity. The expectation that I would 'perform' for doctors and other medical professionals on a stage in my underwear was never questioned by my parents and became part of my young life. Initially, I did this willingly for my doctors because they were my childhood heroes, and performing for them was the least I could do. We had to be grateful that he put so much effort into improving me; this was my parents' mantra. However, the shame and embarrassment were palpable, especially when on stage with a male Spina Bifida patient of my age who was on the same research project. Although we became good friends and got into mischief in the hospital together, standing on stage was still uncomfortable for both of us.

I will never forget the first time I stood alone on the stage and heard the doctors discussing his death. He died in front of me in the ambulance we shared on the way to the conference. I was heartbroken, but the show must go on. To the doctors, he was a collection of medical conditions. He was not a person to them; we were not human, just a collection of deformities. I cried openly on stage for the friend I lost, and as they continued their demonstration, part of me died that day, too. I realised my doctors were not my heroes or my friends. Dr Sharrard believed 'No child with spina bifida should be relegated to a wheelchair until or unless all other attempts have failed' (Sharrard, 1967, p. 769). I felt as though I was a tool to help him prove his hypothesis, and the death of my friend was simply a byproduct of research. What this medicalised approach did for me, as with other disabled children, was to delude us into thinking that one day we would be cured and be normal (Cooper, 2020).

Dr Sharrard predicted that my intelligence was good and that attending 'normal' schools would ensure my independence (Sharrard, 1972). However, he also pointed out that this education and independence would require considerable social change. The treatment of 'handicapped' children was often harsh, bordering cruel. Medical interventions would inevitably increase the number of 'handicapped' children entering the education system and would involve considerable planning to meet the varying needs as disabled children enter society and the education system (Sharrard et al., 1969; Sharrard, 1972). Dr Lister also acknowledged how complex disabled lives would be, arguing that surgeons had kept us alive and that society should ensure we were happy to have survived (Lister, 1970). Whilst I was safely nurtured within the family, neither the doctors nor my parents could have prepared me for the social rejection that plagued my life. I was never normal enough for society or abnormal enough for my disabled hospital friends, who were visibly more disabled than me.

Bullying when I was at school was primarily ignored and frequently modelled by the teachers and headteachers (Ervin, 2011). I was trapped in an environment where I was not safe and forced to attend by law (Duncan, 2013). The lack of problematising bullying for disabled children feeds into oppression and favours ‘normal;’ it was inevitable in this kind of culture that I would be bullied at school (Chatzitheochari et al., 2014). For me, being bullied was like playing Russian Roulette, only not as simple as living or dying. There were days when I wanted to kill myself and days when I thought they would kill me. The bullying and abuse I suffered as a child impacted my mental health, causing my personality to fragment. When the bullying got too much to bear, my dad would say, ‘Sticks and stones may break my bones, but names will never hurt me.’ This adage of Alexander Kinglake (1862) is habitually used to encourage children to ignore name-calling. However, the phrase’s original meaning advocates that real courage begins when one does the right thing despite the sneers of those around us (Martin, 2020). Sadly, the right thing to do eluded me. I tried alternating fighting back and ignoring the bully.

I will never live up to society’s expectations of normalcy (Richardson et al., 1964). The stories I tell show how it feels to be disabled from a lived perspective and the consequences. For me, being disabled is like looking through a window into a life that is always out of reach. It is about not belonging and isolation, a life immersed in fear, shame, humiliation, and self-loathing, ‘psycho-emotional disablism’ (Chatzitheochari et al., 2014, p. 4).

I have two sisters, a brother, a cousin and a mum and Dad in a small 3-bed semi on a council estate in a suburb. We spent our childhood free to roam and explore, leaving the house in the early morning and returning for meals. I would describe my home life as ‘at one with nature.’ I did not appreciate how tough things had been for my mum or how lucky I was that once she had made up her mind about something, no one would change it. So, when she decided I was going to a 'normal' and not a 'special' school, no doctor or headteacher would dissuade her. I like to think that my parents knew how clever I was and that I needed to be in a school that would embrace this. In some respects, this was correct. "She needs to learn how to read and write, not wipe her own arse," my father argued. My mother viewed it more as a practical issue, and she could not physically get me to the 'special' school, get my sister to the 'normal' school, and look after a baby. So, my life was the result of the logistics of distributing children to school. Lewis (2011) suggests that:

> 'By acting from that place of not knowing and through the subsequent storying and reflection, we make small discoveries and beyond those discoveries, in the shadows, we find there is something else, something more' (Lewis, 2011, p. 509).

This quote encourages an attitude of curiosity, humility, and a willingness to explore beyond the surface level of our assumptions and initial discoveries. It suggests that true wisdom and personal growth often lie in the shadows, in the areas we may initially overlook or fail to understand, and that by embracing uncertainty and remaining open to new perspectives, we can uncover profound truths and deeper levels of self-awareness and understanding. I invite you to join me on this journey.

Life Story 1 – Corporal Punishment -1967

My Daddy said the headteacher was "a tough old bird," but Mummy said she was "an evil witch" who needed bringing down a peg or two. It's my first day at school, and I am being brave; no need for silly crying. As we entered the school, a lady, I think it was a teacher, told Mummy to go around the building and into the playground. But Mummy was naughty and went in the side door to the school. Mummy has posh clothes on today and those big pointy heels that make her look so tall. She smells of Estee Lauder and cigarette smoke. I like how Mummy smells, but I don't like that she smokes. I am wearing my sister's old uniform. It's a little bit big, but my mummy says I will grow into it. My Daddy cleaned and polished my callipers, and my mummy put my special cream on me to stop me from smelling funny. It was a very long walk, and I was tired. Then, suddenly, a tall, old lady with a pointy nose and really big, ginormous glasses stood in front of us.

I was so scared I hid behind my mummy's legs; this must be the dark, evil, witch. They just kept looking at each other for ages,

"Morning Mrs …" said the headteacher. "Are you lost? New starters must go to the playground."

I looked at my Mummy, and she had that look on her face, the one that made us stop fighting or shouting without using any words, a weird, angry smile,

"Oh, no, we are not lost. We are looking for the special entrance," she almost shouted the word 'special,' and it made me jump out of my skin. She closed her lips together and put her hand on top of her eyes like when you play the clapping game, a sailor went to sea sea sea. She pointed down the corridor.

"There it is!" she shouted, making me jump again; even the evil witch jumped, and she walked properly fast down the corridor, her heels tapping and my calliper clunking and squeaking as I tried to run to keep up with her. And so began my inclusive education.

I am scared, but I have to be brave and not cry. Mummy opened the door to the classroom, and the teacher looked up, "hello" she said, smiling at me. Mummy let go of my hand and went out the door into the playground, and she didn't hug me or say goodbye. I wanted to run after Mummy, but she was too quick. My heart felt funny, and I was so scared that I wanted to cry. My teacher put her arm around me, "let's get you settled before we let the others in," she said.

I have lots of toys to play with at school. My favourite is the red telephone box. It is like the one on the hill, and I pretend to call my Daddy. The other children don't like me and won't play with me. They don't invite me to their birthday parties, and they say my mouldy legs smell. I don't have mouldy legs. So, I don't like them back. Mummy says they are just sores that have been affected. I don't want to play with the other children. I play by myself, so they don't have to smell my poorly legs.

My teacher loves me. She teaches me new things, and I love learning numbers. I tell my Daddy how to do numbers. He always gets them wrong. He is a silly sausage. Daddy said I will be a teacher when I am big. Mummy doesn't think I will 'cause I will be dead. The doctors who keep trying to mend me always tell Mummy that I will probably die, but they mend me anyway. I don't know what 'die' is, but in assembly, they tell us God will look after us when we die, so that's ok.

I have been at school for one year and four months. That is a long time, and my teacher says I am very clever. She wants me not to be shy, which means I must be friends with horrible children. But they don't want to catch what I have got, so they won't be my friend; I don't care.

It is Christmas, and it is time to get ready for the nativity play. Christmas is Jesus's Birthday, and I am going to be Mary, that's Jesus's mummy, and it is very 'portant, but it is only pretending. Daren is Joseph, but he won't hold my hand 'cause he says he doesn't want to get mouldy legs. My teacher laughed and told him, you can't catch mouldy legs and not be silly. I laughed too, 'cause he is silly, but I don't have mouldy legs though. Anyway, I don't want to hold his hand 'cause he's a boy, and that's worse than mouldy legs. I have lots of lines to learn, and I sing a song all by myself. Daddy helps me learn my lines at home, and I sing my song over and over again, and it makes everyone at home cross with me. Daddy tells me it should be fun and I don't need to do it all the time. I want to get it right, though; they don't understand how 'portant this job is. The headteacher said we couldn't let the school down. She told my teacher I should not be Mary, but my teacher said I have a good memory, so I am perfect for being Mary.

We had to practise the whole thing in the hall in the morning. There were lots of chairs! The headteacher told us we all had to behave and not let the school down, and she said this all the time in every assembly. When we got back to class, I was sick on the floor. When my sores go red and yellow and smelly, I get sick. I'm not dying sick; it's just an affection (*infection*) that needs cream. You have to go home when you're sick. I am sad because I want to be Mary. The headteacher told the lady in the office I can't get my own way all the time. She would not let me go home now and ruin the play for everyone, "it is just typical, I said she shouldn't be Mary, but her teacher knows best." She said in an angry voice. My teacher knows everything. I can't let the school down, and I can't get my own way 'cause I could not find my house without Mummy, and I'm not allowed to leave the school on my own. I think Mummy is at work in the morning, so she can come to see the play in the afternoon. Daddy is going to try, but his boss can be a B… (Daddy calls him a naughty word that we can't say), but his boss is not nice. He gets cross when Daddy has to take me to the hospital and says it’s my mum’s job. I sat in the sick chair with the black bucket and was sick again. I could hear the headteacher and the lady in the office. She told the lady that no one wanted to play with me because I was handicapped and should be with children like me. Children can’t be like me. Callipers are made special for me. Daddy says it’s because I am special. You can’t get them from the shop, so there can’t be anyone like me anywhere.

The head teacher came out of the office, took the bucket off me, and held my hand. She was walking so fast that I had to run, and it was hard. I was very tired when I got to the classroom. She told my teacher I had nerves. I think my doctor will need to mend my nerves if they make me sick. Mummy said the cream would stop me from being sick, so I think the cream doesn’t work anymore. They were talking, and I interrupted them; it’s naughty to interrupt adults, but I needed a wee and thought I would get sick again, but she still had my hand very tight. “That reminds me,” she said, “put it in a nappy for the play.”

When I got back from my wee, I wasn’t sick, so I think my nerves were mending. The lady from the office was talking to my teacher. I heard her say, “You have to put a nappy on it so that it doesn’t clunk over the stage for a wet herself in front of our parents.” I think she was talking about me. The lady from the office gave my teacher the nappy, and all the children giggled. The teacher put my nappy on in the bathroom and said I can just wee myself. It made me sad. My Mummy told the doctor I took a long time to stop using nappies. He said that was ok for spina bifida kids, and she was lucky I managed it at all. I think I am one of those “Spina Bifida kids;” that is what they call us at the hospital. I do still have little accidents ‘cause I can’t hold on for long.

Lots of faces were looking at me as I walked down the aisle with my pretend husband, Joseph, but it was Darren, really. I was frightened, so I tried to hold his hand like we were told to. Daren just made silly yuk noises, and he reached for my hand. He pulled it away just as I went to hold it and wafted his nose. I didn’t care, though. I had a ‘portant job to do. It was really good. I said my lines in a big voice. I stood up to sing my song, but when I tried, my dangly bit stuck to the back of my throat. “We will,” I squeaked in a tiny voice. “Stand up, Mary,” the headteacher shouted very loud. She made me jump. “But I am standing up,” I shouted back very loud, not in a cross way, just loud so that she heard me.

I wasn’t very big. My mark on the doorpost was not moving like my sisters,’ and this made me sad. Daddy said I will grow when I’m ready. I think I have to wait for the doctors to mend what makes me grow. Everyone was laughing at me. My face was extremely hot, but they just kept laughing. I looked for my Daddy, and there he was with my Mummy. He made it. I smiled at him, and he smiled back. He moved his mouth, telling me to sing. He does this when he doesn’t want Mummy to hear him. His mouth moves, and no words come out, but I know what he says.

“Sing, Mary,” she (the head teacher) shouted in a cross voice. Everyone stopped laughing and looked at me. I moved a little, and my calliper squeaked, and there were a few more little laughs from the people at the front. I couldn’t sing; my voice would not let me. I lowered my head. I had ruined everything just like the headteacher said I would. I didn’t know what to do. I looked up, and they were still looking at me. I looked down again. I wanted to cry, and then I felt a warm hand in mine. I thought it was my teacher, but it wasn’t. It was my Mummy, and she sang. It’s a good job that I taught her the words. I think I am already a teacher. I held her hand tight and looked at my Daddy, and together we sang, with Mummy and me in the front and Daddy in his seat.

Everyone stood up and clapped and whistled. I think the whistle was my dad. He can whistle really loud with his fingers. I looked at my Mummy, and at that moment, I loved her just as much as Daddy. When the play finished, Mummy came over to me, pushing through the crowd. “Could all parents remain in their seats until the children have returned to the classroom?” the head teacher shouted, and all the parents sat back down.

Mummy crouched down to look at me, and she said I look pale; I think that means sick. I told her it was nerves sick, not my legs. I looked up at her and said, “But I didn’t let the school down, did I mummy?.” As she stood, I said, “I’m sorry, Mummy; I wet my nappy when I was scared” I spoiled everything by telling her about the nappy. Mummy was so cross. I don’t think she was cross at me for wetting myself. She did her angry walk as she crossed the hall towards the headteacher.

My Mummy was very tough. She had a big fight with a lady who called me a ‘spastic’ once. The lady was crying and said she would set her husband on my mum. My mum just said, “Bring him down, and I’ll sort him out an’ all.”

I looked towards my Daddy, who was scrambling through the chairs to get to them. Everyone was looking at them, but Mummy didn’t seem to care. She was talking to the headteacher, but I couldn’t hear what she was saying until Mummy shouted loudly, “She is here to stay, and you can’t drive her out.” That was funny ‘cause the headteacher doesn’t even have a car; she comes to school with the music teacher, or a man takes her home. But she isn’t married, so how dare she look down her long nose at us, that’s what Mummy says. Then Mummy turned to the other Mummies and Daddies. “Get used to it because she is going nowhere.” The hall emptied very quickly until only I was left, in my Mary dress, and my Daddy and Mummy. Daddy came over and scooped me up, and we all left with our heads held high, Daddy said when he was telling our neighbour. So, I went home in my Mary dress and wore it on Saturday but not Sunday ‘cause we went to the big park for a treat. I was so happy at the park. Mummy and Daddy were not cross and shouty, they were happy, and me and my sisters didn’t even fight.

On Monday, I was in the assembly where we talked about God. I know I should listen because God would be looking after me soon, but my calliper sores were really hurting me. I tried to cover them up so no one could smell them; they would say, “Mouldy legs has farted,” and I didn’t like that. Mummy put the new special powder on them that smelled nice, but sometimes I couldn’t sit on the toilet properly ‘cause of my leg, and the wet would make my leg more sore. The headteacher wasn’t talking about God today. She was talking about rudeness and insolence or innocence or something. I hated sitting on the floor; it hurt my leg. We had to sit with our legs crossed, and my calliper didn’t bend very well.

I was glad when it was time to go back to class. I sat at my desk, looking out the window. The teacher was talking. We had to sit at desks now because we were big children. I liked the toys better. There is a dog on the wall. How did it get up there? I heard a big bang, and everyone jumped, even my teacher. It was funny. Daddy hides behind the door and makes me jump sometimes, and it feels funny in my tummy when I jump. “Good morning, Miss …” we all chanted.

This is what we said when she came into the room. We say her name after Miss, but I can’t tell you her name. The Miss is the bit that tells us she is not married. I looked back out of the window to see where the dog was. I felt pain around my wrist and was at the front of the classroom. She had dragged me.

She was shouting at me and shaking my arm up and down as she talked. I looked at my teacher, and she was scared, so I was frightened. I tried to get her hand off my wrist, clawing at her hand. I wanted to go to my teacher; she would keep me safe. The head was screaming now. She grabbed my neck and pushed me to bend over. I resisted. I knew I was going to fall. I looked for something to hold on to. “I can’t,” I screamed. “I’m falling. Let me go!” I screamed louder and struggled harder. I was terrified. “You just cannot stop being rude. You shouted at me in front of the school and parents. You are a disobedient child and will be punished for your insolence,” she snarled through gritted teeth. She grabbed a chair with her free hand and pushed me over it. She lifted my skirt and smacked my bottom. She beat me after every word. “You will not be rude to adults. I will not have rude, nasty children in my school.” She put her face close to my ear. “And I don’t like tittle tattles either, you understand me,” she said.

Everyone had seen my sores and the bits Mummy told me to keep private. Water dripped from my eyes onto the floor. “Let this be a lesson to you all.” The door banged, and she was gone. I could not stand. I looked at the puddles forming on the floor. I was crying. My teacher put my skirt down, lifted me, hugged me, and took me to the bathroom. I don’t like crying, “It doesn’t solve anything,” my Mummy would say. But now, big crying sounds shook my tiny body. “What did I do?” I gasped between sobs. She didn’t answer me; she just squeezed me tight, and we cried together. I put my arms around her, “Don’t worry,” I panted, “My Mummy says I am here to stay.”

Life Story 2 - Not the Slipper - 1972

Prologue

My Church of England Junior school was opposite the village church. It was a quaint, traditional church with a single steeple and beautiful stained-glass windows, surrounded on three sides by a large churchyard. I walked through the churchyard on my way to school each day, silently tiptoeing past the headstone that stated, ‘I am not dead; I am but sleeping.’ I was terrified of dying by this time, and I could not imagine just not being here. Being saved and cared for by God no longer appeased the death sentence I lived with daily. The church and my religion were very important to me. Every Sunday, I would go to Sunday school to learn about God and hear stories about being a better person.

When I started Junior school, the ‘light-hearted’ name-calling began, and children would mimic how I walked and ran. They would say I walked like a penguin or waddled like a duck. The boys would walk behind me, making duck impressions or running, flailing their arms and legs. At first, I let it brush over me and passed it off as immature boys being stupid. Eventually, it got too much for me, and I would threaten to beat them up if they did not stop. I never hit anyone, but the rumour seemed to do the trick, and the name-calling stopped, probably because they grew up or got bored.

I had a reputation for being a no-nonsense girl simply because I had imposed a rule that protected me from ridicule. The system worked well until Simon Simpson started; he was the son of Mr Simpson, the new Headmaster. I have used pseudonyms here to protect their identity. From a distance, I observed that he was full of self-importance, pushing the other kids around and being obnoxious to teachers. It was almost like he owned the school, and teachers were afraid to impose sanctions for his behaviour in class, which seemed to rubber-stamp his attitude. It was always a scary time for me when new kids started, at least until they were informed of the unspoken rule. Mostly, my reputation was enough to stop their name-calling.

Most girls admired Simon; he had a square jaw, neatly cut, short blond hair, and an immaculate school uniform. They all wanted to be his friend, as did the boys. He was never alone. I was unsure if it was his charm, fear, or the fact he had the football, the marbles, football cards, conkers or whatever else was the fad at the time. I felt the best action was to avoid him and stay under the radar. He was not in my class, so he was not too much of a threat until we began rehearsals for sports day, when both classes joined.

Age 8 years

Was this some kind of sick teacher joke? Denise and me for the three-legged race. Denise was 8ft tall, and I was 2ft tall. Well, that is how it felt and how ridiculous the picture was. She was the first to develop massive breasts, taking pleasure in resting them on the top of my head. Tied together, to the amusement of everyone, we flopped around ridiculously as we stumbled down the field. Of course, we came last. The laughter was entirely justified. I, too, would have laughed at this crazy sight. The running race, however, was different. I always came last, and everyone knew I finished a long time after the others. As I returned to my year group, I heard the laughter. I looked over to see Simon wobbling around the playground, wafting his hands as he ran in circles.

I felt my face flush, not in anger but in embarrassment and shame; he was publicly humiliating me. I walked over to Simon and stared up at him. He was also tall. He looked around to see the worried faces of his peers. It was like a tennis match as faces looked from me to him, waiting for the first person to miss the ball. I just stared at him. To be honest, I could not think of what to say. I could not challenge him to fisticuffs at dawn because I would not stand a chance against him, and he had already made me look stupid. He looked confused, glancing around at his audience. “Come on,” he said, “tell me that is not the funniest thing you ever saw.” I continued to stare at him. The silence was palpable. Then he entered my personal space and grinned, “You run like a spastic,” he snarled. After what felt like an eternity, someone from the crowd shouted, “Fight!.” Others soon joined in the chant, and he laughed in my face as though this was the most absurd thing he had ever heard. I stepped closer but was relieved when the teacher came over. “Leave him alone, Melanie,” she said, giving me that knowing look.

I walked away, fighting back the tears. It was out now, and everyone knew I was a spastic. This word had never been associated with me in school. The doctors had informed my parents that I had spasticity of the limbs. When I asked my dad what this meant, he said my muscles had been swapped around, and they worked differently. He reassured me it wasn’t anything to worry about, but what it meant to me was that I had little control over my lower body. I would jerk uncontrollably sometimes, or my leg would suddenly raise forcefully. I was so angry. Simon’s Dad must have told him; how else would he have known unless he read the information in my school records?

Mr Simpson, the headteacher, became the focus of my hate, and it was like infant school all over again. I knew that headteachers were evil. My hatred for him grew throughout the day. Mr Simpson had betrayed me, giving his son ammunition that threatened my safety and destroyed any chance of a happy future at this school. If this closely guarded secret was out, what else might be revealed? I lived with a massive secret I had to guard with my life. Secrets made me vulnerable. What if he knew about the Man [abuser], and what if he told everyone? I was so scared that I felt sick. If it came out, my parents would find out. I could not focus on the following classes because rage and fear penetrated every part of me. The one happy thing about my life was threatened; the Man loved me and was my special and only friend. I could not lose that. I had to protect my secrets at all costs.

The rumour that there would be a fight after school spread like a fire burning out of control. No one knew how the rumour started, but a sense of imminent danger engulfed me. Chinese whispers and unknown expectations electrified the school, penetrating every year group whilst seemingly dodging the teachers. As the fire raged through the school, hatred and loathing ran through my blood. Overwhelmed by this newly acquired emotion, I was transported back to my infant school head teacher and how she had humiliated me. These emotions and feelings of humiliation terrified me. I did not want to fight Simon. I did not stand a chance against him. Together, we [my voices] made plans, some wanting to tear him apart, others wanting to hide or tell a teacher. Simon was my antagonist. Mr Simpson had betrayed me; he was my enemy. I wanted these monsters to pay for the humiliation they had caused me to suffer. My future lay in the destruction of Simon. He had the power to make my life an absolute misery. He was going to ruin everything for me. The school bell rang, dragging me out of my hate-filled stupor.

To the right of our school was a wide corridor of steps, overshadowed by the trees. Never being exposed to the sunlight made it a dark and dank place where I would exit the school. It was slippery all year round, so no one gathered there. The steps were steep, broken into five sets of six steps to make the incline manageable. A square of green mossy tarmac separated each flight of stairs. I could see the crowd as I walked across the lower playground, indicating this was where the fight would take place. I entered the toilet block. I needed time to think and pee. I had a very weak bladder due to my disability and was prone to peeing myself if stressed, and since my friendship with the Man, this had worsened. I was unnaturally calm as I left the empty toilet block. As I rounded the corner, the silence traversed each flight of stairs like a wave rolling up the shore. The first square was empty. Save for Simon, who stood tall and confident. The arena was enshrined by children jostling for the best view, some daring to climb the high wall that ran down the side of the steps. The crowd parted and closed behind me as I prepared for a battle of words. “Make way for the Spastic,” he sneered. “Let her waddle her way down.” These words were the last thing I remembered.

My hands were around his neck, and he was pinned to a rusty drainpipe. I could see my hands and his face going red, yet I was disconnected, disassociated. He looked stunned as he scratched at my arms. I felt no pain, only a cold breeze on my face as I stared into his deep blue eyes. How can the devil himself have blue eyes? Surely, they should be blood red, I pondered. I was at full stretch, balancing on the bottom step, and the pressure on my hands was greater for balance than malice. The silence was disrupted by children screaming at me to let go. Some pulled at my blazer and my bag. “You will kill him,” they shouted overdramatically. I did not see him; I saw the nasty little faces of my headteachers, and then I saw the Man’s eyes boring into me as he hurt me over and over again. Only now, I did not feel the love; I felt shame and loathing. My head tilted from side to side as I tried to re-engage with reality. My demonic glare obviously terrified this boy, and his eyes, now bulging, were pleading. “Scarper,” came the teacher alert, and children scurried away like bees deserting a threatened hive, leaving me with a buzzing in my ears. I was grabbed from behind and pulled off Simon, who fell to the floor like a sack of spuds, gasping for air, reminiscent of a demonic guppy fish. Loudly, he began pleading his innocence in between each breath, “I never touched her,” he panted.

The two teachers dragged us up to the headmaster’s office. We sat outside in silence with our heads lowered. “Get in here,” he bellowed. I stood tall and stared directly into Mr Simpson’s eyes defiantly. On the other hand, Simon was shaking, and his head remained lowered. Surely, he was not afraid of his own Dad. Simpson grabbed the cane off the wall and slammed it on the desk, breaking my gaze and making me jump. In a flash, Simon was bent over the desk, and the caning began. “You raised your hand to a spastic cripple,” he yawped. He brought the cane down with every word and one final extra hard wack to finish. Simon stood up slowly, tears flowing shamelessly down his face, “I never touched her,” Simon sobbed.

Nevertheless, his dad wasn’t interested in anything we had to say. Teachers never were. He had already made his mind up, guilty as assumed, not as proven. A tap on the door broke the uncomfortable silence,

“Come in,” shouted the head. The door opened slowly, and a small head popped around it.

In a tiny voice, a boy squeaked, “My shoe has fallen down the drain, sir; my mam, all kill me if I don’t get it back.”

“What!” he bellowed.

“Sir, my shoe,” he started again.

The headteacher returned to the other side of the desk.

“Did you see this fight?” he growled menacingly at the boy.

Now, he wanted to discover what happened when the damage had already been done. I didn’t care that Simon had been beaten by his father. He deserved it for what he did to me.

“Yeah,” said the boy excitedly. “Well, it wasn’t really a fight; she leapt off the steps like she could fly or sommat and pinned him to the wall. It was terrific. He didn’t have time to do owt.” Said the boy with a hint of awe.

“Get out,” said Mr Simpson quietly but menacingly.

“But, sir, my shoe,” he winced.

“Do you want over my desk, lady?” he bellowed, making us all jump again.

The door closed, and the boy’s footsteps pounded down the wooden stairs, one soft and one hard as his sock and shoe drummed poignantly, followed by louder footsteps, a teacher, I assumed, to help him retrieve his shoe.

The wooden and well-trodden stairs led to the school office, staffroom, and the headmaster’s office. There was a smell of tobacco and strong coffee. I could faintly hear voices from the staff room.

“So,” he said as he slid from behind the desk, circling us menacingly. “You just attacked him like a wild animal for no reason.” He said very quietly, somehow more frightening than his shouting.

“Not for no reas..,” I began to protest.

Then I felt the headmaster’s clammy hand wrap around the back of my neck as he tried to force me over his desk. I shook myself free and stepped back.

“Slipper boy,” he said calmly, pointing at the wall from where the cane had been retrieved. There hung a blue checked slipper with a black sole. Strangely, it looked old, like it had been well-worn. I wondered who donated a single slipper to the school for this purpose, or maybe it was well-worn because it was used to beat girls over the years. I thought I felt his hand grab the hem of my skirt as I saw the slipper being passed over.

He ordered me to bend over the desk, but I remained still, so he reached out and grabbed my neck. “I will get my dad on you,” I screamed at the top of my voice. I was no longer in the headmaster's office; my voices dragged me back into the shed to show me the danger. I was looking down at the dead rabbits hopping around with their broken necks, their heads lolling from side to side. He broke their necks in front of me, and finally, they fell to the ground motionless, A scene that seemed to arouse the man as he bent me over and… I was pleading with ‘the man’ in the shed, “Stop, please stop, you are hurting me, please Let me go, please let me go, don’t hurt me.”

Hold her down, the headmaster shouted to his son, dragging me back to the here and now. I began kicking and screaming like a wild animal trapped, “Let me go!” I begged, wriggling and turning my head towards his hand to bite him, to make him let go. I turned quickly to look at Simon, daring him to get involved. He blinked rapidly, and his mouth gaped open as he battled over which one of us to obey. He pursed his lips defiantly, and stepping forward, he grasped my shoulders and pinned me to the desk. I couldn’t move, I couldn’t breathe, “please stop.” I murmured silently, “Please don’t hurt me.” The headmaster loosened his grip on my neck and stood back, reaching for my skirt (I thought) and raising the slipper. I screamed, “No, no, no, no!” I kicked out, catching Simon on the shins and making him loosen his grip; Simpson lunged for me again, his face puce with rage. “Get her,” the headteacher snarled in the most menacing voice I had ever heard. The battle continued. I squirmed, knocking pens and papers to the floor, biting and scratching, as the two of them fought in unison to administer the punishment.

There was a loud knock on the door, freezing us all in time. We all looked at the door as though we had never seen a door before. I went limp, exhausted, and collapsed to the floor. The other two stood up dishevelled, ties loose, hair sticking up, with beetroot-coloured faces.

“Is everything ok, sir?” Miss Morledge enquired, not waiting for a reply, stepping into the room. I jumped to my feet, grabbed the door, and almost pushed her down the stairs as I shot past. I ran like the wind. No one was laughing at how I ran now, nor would they ever again at this school. I stopped running as I entered the graveyard; it would be disrespectful to run through there. I limped the rest of the way home, realising that my hip had dislocated at some point, which is probably why I fell to the floor when I did. It often did this, and sometimes it went back on itself. If not, my dad had to force it back. It had mended itself this time but left my leg feeling on fire as the nerves tried to repair themselves. Eventually, I got home and burst into the house screaming,

“He tried to beat me. He was going to hit me with the shoe,” gasping for air.

“Who did?” asked my father as he looked up from the paper; I could hear the concern in his voice. The whole story fell out of my mouth at a hundred miles an hour. I never saw my dad that angry. Even my mum was furious, which was unusual. My mum always found a way of making everything my fault. They left the house, only pausing to put their shoes on; my mum never brushed her hair or put lipstick on. She never left the house without ensuring these things were done, even if she only went to the shops.

They kept me off school the next day, and both had a day off work to “sort this matter,” which was how my dad phrased it. To this day, I don’t know what happened at school that night. This event never manifested in our family reminiscences. I just know that my dad was not allowed to enter the school grounds or even watch our nativity plays. He couldn’t even attend church anymore, but he didn’t go much anyway; he said he was an atheist. This event changed my life. I felt protected by my reputation at junior school. The story of the fight was embellished. I could fly, change my height, and kill a person with one hand were some of the elaborations. I knew for sure that the headteacher would never take me into his office again, and the children left me alone.

The following year, I became more of a joker, and the kids loved it. I was the teacher's worst nightmare. I spent much time sitting in the cloakroom as punishment for annoying the teacher. I could make people laugh and loved it, even at my own expense. At least I was in control of the laughter. So, what happened between Simon and me? I want to say the experience brought us together, and we became friends. In reality, however, we avoided each other. If our paths crossed, we would grunt a greeting.

Life Story 3. An Hour in the Ditch in 1977

Prelude

I had always been at school with my siblings and community; however, the local school had too many stairs and no lift. The doctors, teachers, and my parents decided I would not cope safely with that amount of steps, but no one asked me if I could. I went to a school that was mainly on a level, just a few stairs. I had to walk twice as far to get to this school and up a very steep hill. I was initially very confident about the move to my new school because my mum was the head cook. I soon realised this held no power. However, it provided me with a place to hide during break times and lunchtime. Unfortunately, she left the following year. She was a transient worker, and my dad said it was because of her bad temper. My siblings and the other children from the estate set off for school together each morning, and I walked alone to my school. I began to feel like an outsider at home and on the estate. I was afraid of everyone, convinced they would hurt or humiliate me. I understood more about how wrong my relationship was with this Man and knew it had to end. Also, I am aware that ending it would destroy so many families. I was unprepared for the next stage in my education, and I could never have imagined how bad it would be. All I knew was that children did not like me very much, and no matter how hard I tried, I could not make them like me. So, by this point, I had given up trying. My mum had made it very clear that it was my fault that I annoyed people.

I started senior school, and it felt like I was just a tiny fish in a really big pond. I was so terrified and just wanted to blend into the background, almost like I was invisible. To my surprise, I was placed in the remedial class. I guess I brought that on myself by clowning around a bit in my last year of junior school, but it still felt unfair.

Sometimes, I can’t help but think that maybe the teachers did it on purpose because they didn’t like me. It’s hard not to feel that way, especially since the schoolwork is so easy for me. I worry that my classmates might be annoyed by that, which makes me feel even more uncomfortable. And then there’s my love for organisation, which my sister refers to as my “freaky obsession.” I like to keep things in order, but it seems like that also makes life harder for me at this new school. I really want to fit in and not draw any attention to myself, but it feels like everything is working against me. I wish things were different.

With trembling hands and a racing heart, I found myself suddenly progressing to the top A band. The move only seemed to intensify the glares from the children in the remedial class, their eyes burning into me whenever we crossed paths. No one bothered to ask if I wanted this change. My stomach churned at the thought of entering my new classroom, where friendships were already forged like impenetrable fortresses, leaving me stranded on the outside. Despite my academic abilities, I felt invisible - never truly recognized as intelligent. The worst part? The relentless bullying. It came from all directions, from faces I barely knew, for reasons I couldn't fathom. Each day, I'd wake up with a knot in my stomach, dreading what new torment awaited me.

As I sit here now, my palms sweaty and my breath shallow, I struggle to choose which painful memory to recount. There are so many, and each one is a scar on my soul. I've decided to share two incidents that haunt me still, stark reminders of the extreme bullying I endured. Even now, years later, the mere thought of reliving these moments makes my heart race and my throat tighten. But I know I must tell my story, no matter how much it terrifies me.

I am sitting on the floor of our tiny bathroom, rag in my hand and tears streaming through the mud on my cheeks, willing myself to stop crying, diligently cleaning the mud off my schoolbooks, pencils, and crayons. I’m grateful I had taken the time to sticky back plastic on all my exercise books. I had saved my pocket money to buy it, and now it paid off. I looked up to see my dad looking down at me.

“Oh, Dad, I just want to be normal; why don’t they like me? Why does everyone hate me? What did I do wrong?” I choked out between sobs.

“They don’t understand you,” he said grimly. He looked me in the eyes and said, “You will never be their kind of normal, and that is a fact, and you have to find a way to live with it. Some people don’t like people who are different, and you are different.” He said thoughtfully. “You just have to find the ones that can and try to make friends.”

I remember these words as though I was hearing them today, but I did not understand what he meant. Whenever I thought I had found someone who liked me, they just ended up hurting me. Did he mean that people would always hurt me, and I just had to get used to it?

“You are going to school tomorrow with your head held high and your shoes and books nice and clean,” he smiled.

We sat together, wiping away the mud and recovering my books with fresh purple wallpaper, the same as I had in my bedroom. We did not speak. My Dad knew I could not cope with a dirty, disorganised school bag; he also knew we could not afford a new one, so we had to do our best with what we had. When we finished, I told my Dad I was cold and wanted to go to bed. As I climbed into bed, I announced:

“I am not going to school tomorrow,” looking pleadingly at my dad.

Just then, Mum burst into the bedroom, waving my school uniform and bellowing,

“What the hell is this all about? What you done now?” she said, waving the muddy uniform in front of us. We wanted to say that it was not my uniform, and mine was the one covered in wee, and because she didn’t fetch me from school, she now has two to wash. But I knew better than to let my voices speak out loud, so I said nothing. My mother paused, catching my dad’s warning glare. But still, she went on.

“Well, I’ve got enough to do without bloody washing these for tomorrow.” Again, she looked at my dad, or maybe you’ll wash them, she said. “I thought not,” she snarled.

“She is not at school tomorrow,” he said as he approached the door.

I snuggled into my bed, the only place I truly felt safe. I loved going to bed and was excited to live my dreams. As I snuggled down, I heard my mum complaining about the state of the bathroom and who would look after me the next day. Neither of them could afford to take time off; my hospital appointments were hard enough to manage.

“Get that mud washed off your face,” she yawped up the stairs. “Or I’ll have them bloody sheets to wash an all.” She slammed the front room door.

I closed my eyes.

It was lunchtime, and I was hiding in one of my usual spots doing my homework. I could not go home today, my mum was going to be at work, so I had to stay for lunch. Out of the corner of my eye, I saw a tall girl with blonde wavy hair, immaculately turned out with just enough make-up to look sophisticated. I looked up, careful not to make eye contact, but she was no threat. I didn’t recognise her, but she was alone, paying no attention to me. I put my homework away and pulled out a magazine; suddenly, it was snatched from my hand.

“MY GUY!” she roared.

“Like, you’re ever going to get a guy, monkey spaz,” she laughed.

“There must be another spastic somewhere who would loooove her fat arse and floppy tits,” another girl chimed in, exaggerating the word ‘love.’ Before I knew it, there was a group of girls from the year above me, I think.

“They can have lots of bent-up spastic babies,” They all roared with laughter.

I sat still, waiting for them to get bored and move on to their next target.

Two boys came around the corner. I vaguely recognised them from my remedial class, and one of them grabbed my magazine and gave it back to me.

“Thank you,” I whispered, putting it back in my bag. I felt my face burning with embarrassment as I did. I looked around for an escape route.

“Clear off and leave her alone,” Nick shouted at the girls. I looked up, unable to hide the shock on my face. Nick was a small boy who always looked a bit scruffy and always hung around with Leo, who had a short, cropped afro and beautiful dark eyes that were always full of smiles. The two were inseparable. I had noticed them, but I had never spoken to them before. No one ever got involved, let alone stuck up for me never.

“Come on,” she said, “Leave him to the ugly ‘spastic’ ‘cripple.’ I can’t stand the smell.” She mimicked gagging, and the group strolled off. Then, all burst into fits of giggles.

“Get lost,” Nick shouted at them and came over to me.

“Are you ok?” Leo asked with genuine concern.

They sat talking to me for the rest of lunchtime. Unfortunately, only ten minutes were left, and I had to get to class. I explained that it took me a while to get to my class as I could not walk fast, so they walked with me. I could see people sniggering as we walked past them, but I didn’t care; I felt safe for the first time ever, and they didn’t seem to care either. I am sure I was taller, hanging off their every word, exaggerating the laughter when they said something funny. I had never felt like this before.

I looked for them the next break but assumed they had gone to play football, so I went to the bathroom. I was perched on the toilet, so the cubicle looked empty, reading a book. I knew they would come looking for me, so I went where they would not find me. This toilet block was hardly ever used, and it was quite isolated.

“Looks like we found a spastic having a poop,” a loud voice echoed around the toilet block. I felt sick and held my breath, but as I looked up, I could see faces looking over the partition. It was them, and one of them was reaching over the top of the cubicle to unlock the door.

“Why are you taking up a bog if you’re not having a piss?” she questioned.

I had blocked the door with my school bag, but it was useless, and I was grabbed, pulled off the toilet, and forced to my knees,

“Let’s have a look for your poop then.” My head was twisted around, and I was forced over the toilet bowl; the smell of ammonia and disinfectant stung my nostrils. The top of my head went cold as it hit the water, and I heard the chain clatter as it was pulled. The water flooded my nostrils. I opened my mouth to breathe, and again, water rushed in. At first, I could hear them laughing until the water in my ears blocked out the noise. I wanted to scream. I tried to scream, but it felt like I was drowning. I struggled, kicking out and grabbing at thin air. I tried to stand but was forced down again, my head going deeper into the water. I thought they were going to break my neck. The water stopped running, and I shook my head, spitting the water from my mouth, coughing, and gasping for breath. “Again!” she shouted excitedly. I heard the glug as the empty cistern refused to dispel more water. I felt the warm liquid run down between my legs, my weak bladder letting me down. “Stand back,” one of them shouted,

“She is pissing all over my shoes,” another shrieked.

I lifted my hand and clawed at an arm; I felt my long nails slicing into her flesh as her scream reverberated around the toilet block. Still, a hand held me firm.

I grabbed at a leg again, digging my nails into her fleshy calf; I had to get out of there before the cistern filled up again. If not, they were going to drown me. Another scream and the grip loosened. I scrambled to my feet, rushing for the hand basin. I turned the tap on full force, pushing my face under the water, trying to remove the germs that were invading my face. I scrubbed and rubbed over and over and over, but I could still feel the germs. The warm sensation as, once again, my bladder let me down, filling my shoes. Still, I scrubbed, clawing at my face to get them off.

Finally, I heard the quiet humming, and I was enveloped in white silk; I was falling, drifting, comforted, calm, and safe as I collapsed into an epileptic seizure. This voice (persona) was like an angel. I say voice, but she never spoke, only hummed soothing and melodiously. My psychiatrist called her a personality fragment, but she wasn’t; she was my guardian angel with beautiful, long, white flowing hair and a dress that seemed to hover all around her. When things overwhelmed me, and I could no longer cope with my emotions, she would swoop down and wrap herself around me until all I could see was white, and all I could hear was her gentle, melodic humming. We had no use for words; she held me tight until I could return. I was so grateful to see, feel, and hear her. Knowing I was safe.

I awoke in sickbay with a teacher sitting beside me. My mum had reassured them that I would be ok to stay at school; it was not my first seizure. Besides, she was at work, and no one would be home. I stayed in sickbay for one lesson, and then I was sent back to class with spare school pants, a uniform from lost property, which was in better condition than my own, although too small and a bag full of wet clothes stuffed at the bottom of my bag. I smelled like I had been rolling around a toilet floor. I always had a massive headache afterwards and just wanted to sleep, so naturally, I kept falling asleep in class.

“Are we keeping you up?” bellowed the geography teacher, much to the class’s amusement.

As I headed for music, the last lesson of the day, I was poked in the back and a note thrust at me. I sat at my desk and opened the note excitedly, wondering if it was from Leo or Nick.

“You are so dead; piss on my shoes, you little shit.” Accompanied by a badly drawn dagger.

I would just have to take the beating, name-calling, or whatever they had in store for me unless I could get out of school early. Unable to leave my last lesson, I walked towards my fate. I was too exhausted to run after my seizure. Resigned to the fact that I would suffer a revenge beating, I meandered towards the school’s exit, and sure enough, they were all gathered there. There were more than usual; word had obviously got around, I suppose. I lowered my head and made my way through them, blocking out the name-calling and the threats.

“Here she is, the spastic savage dog, stand back. She bites and pisses up the wall.” Each burst of laughter tore into me.

“Fatty can’t fit into her uniform,” she grabbed at my shirt, which was at least one size too small, and the straining buttons popped open to reveal my breasts. They did not have a vest or a bra in lost property. I had asked for a P.E. T-shirt but was told it was not the correct uniform. Trembling, I tried to do them back up, an impossible task while walking. I lifted my bag to hide as much as possible and tried to walk faster. Someone handed me a jumper. I looked up, and it was Leo.

“Back off and leave her alone,” he shouted, followed by a few expletives.

“Come on,” he said, we will walk you home.

I put on the jumper, flashing my chest once again as I battled to get it over my head. I thanked them.

“You ought to wear a bra, you know,” he said in a concerned voice. I did know, but I could not tell him mine got covered in urine as I rolled around the toilet floor. I blushed, and the three of us walked up the hill to the park. It was a shortcut to my house. I did not usually take it as there were few people around, so I felt vulnerable to the bullies. But this time, I was safe, and we talked, and they made me laugh, larking around, as we chatted about school. They were like a comedy duo.

The three of us walked along the path that meandered through the trees. It followed the route of the stream, shallow in the summer and deeper in the winter. Sometimes, it flooded and ran down the gutters of my road. I played here all the time, so I knew the park well. It was the final leg of the journey, and I was sad because I didn’t want it to end. I wanted my family to see that I had friends. The boy asked for his jumper back. I fiddled with the buttons on my shirt before raising the jumper over my head. I caught them both looking, making me feel strange; I felt the blood rushing to my cheeks. I returned his jumper and lifted my bag, redoing the buttons.

“Can I kiss you?” Nick asked. I said no but knew I would have to say yes if Leo asked. He was insistent, and although I think I was falling in love with his friend, I was at least hero-worshipping him.

“Please, close your eyes,” he begged, so I did. The next thing I knew, Leo was snatching my bag off me. I was confused, looking around, and as I turned to look back at Nick, who was about to kiss me, I saw them all laughing. They must have been following us.

“Oh my god, she really thought you would kiss her, a bent-back slag like her,” she ridiculed. I could not understand what was happening, and then it dawned on me that I had been set up so elaborately. Tears filled my eyes; I tried to hold them back, but the first tear ran down my cheek as I looked into Leo’s eyes. For one brief moment, I thought I had seen regret in his eyes.

“I know. As if I would want to f…. a spastic who pisses herself,” Nick guffawed as he threw my bag into the ditch below.

“My bag!” I shouted, knowing how full the stream was.

“You f……. C…, look what you did.” She showed me the claw marks on her arms, which were impressive. Then, she grabbed me by my shirt collar, and the buttons popped open again. “You have no idea what you started when you attacked me,” she snarled. “You’re gonna wish you were never born,”

If you are so worried about your bag, go and fetch it, Nick said, pushing me hard. I lost my balance and fell into the ditch, falling 6ft or more.

I was lying at the bottom of the muddy ditch. The contents of my school bag were all around me, and of course, the buttons of my blouse were wide open.

“Your tits are like a cow’s udder,” Nick shouted, and as they walked away, the mooing and laughing sounds grew quieter.

I lay deep in conversation with my protector, a male voice that tries ridiculously hard to warn me about people like this, but I never listen. This voice told me how stupid I was and that I should never trust anyone. He is very discouraging and points out my flaws and the danger I put myself in. He became my protector to ward off ‘the Man’ and soon taught me that no one could ever be trusted, and no one would ever like me. Although I often ignored his advice, it was always at my peril. He protected me from myself, and my first voice protected me from adults. As I became familiar with my voices, I felt I now had all I needed to keep me safe, or so I thought.

Try as I might, I could not get out of the ditch. I picked up as many of my things as possible, wiping them on my skirt and placing them in my bag. Fortunately, my dirty washing bag stayed in my school bag. I feel the icy water running over my broken body while muddy, red-hot tears burn like rivers of fire as they traverse the contours of my cheeks. The air is damp, and the earthy stench mixes with teenage body odour to create an acrid, pungent aroma. It is quiet now; the laughter and cruel taunts have faded, leaving only their scars raw and bleeding deep inside. Comforted by the babbling water trickling towards me, singing as it collides with stones and broken branches, I allow myself time to breathe. But my heart is racing; I cannot breathe; I am trapped in my muddy coffin. Panic overwhelms me, and frantically, I claw at the silky earth like an animal possessed, clinging to a slither of hope. I reach high up the bank, trying to grab the grassy peak, but there is no escape; the slimy earth fills my nails and runs through my fingers like the sands of time, and I slide back down, grabbing frantically at the sides of my muddy coffin, praying the lid of darkness will not swallow me up. The icy fingers of the water stabbed into me like the knives they had plunged into my heart, pulling me back into a river of despair. Crippled Spastic echoes off the trees, “But I thought he liked me,” I whisper to my invisible friends (voices/personas), “Will you never learn” they soothe, and I close my eyes. I am at peace now. I am not alone.

As I lay there, I heard a voice in the distance calling my name, and a wave of panic washed over me. My heart raced with the fear that they had come back to hurt me again. With trembling hands, I forced myself to open my eyes, and there, standing before me, was my older sister. The relief is palpable. I passed her my bag, my fingers brushing against hers as I reached for her hand. She gently pulled me up from the slimy mud, but the weight of my despair felt heavier than ever.

We walked home in silence, the air thick with unspoken words. Each step was a reminder of the pain I carried, a dull ache that seeped into my bones. Even with her by my side, I felt so lost and broken. The world around us seemed so dark, and the comfort of her presence couldn’t fully ease the agony I felt inside. I longed for the days when laughter came easily, but now, all I could do was trudge forward, each step a struggle, each moment a reminder of how heavy my heart had become.

She helped me undress, put all my dirty clothes in the bag with the wet ones from school, fetched my nighty, and hugged me.

“How does this happen to you?” she said. “I can’t just stand by and let them do this to you,” My sister said this was the last straw and organised a school-to-school battle in the park, but that is another story.

“Go into the bathroom and sort your bag out,” she said sadly.

I woke suddenly, hearing my parents arguing downstairs.

“Well, she must have said or done something to make them do it,” my mother’s angry, upset voice floated up the stairs as I drifted off to sleep.

I slept fitfully that night, my body and soul utterly drained. When I finally dragged myself back to school, I was a shell of my former self. With my head bowed low, I shuffled into registration, feeling the weight of a thousand stares. The air seemed to fill with sniggers, each one a dagger to my already shattered spirit. My imaginary friends whispered that we didn't need anyone else, but even their voices seemed hollow now.

In English class, the cruel twist of fate continued. As I stood to read aloud, my teacher's eyes fell upon my mud-stained book. Her words cut deep, "Is that mud on your book? Well, I never." The smirk on her face was unbearable. "It's not like you to have dirty books," she laughed, and the class joined in, their laughter a loud chorus of my isolation.

I wanted to disappear, to sink into the floor and never resurface. The hope I once held for genuine friendship now felt like a foolish dream, a cruel joke played by the universe. Yet, some small, pitiful part of me still clung to that hope, desperate and gullible. I couldn't afford to miss the opportunity for a real friend, even if it meant enduring this endless torment. But with each passing day, that tiny flame of hope flickered weaker, threatening to extinguish completely, leaving me in total darkness.

Life Story 4 - Dig Your Boots - 1978

Her parents lay motionless, imprisoned by her tears, every sob and gasp for breath slicing into their hearts. She always saved her tears for the safety of her bed, and her dad would stand outside the door listening to her prayers each night. There was no god for him, but if it was what she needed, who was he to take it from her?

The sight of her covered in mud, shaking with cold, trying to clean her schoolbooks filled him with rage and deep, agonising pain. He was powerless. He could not go to school and scream at the kids that did this to her. She had to find a way through it. His throat constricted as he knelt beside her to clean the books. She looked at him with those deep brown eyes. ‘Why don’t they like me?’ she had asked, and he just wanted to hug her, wrap his arms around her and never let her go.

Nevertheless, he knew he had to be strong to make her strong. At times like this, he utterly understood what her doctors meant. ‘Letting her die is the best thing you can do for her,’ they had reassured him. He was weak. He could not let her go. The moment he looked into her eyes, it was like she was pleading with him to live. He held her tight until they got her a bottle and sat with her all night until they agreed to operate. Now, here he was, lying in bed listening to her pain, knowing there was more to come; her life would always be a battle.

Finally, she gave in, her sobs slowed, and she was asleep. “I can’t stand it anymore,” his wife said. “They keep telling us she is life-limited, so when is she going to bloody die? It has got to be better than this,” she sobbed. Then he lay there listening to his wife’s silent sobs. Neither of them was aware that I had heard them. They had been waiting for her to die from day one. She had a 20% chance of surviving each operation and a 30% survival chance after the operation, and each time she battled through. The fact that she made it to senior school was a miracle. Over the years, he watched his wife and daughter at each other’s throats, but he knew his wife was frightened to get too attached. She was preparing herself to lose her daughter the only way she knew how.

This morning, she looked in the mirror at her short, twisted frame and knew now that she would never get better. She was a spastic and just had to get on with it. Why didn't she wash the uniform last night? She just could not be bothered; if it were my brother or sister's uniform, she would have washed it. Looking back at the mirror, she remembered how she had loved this dress when it had fitted her. It was bright blue with apple-shaped buttons down to the waist. But now It was too short, partly because it was too small and because of how her bum stuck out due to the curvature of the spine (spondylolisthesis). She had brushed the mud off her jumper the best she could. She took one more look in the mirror and knew today would be a dreadful day. She left without saying goodbye to her mum. Why bother? She thought she hated her.

Slowly, she headed to school. She wanted to be late, but she just could not. She hated breaking the rules. Finally, she reached her school. It was a single-story school with the main hall in the middle and four corridors spreading out to the sides like a spider. The morning was just as she had expected. The teachers were angry because she was not in her uniform, and her classmates laughed because she looked ridiculous. As her history teacher collected her homework, 'Oh dear, is this mud on your book? That is not like you. Is everything ok?" she enquired. The class erupted, banging on the table and fake hysterical laughing. "Calm down," she chided. "It is not that funny." "Give us a kiss," someone shouted, and a burst of more genuine laughter erupted.

She collected the key from the coal hole, let herself in, and sat at the kitchen table. It was a large kitchen, well large for a council house, needing decorating. The coal fire had burnt down, but the embers still glowed red. She was not going back to school in this dress, she thought and ran upstairs. She looked at her sister's new grey skirt and a white blouse, purchased for an interview at nursing college. She would just try it on, she thought. It wouldn't do any harm. Of course, It was too long, dragging on the floor, and the blouse was far too big. She rolled over the top of the skirt and rolled up the cuffs, and with her jumper on, no one would ever know. She pulled out her brown leather cowboy boots; they were the pièce de resistance, and she looked amazing. She would get in so much trouble for wearing the boots. Her mum said her boots were dangerous because they were too big; she was a children's size twelve on one foot and an adult size one on the other. Her boots were from a jumble sale size 6 ½, adult, but no one would tell if she padded them out with her socks, she thought. Taking a last look, she confidently left her house, excited to see their faces when she returned to school.

She was called to the office at work and tentatively knocked on the door. She was never called to the office. Oh God, she thought, what if they are laying people off? How will they manage? As she entered, she saw her husband looking out the window. He turned, “She’s in hospital,” he said. “It sounded bad,” he whispered. “The police are meeting us there.” Silently, they travelled to the hospital, her mum repeating, “Don’t let her die, don’t let her die.” She was prepared for this day, only she wasn’t, not like this. She could not die alone, she thought as they marched across the car park. As soon as they were in the hospital, they ran, her heels clicking on the floor just as they had when she marched her daughter down the corridor on the first day of school. Tentatively, they approached the desk and gave the woman their daughter’s name. The receptionist looked at them sympathetically. “Oh god!” she screamed, “No,” and fell to her knees, “No, she can’t be, she can’t, she is strong,” she whimpered. Bereft and inconsolably, she cried. He held her tightly, “I love her,” she said, “I need to tell her.” He looked at the receptionist. “Where is she?” he questioned. “Sorry, you cannot go through; she is with the doctor now.” Her mother sprang to her feet. “Where is she?” she screamed,” Take me to her now.”

I walked into the classroom and handed the teacher my note. “Well,” she said, looking me up and down, “let us hope your mum manages to fix the washing machine soon.” The class erupted, she calmed them down, and the day’s torture began. My classmates were very inventive when it came to name-calling. Often, I had no idea what they meant, so I let the insults wash over me. Occasionally, they would be sexual, and these I found embarrassing and painful. I think the worst kind were the ones that referred to my body. I found these humiliating, and I felt so ashamed of myself. The thing with the name-calling and derogatory comments about my body was that they confirmed how I felt about myself. I hated my body with a passion, almost as much as they did, and would even call it names myself.

I had almost gotten used to the name-calling to the point where nothing surprised me. The hitting, poking, and tripping over did not bother me much. Violence had become part of my life. It had all become part of my life. The parts that did hurt were when a person, male or female, would be nice to me to get something or until other people were around. Last month, one boy stood in the corridor talking to me about our maths homework, my favourite subject; we laughed about dodging the board rubber if we got our tables wrong. That was until a group of his mates entered the bottom of the corridor and shouted, “Someone got themselves a spazzy girlfriend, have they?” and “Look who’s dating the spastic with a fusty fanny.” They started to make gorilla noises, hopping from one foot to the other. I felt the pain in my cheek before I saw the pen in his hand. I raised my hand to my face and felt the groove where the pen had pierced the skin and the warmth of the blood that oozed out. “Nah, not me” he shouted. “I like my monkeys in the Jungle; they smell better than this slag.” He ran down the corridor swinging his arms and exaggeratedly wabbling from side to side. I noticed he had my maths book, “I got it!” he yelled, “We have just got our maths homework sorted.” This kind of behaviour became my ‘normal’ and my daily battle as my gullibility let me down repeatedly.

In our maths lesson that afternoon, they all handed in their homework, but I could not hand mine in as they had not returned my book. Failing to hand it in was more traumatic than the stabbing. I never missed homework, especially maths. The thought of it made me feel sick and terrified. As we were leaving the class, the boy who stabbed me hung back. He bent down and took my maths book out of his bag, “Miss, I found this on the floor,” he said, handing my homework over. “Thank you,” I said as he walked away.

By lunchtime, I had had enough of the dress-related humiliation. I knew my mum was not home and knew where the key was hidden, so I went home. I lay on my bed, convincing myself I wasn’t going back to school until I saw it. I tried my sister’s skirt and blouse on, rolling over the waistband and rolling up the sleeves, all covered up by my jumper. The hem was uneven but better than the dress. As I left the bedroom, my cowboy boots caught my eye. I had wanted these boots forever, but we could not afford any. I had spotted these at a jumble sale. “Don’t be ridiculous,” my mum said, “You are a size 1, and these are a size 7”, I pleaded with her, and she let me try them on. I remember that feeling; these boots were like Cinderella’s glass slippers. I was in love with them. I felt amazing every time I put them on. Finally, she gave in and said I could have them but would have to wait until I grew into them a little before wearing them. I put the boots on, and they looked fantastic. Strutting around my bedroom with my head held high, I wondered if I was brave enough to wear them to school. I decided that showing everyone how good I could look would be worth the trouble I would face when I got home. The teacher had a note, so I was not breaking any rules.

I walked down the lane at the side of my house. I didn't usually go this way, but I wanted to ensure my boots did not get muddy. It was a long way round, but I had plenty of time. As I reached the end of the lane, I saw a group of girls from my sister's school. I didn't know them, but I recognised the school uniform. I strutted confidently down the lane, my heels tapping on the path.

"Dig ya clown boots," one of them shouted.

"Thank you," I said, "but they are real leather cowboy boots; they aren't clown boots." I smiled at her; no one ever complimented me, and it felt good and confirmed how good I looked. I could not wait to get to school and show them off. I was positively floating as I passed them.

I am not sure what happened next, but I was on the floor and being kicked. I curled into my usual ball shape, the safest position when attacked.

"Don't you take the piss out of me bitch," someone screamed.

I opened my eyes and saw the girl who had been admiring my boots. I closed them as I saw her foot heading toward my face. I was confused. I thought they might be trying to steal my boots. I should never have told them they were genuine leather.

"Who the F….. do you think you are, spastic girl."

Again, I was puzzled, wondering how they knew I was a spastic. I had never seen them before. The beating seemed to go on for a long time, much longer and more violent than usual, and if the old gentleman with his dog had not shouted from down the lane, I think they might have killed me. I scrambled to my feet, picking up the things that had fallen out of my bag. I was frantically looking for my boots, convinced they had stolen them. Luckily, I spotted them in the bushes and slipped them back on, only they had lost their magic; I didn't feel special anymore. I tried to run but felt dizzy and could only walk as fast as I could. I had left plenty of time, but now it looked like I would be late. I heard the Man calling me, but I did not have time to thank him; I had to get to school. It took an eternity, but eventually, I entered the school gates and was only five minutes late. By the time I made it over to the sports hall. I would be ten minutes late, and everyone would be ready for P.E. I would have to get changed in front of them as if this day could get any worse. I was exhausted and could see them staring at me as I walked through the crowds. Unfortunately, I did not have time to appreciate them admiring my outfit. I had to get to class.

Everyone was in the gym hall so I could change in peace. As I went to pull off my boot, I noticed it had dog mess smeared up the side of it. I put my gym kit on and set about cleaning my Cowboy boots. I wiped them clean and ran into the sports hall. All eyes were on me, and everything started to spin. I threw up, and it all went black, not the white humming I was used to when I had a seizure.

The receptionist reminded them they were in an intensive care unit and asked them to remain calm and that she would see if the doctor was available. As she slipped away, she heard the child's mother sobbing and pleading for her daughter's life. The doctor arrived and ushered them into a small room. "Do you know what happened?" he asked. They both shook their head. The doctor told her parents that she was in a coma. They surmised that she had been attacked on her way back to school. It was an extremely violent attack and triggered multiple seizures, and they had to sedate their daughter to stop them. It was a miracle that she made her way to school, although they were unaware of where the attack happened. She was severely bruised but had no broken bones. It appears the most damage was to the head and face. They sat outside the intensive care unit, holding on to each other, not knowing if she would ever regain consciousness. "I never thought she would die like this," said her mother. They were told they could go in and see her, but to be prepared as it was a shocking sight. Her father warned his wife that they had to be strong and that she would be fine. Looking down at a face he barely recognised, he could make out a shoe-shaped bruise where they had stamped on her face. He gripped his wife's hand, and they sat by her bedside. They watched her seizures and saw her tear out her drips as she thrashed about the bed. For three days, her mother had spoken to her, telling her how strong she was and how she had fought to live, and she had to fight now. No one knew what the damage would be until she woke up. They had been warned of brain injury, amnesia, or a stroke and told she might not even wake up. "All the time I wasted waiting for her to die," she whispered to her husband. On the third day, she woke up hungry, with no signs of long-term damage. "About time," her dad said, "We have better things to do than sit around here" he smiled at her.

My world was crumbling, piece by piece. The Obsessive-Compulsive Disorder that had always lingered in the shadows now consumed my every waking moment. My parents, their faces etched with worry, were told it was likely due to my head trauma. But deep down, I knew this darkness had always been a part of me, waiting to engulf me entirely. Once, home was my sanctuary, a place where I could breathe freely. Now, even those walls couldn't keep the monsters at bay. They had invaded my safe haven, leaving me nowhere to hide, nowhere to feel secure.

The attack near my house shattered what little peace I had left. My parents and the police, their eyes filled with a mix of pity and helplessness, believed I couldn't remember. At first, that was true. The pain in my head was a fog, obscuring the horror of that day. But then, like a cruel twist of fate, the memories came flooding back. I can see their faces now, contorted with rage, as they kicked me. Their eyes, devoid of mercy, haunt my dreams. Each blow they landed echoes in my mind, a constant reminder of my vulnerability.

I want to tell someone to share this burden that's crushing me. But the words catch in my throat, choking me with fear. So, I suffer in silence, a child lost in a world that seems determined to break me. Each day, I put on a brave face for my parents, but inside, I'm screaming, begging for someone to hear me, to save me from this nightmare that has become my reality. As I lie in bed each night, tears silently soaking my pillow, I wonder if I'll ever feel safe again, if I'll ever be the child I once was. The innocence I've lost feels like a gaping wound that refuses to heal, leaving me broken and alone in a world that suddenly seems too big and too cruel for a child like me.

The following summer passed, marking the last instance of sexual abuse. The man was arrested, claiming we were lying, but the photos had sealed his fate. The abuse remained a family secret, and although I now recognise that it was wrong, at the time, he made me feel special, and that feeling is something I missed. The same silence surrounded my voices; no one would know about them until much later.

The bullying was not as bad when I returned to school; there was still some name-calling and shoving, but I was never physically attacked. My Dad had said that school could not keep me safe and that if I wanted to, I could leave. It was my decision. However, he pointed out that I would leave without qualifications, and the bullies would have won. Together, we formed a plan, and I would return to school, stop expecting anyone to like me, not talk to anyone and definitely not trust anyone. I had to keep my head down and study. My sister was allowed to leave school early to collect me every day, or my mum or Dad would pick me up. I had break times in a room near the staff room. My sister gave me a wooden pencil case with two layers so I could organise them in the box, so when I opened it, everything was in its place, and no one would see. I loved it. At the time, I did not understand how this would stop people from hurting me, but I stuck to the rules.

As I look back on that day, my heart aches with profound sadness. The confusion still lingers, a heavy cloud over my memories. Why did they attack me over a pair of boots they didn't even take? The realisation now dawns on me, bringing with it a wave of sorrow. I must have been such a pitiful sight, drowning in clothes too big for my small frame, those oversized boots clomping along as I naively thought I was the bee's knees. The image of myself, so oblivious and vulnerable, brings tears to my eyes. I was as ridiculous as I had been during that three-legged race in junior school, completely unaware of how I appeared to others. The weight of my social ineptitude crushes me. I had no social skills, no basic survival instincts - just a child stumbling through a world I didn't understand. How lonely and lost I must have been, unable to navigate the simplest interactions or protect myself from harm. This realisation fills me with an overwhelming sadness, not just for the pain I endured but for the childhood I lost. I grieve for that innocent, clueless child who had no idea how ill-equipped they were for the world. The memory of my past self, so vulnerable and unprepared, brings a lump to my throat and a heaviness to my heart that feels almost unbearable.

Life Story 5 - Finally, I snapped- 1980.

The “Man” who raped and abused me for a decade was now in prison, so that part of my life was over. After the police had questioned us, no one ever mentioned it again, and it remained our family secret. He had chosen two of us at an early age, but the other child wanted it to stop, so she stole some of the pictures and showed them to her teacher. We talked about ending it, but I did not want to. I liked being special and loved. “Please, I can’t take it anymore. It hurts too badly,” she had begged. I had told her not to, as the repercussions would be even more unbearable. I was so angry with her, but my anger soon turned to guilt, shame, and self-loathing. I felt like my parents were disgusted with me. I even felt that my mum blamed me more than the Man. I heard my parents arguing about it, debating which one should have noticed it. “She bloody attracts trouble,” my mum shouted. I heard the door slam and watched my dad drive off in the car. I was alone now, and I was scared. I still had my ‘voices,’ God, and my dog to talk to, but that was different from being important to someone, that human touch. I had let my parents down, and my dad could not hug me anymore. Even God was disappointed that I had given in to temptation, so I prayed harder for my family’s safety and the strength to live a good life.

I sat on my doorstep, listening to the party next door. The whole street was invited. My sisters and my parents had donned their party outfits. I had said I was not going, and no one tried to persuade me otherwise. My siblings were oblivious to the trauma that I had gone through. To them, I was a sulky teenager with a chip on my shoulder. I sat staring at the stars and the black sky; there was hardly any light pollution back then. The party erupted into raucous laughter, and I wondered what they were laughing at and if my father was laughing. I knew he would be, as he would have had a few drinks by then. I wasn’t sure I would ever laugh again. I saw Sally, who lived next door, chasing Pete, her on-and-off boyfriend, down the path and then the lane. She was screaming at him to come back to the party, which turned into pleading; this was nothing new. It was a volatile relationship. I heard the slapping sound. It floated angrily down the quiet street. Sally ran back into her house crying. The door slammed, and the party was momentarily quietened. Then, the light came on in her bedroom, and the noise of the party resumed. She was beautiful but such a drama queen, but I could not believe she would hit him.

“Are you ok? Why are you sitting here and not at the party?.” That was how it all began. That night, we walked and talked. I shared my deepest secrets with him, and he listened. He held me tight when I cried, and for the first time, I felt safe. I was in love. I knew it was one-sided, but I did not care. For months, we were friends, part of the group that hung around. He got back with Sally, and they were set to become engaged. We met up in secret and talked as friends. Then he told me it was over with him and Sally, and he wanted to be with me. Over the moon does not describe how I felt. He said we had to keep our relationship a secret so that Sally would not be horrible to me. I didn't care that it was a secret; I was good at keeping them.

Now, I had an incredibly handsome boyfriend who was part of the home crowd. We had grown up together, and his brothers hung out with my sisters. I never thought he would be interested in me. I was obsessively in love with him, and he was my life. I wanted to be with him every minute of the day. We would meet secretly, sit in a secluded area of the estate, and talk for hours. He would kiss me tenderly, and I realised I had never loved the Man; this was true love.

As with all fairy tales, there is always a bad guy; for me, this was Jane. She was dating Matt, Pete's best friend. She was in my year and one of those who enjoyed torturing me with her words. She was never physical, just verbal, but it wasn't unbearable. Their relationship encroached on my home life for the first time. She became part of our group, and we all hung around together. These were the people I had grown up with, and I never had to impress them. They knew who I was and accepted it. My life was more perfect than ever; I was finally happy.

Pete still did not want anyone to know we were dating, so I was not allowed to tell anyone. I didn't mind though. It made it even more romantic. I knew he was mine, which made me happy. There were rumours, but if anyone asked, he would always deny it, as would I, and we would always say we were just friends. Jane was constantly snooping and trying to find out about us. However, I was used to keeping secrets and was incredibly good at hiding things.

The only lesson in school she shared with me was needlework. Jane was in the lower band for all academic classes. I was in the A Band at the top; there was the B Band and then her group. I started school in this group. Needlework was my favourite lesson. I loved sewing and creating. My great-grandmother and I used to spend hours together. I used to keep her company in the evenings and at weekends, and she taught me to knit and crochet. My aunt taught me how to sew, and I would make the clothes for my Pippa dolls. I was making a christening robe.

As we all waited outside the sewing room for the teacher, Jane talked loudly to her friend and said she was looking forward to the four of them going out on Saturday. She was glad that her friend was dating Pete at last. I felt sick to my stomach. I had only seen him that night, and he never said anything. He did say he was going out with Matt on Saturday but not with anyone else. I was seeing him tonight, and I would ask him the truth then. I could not get it out of my mind, mostly because she would not let me. “Do you think you will kiss him?” she said loudly. They talked incessantly about the weekend. Each comment drove a knife into my heart.

My hands trembled as I cut out the last pattern piece, the scissors feeling unnaturally heavy. The world around me seemed to blur, sounds becoming muffled and distant. I caught fragments of conversation from behind me, near the ironing board, but the words didn’t make sense. “I do have some competition to fend off,” the girl supposedly going on a date with my boyfriend said. “Nope, that is all in her head. As if someone as gorgeous as him would go out with a bent back spastic,” she snarled. Suddenly, the room spun. I blinked, disoriented, finding myself on the floor. How did I get here? Panic rose in my chest as I realised I was holding something cold and metallic. Scissors? My vision cleared, revealing a pair of terrified eyes staring up at me. It was the girl who had been talking earlier, now pinned beneath me, her face pale with fear.

“S-say that again,” I heard myself repeating, my voice sounding foreign to my own ears. What was I saying? What had happened? My heart raced as I struggled to piece together the missing moments. Had I blacked out again? Fear gripped me as I became aware of the scissor blade hovering dangerously close to the girl’s throat. I didn’t understand how we’d gotten into this position or why I was acting this way. Confusion and terror battled within me as I tried to make sense of the situation, desperately searching my fragmented memory for answers that weren’t there. The girl’s rapid breathing and wide-eyed stare mirrored my own internal panic. What had I done? What was I capable of doing? The uncertainty of my own actions terrified me more than anything else.

The teacher's voice sounded distant as if coming from underwater. I could see her lips moving, her eyes filled with concern, but her words didn't register. My body felt frozen, my hand still gripping the scissors tightly. Inside my mind, chaos reigned.

"We must protect her," He thundered, His presence overwhelming. "They can't be allowed to hurt her again."

"But this isn't the way," I pleaded, my own voice feeling small against His strength. "We'll only make things worse. "The others chimed in, their voices a cacophony of worry and reason. "The consequences, think of the consequences!"

"He's too strong," another whispered. "We can't control Him. "I tried to focus on the teacher's face, to ground myself in reality, but He kept pulling me back into the storm of our shared consciousness. "Give her back control," someone begged. "This is only temporary. We need a better solution. "He roared in frustration, His anger palpable. "I won't let them hurt her again!" The debate raged on, each voice fighting to be heard, to influence our collective actions. But we were at an impasse, locked in a mental tug-of-war that left our physical body paralysed.

Time seemed to stretch endlessly. How long had we been here? Seconds? Minutes? Hours? The outside world blurred as we grappled internally, searching for a resolution that eluded us. “We can't solve this alone," a quiet voice finally admitted. "We need help. “The acknowledgement of our limitations seemed to break the stalemate. Slowly, painfully, I felt control returning to me. The cacophony in my head quieted, though I could still feel His presence, reluctant and wary. With tremendous effort, I managed to loosen my grip on the scissors, slowly closing the blades. The teacher's voice began to filter through, becoming clearer as I retreated from the battlefield of my mind. The struggle had left me exhausted, but I was back for now.

I stood up abruptly, my movements stiff and deliberate. Without a word, I returned to my cutting table, pointedly ignoring the concerned glances from my classmates. As I folded the pattern pieces and shoved them into my bag, I could feel the anger simmering just beneath the surface. The walk to the headteacher's office was tense, the teacher's attempts at conversation met with stony silence. How dare they assume I needed help? It wasn't anger issues - it was justice.

The note they handed me for my parents felt like a brand of shame. Educational psychologist? For "anger issues"? The unfairness of it all made my blood boil. They hadn't heard what that girl said. They didn't understand. As I left the school grounds, a mix of relief and resentment washed over me. At least I could question Pete about Saturday now. His explanation, when it came, only stoked the flames of my frustration.

"It's good for me to date Helen," he said as if it were the most reasonable thing in the world. "It'll stop people from getting suspicious about us.

"I wanted to scream. How could Pete not see how this hurt me? But the fear of losing him kept my mouth shut, my objections trapped behind gritted teeth. “Of course," I muttered, the words tasting bitter on my tongue. "I understand."

But I didn't. I couldn't. The image of Helen - tall, beautiful Helen with her perfect gait and dainty steps - burned in my mind. She didn't waddle with a limp like I did. She didn't have to fight for respect or defend herself against cruel words. The injustice of it all threatened to overwhelm me. Why did I have to hide? Why was I the one who had to understand and accept? The anger rose within me, a tidal wave of emotion that I struggled to contain. But I did contain it because the alternative, losing Pete, was unthinkable. So, I swallowed my pride, my anger, my hurt. But the resentment remained, a smouldering ember waiting to ignite.

As I allowed this charade to continue, I felt a deep, gnawing shame take root within me. I pitied myself for being so desperate, so willing to accept any scrap of affection thrown my way. The humiliation I endured seemed a small price to pay for the illusion of love. My heart ached with a mixture of self-loathing and desperation as I clung to Pete, terrified of losing the one person who seemed to want me. I was painfully aware of how pathetic I must have appeared to others, but I couldn't bring myself to care. I was his secret girlfriend, and that title, no matter how demeaning, felt like a lifeline.

When we finally emerged from secrecy, I should have felt relief. Instead, I felt only a crushing weight of shame as I realised how completely Pete controlled me. There was no magical transformation, no fairy-tale ending. I had become a shadow of myself, isolated from my family, with Pete as my entire world. The realisation that the slap I'd heard years ago was his, not hers, came far too late. By then, I was trapped in a web of my own making, too weak and ashamed to break free. When he left visible marks on me after an angry outburst, I felt a sickening mixture of fear and self-disgust. How had I let things come to this?

My family's intervention, while necessary, only added to my shame. I had allowed myself to become a victim, and now others had to fight my battles for me. The irony of my school outburst wasn't lost on me. Two hours a week with the school psychologist seemed a paltry response to the years of torment I'd endured. Yet, I couldn't help but feel a twinge of guilt. What I'd done was wrong, undoubtedly. But as I sat in those sessions, I couldn't shake the bitter knowledge that my tormentors had never faced consequences for their actions. I felt a deep, aching pity for myself, so desperate for acceptance, so willing to endure cruelty. The shame of my choices, my weakness, and my inability to stand up for myself weighed heavily upon me. I had become both victim and perpetrator, trapped in a cycle of pain and regret that seemed impossible to break.

It's not fair. None of it is fair. They push me, mock me, and call me names every single day. They make my life hell, and nobody does anything. But the one time I fought back, suddenly, I was the problem. Now I'm stuck in this stupid therapy like I'm the one who needs fixing. The psychologist keeps asking how I feel and what makes me angry. How can he not see? Everything makes me angry! The way they laugh when I limp down the corridors. The whispers and stares. The teachers who pretend not to notice. And now this, being forced to talk about my feelings like I'm the one who's wrong.

Mum and Dad told me not to say anything about our family. They're scared, I know. But it feels like another secret I have to keep, another way I'm different, another thing to be ashamed of. The psychologist says my classmates aren't my enemies. What a joke. Has he ever been in my shoes? Has he felt what it's like to be treated like a freak every single day? And then he has the nerve to say I'm my own worst enemy, as if I chose this. As if I want to be this way.

Write poetry? Seriously? Like putting my pain into pretty words will make it all better. And he wants me to accept my disability, to learn to like myself. How am I supposed to do that when everyone around me makes it clear how unacceptable I am?

He says I have a beautiful face when I smile. Liar. He's never even seen me smile. Nobody has, not for a long time. There's nothing to smile about. “Your teachers tell me you never smile; why do you think this is?.” I just sat and looked at him, making uncomfortable eye contact. And now my teachers are telling on me for not smiling? Great, that's another thing I'm failing at.

So, I just sit here, staring at him. Let him be uncomfortable for once. Let him feel a fraction of what I feel every day. They want to punish me for standing up for myself. Fine. But I won't make it easy for them. They can't force me to talk, to smile, to pretend everything's okay when it's not.

It's not therapy. It's just another way to tell me I'm wrong, I'm broken, I need to change. But what about them? What about the bullies? Where's their punishment? Where's their therapy? It's not fair. None of it is fair.

My heart raced every time I approached the psychologist's office, clutching the poems I'd selected with trembling hands. The rules demanded I bring them, and the thought of breaking the rules terrified me. What if I didn't comply? What would happen then?

As he spoke about the poems, interpreting my supposed feelings, a cold dread settled in my stomach. How could he know what was inside my head? What if he saw through our facade? The fear of being exposed, of our secret being discovered, was paralysing. His growing frustration with my silence only heightened my anxiety. I could sense his anger bubbling beneath the surface, and it reminded me of the bullies at school. What if he lashed out? What if he forced me to speak? His words about me not being liked at school cut deep, reopening old wounds. But the fear of revealing too much kept my lips sealed. We couldn't risk it. He was a threat, a potential destroyer of the fragile world we'd built inside our mind.

The silence was our shield, our only defence against the probing questions and piercing gazes. It was suffocating at times, the weight of unspoken words pressing down on my chest. But the alternative - exposure, vulnerability - was far more terrifying. As the months wore on, the fear became a constant companion. Would this be the day he broke through our defences? Would this be the session where one of us slipped up?

The arrival of our new imaginary friend brought a mix of relief and apprehension. Their advice to maintain our silence strategy was welcome, but it also confirmed our deepest fears that we couldn't trust anyone in the outside world. I wish we had found this strategy sooner, sparing us years of anxiety and torment. But even as it provided a sense of safety, a new fear took root: would this silence, this isolation, be our life forever? The thought was both comforting and terrifying, a prison of our own making that kept us safe but alone.

The only good thing to come out of these sessions was my ability to keep quiet and master my silence. Everything I did had an impact on someone else. Therefore, if I did and said nothing, my impact was minimal. Which in turn meant I got left alone to study for my exams.

As I reflect on those early therapy sessions, I can see now how challenging they were for both me and the psychologist. My silence, born from fear and a deeply ingrained need to protect our family secret, must have been frustrating for him. Yet, his persistence was a testament to his commitment to help. His suggestion that my peers weren't my enemies was difficult to accept at the time. The idea that I might be my own worst enemy seemed almost offensive then, but now I understand he was trying to shift my perspective to help me see my role in my own happiness. Looking back, I realise that therapy is a process. My initial resistance was a natural response to years of trauma and mistrust. The psychologist was trying to create a safe space for me to explore my emotions and experiences. While I wasn't ready then, these sessions were the first steps on a long journey of healing and self-discovery.

Chapter 5: Reflexive analysis

Analysis Has a Place in Evocative Autoethnographic Research

In this chapter, I discuss my decision to analyse my autoethnography. I have used evocative autoethnography, combining personal narrative, cultural critique, and emotional expression. This approach allows me to use my individual experiences as a lens to examine and understand broader social and cultural phenomena (Denzin, 2006). The unique power of evocative autoethnography enables me to deeply engage readers on both emotional and intellectual levels (Bochner & Ellis, 2022).

As a custodian of my history, I undertake an acutely personal and reflective journey of self-discovery and growth, aiming to understand my childhood and share that understanding with others. This self-reflection serves as a means of making sense of the past and a tool for envisioning and working towards a more positive future (Schmidt, 2014; Yue et al., 2021). It is important to note that I do not claim my stories are ‘a clear route into 'the truth', either about the reported events or of the teller's private experience’ (Atkinson & Delamont, 2006, p. 166), a point often made to devalue autoethnography, Instead, as an autoethnographer, I search more for possibilities than absolute truth.

The Role of Analysis in Evocative Autoethnography

While evocative autoethnography primarily relies on storytelling to transmit complex ideas and emotions without explicitly defining them (Gaupp & Pelillo-Hestermeyer, 2021). (Ellis & Bochner, 2006, p. 438), I argue that analysis has a place in this method, mainly when dealing with complex topics like disability. Disability is a multifaceted issue involving social, political, medical, and cultural aspects (Campbell, 2009; Devlieger, 2005; Garland-Thomson, 2012a; Grue, 2016). Analysis helps unpack these complexities, offering a more profound understanding beyond surface-level observations or common assumptions. Engaging in disability studies enables the questioning of several common assumptions that often oversimplify or misrepresent the experiences of disabled adults and children. The most impactful assumptions from my childhood are bound to the medical model of disability, which sees disability as a medical issue to be resolved, overlooking cultural and social factors. As I grew up in an ableist world, I was made to feel that providing accessibility was a favour rather than my fundamental right. There are many assumptions made about disabled children, but for me, the most impactful was the misconception that my disability equates to inability, ignoring my potential or capabilities.

By analysing my autoethnography, I place my life into a cultural context, making visible the external systemic violence that shaped my educational experiences (Kabel & Phillipson, 2021). This analysis promotes greater compassion, understanding, and respect for the embodied experiences of disabled children through storytelling (Hokkanen, 2017). While my stories may not be generalisable, they are relatable. They may connect with other disabled children and adults and those who have been bullied whether they identify or are labelled as disabled or not.

The Importance of Analysis in Disability Research

The lived experiences of disabled children are often not adequately represented or considered when creating policies (Polczyk, 2012). This inadequacy leads to a disconnect between the actual needs of disabled children and the support systems in place (Tarvainen, 2019). Policies tend to focus primarily on medical or educational aspects of disability, neglecting the cultural and social factors that significantly impact a disabled child's life (Feldman, 2003; Valentine, 2021). The analysis of evocative autoethnography involves examining personal stories and experiences in relation to broader cultural contexts. This method allows researchers to explore the intersection between the personal and the social (Ellis, 2011).

Addressing Underreported Issues and Challenging Deficit Discourses

The violence and social isolation I endured as a disabled child is a critical issue that deserves more attention and discussion. Such violence is often underreported due to communication barriers, fear, or lack of accessible reporting mechanisms, affecting societies worldwide (Burch, 2024; Wiseman & Watson, 2021). The underreporting of disablist violence can lead to an underestimation of the problem's severity and distorted statistical data (UNESCO, 2018). By analysing my evocative autoethnography, I aim to ‘create new connections and meanings that claim disability as an integral part of human variation’ (Connor, 2014, p. 124). Thus, I will be encouraging the reader to rethink and question their interpretations of disability and difference

(Connor, 2014). This analysis serves as a call to action, urging policymakers, researchers, and society at large to pay more attention to the complex realities of disabled children's lives.

In conclusion, while evocative autoethnography embraces the idea that stories and firsthand experiences can be interpreted in multiple ways by different readers (Farhan, 2019), the addition of analysis provides a deeper understanding of the complex issues surrounding disability. My analysis does not aim to provide definitive answers; instead, it makes possibilities visible and stimulates alternative thinking (Choi, 2013). By combining the emotional power of storytelling with rigorous analysis, I can create a more comprehensive and nuanced understanding of the experiences of disabled children, ultimately contributing to more inclusive and compassionate policies and practices.

Data Overview

This section provides an overview of the data to be analysed, which consists of a collection of personal stories based on my lived experience as a child with Spina Bifida who was bullied at the onset of the inclusive education system. These narratives offer a harrowing and deeply personal account of a violent childhood, making visible extreme bullying, violence, sexual abuse, social isolation, dehumanisation, and trauma. A detailed description of how and why each story was selected is provided in the methodology section, ensuring transparency and rigour in the data collection process.

The purpose of sharing these stories is not to elicit pity or drama (Delamont, 2007) nor to create a 'woe is me' piece of research (Silk et al., 2017; Soyini Madison, 2006) that relegates autoethnography to the status of an academic underdog (Gamboa, 2023). Instead, the intention is to expose how society's ableist mindset enabled the systematic stripping of my human dignity and rights across institutions meant to nurture me.

The analysis chapter aims to connect themes from these personal stories to existing literature, offering poignant insights into the world of a disabled child, my world. This approach provides an adult-centric reflexive account of a disabled child navigating the complex intersections of disability, medicine, education, family, and society. By revisiting both literature and personal narratives, the analysis shifts focus from the minutiae of individual stories to the broader social structures that facilitate and fail to challenge oppression and various forms of violence towards disabled children (Pearce, 2020).

Ultimately, this research seeks to make visible the external influences that enable the bullying of disabled children in school settings. By structuring the data in this manner, I aim to contribute meaningfully to the discourse on inclusive education and the experiences of disabled children while maintaining the integrity and power of personal narrative within an academic context.

Analysis

This chapter examines the intricate process of analysing my lived experiences, with a particular focus on challenging ableist rhetoric and its impact on disabled children. The analysis presented here is not simply an academic endeavour. It is a deeply personal journey that intertwines my own experiences as a disabled child with rigorous qualitative research methods. My analysis seeks to unravel the complex tapestry of ableism, examining how it manifests, perpetuates, and can be challenged in various societal contexts. By approaching ableism as a rhetorical problem, as (Cherney, 2011) suggested, I open new avenues for understanding and confronting deeply ingrained discriminatory attitudes and practices.

Through a reflexive thematic analysis, I aim to shed light on the often-overlooked experiences of disabled children and advocate for transformative change. As I progress through this chapter, readers will be invited to engage with not only the findings of the analysis but also the process itself. This methodological transparency validates the research approach and encourages readers to reflect on their assumptions about disability.

Data Analysis Process

I approached my analysis intending to challenge ableist rhetoric, the persuasive language, arguments, and discourse that perpetuate discrimination against disabled people that is centred in my own stories. By understanding it as a rhetorical problem, I am examining ableism not just as a set of discriminatory actions but as a system of communication and persuasion that maintains and justifies those discriminatory practices (Cherney, 2011). As Cherney (2011) suggests, this perspective allows for a better analysis of how ableism perpetuates itself and the development of more effective strategies to challenge it. My approach recognises that such a challenge requires ongoing effort, self-reflection, and attentive listening to the experiences of disabled children to develop a more inclusive discourse and challenge deeply ingrained ableist attitudes.

I immersed myself in the data to find patterns and connections, grouping them to identify potential themes (Braun et al., 2019). I devised a table to record my findings for each story and summarised all the stories to look for overarching themes. Appendix 2 includes the data analysis tables. This process enabled me to identify the elements of my story relevant to my research questions. I began by coding for instances and types of violence, then for emotions, and finally conducted open coding to revise, refine, and add to my existing codes. I realised that my pre-existing knowledge might be shaping my analysis; by this, I mean that although the stories are crafted in written form, I have knowledge and understanding of the data that exceeds that documented. So, I searched the data for underlying theories and principles explaining the patterns and relationships I had observed. These theoretical underpinnings created a framework that enabled me to understand the data and its implications better, moving beyond simple descriptions towards a more comprehensive and explanatory understanding of the stories.

Reflexive thematic analysis (RTA) was an ongoing part of my research, which began the moment I started to engage with my stories. RTA is widely used in education research and, aptly, a storytelling method (Joy et al., 2023). It acknowledges the researcher's role in knowledge production and offers creative freedom (Atherton, 2022; Braun & Clarke, 2019; Joy et al., 2023). RTA, as an ongoing process, provided a framework for my final analysis and offered structure and authenticity. It enabled me to deconstruct the language, arguments, and underlying assumptions used in my stories that had the potential to marginalise or devalue disabled children (Cherney, 2011). I was able to make visible the patterns, themes, and underlying power structures perpetuating discrimination.

Selecting the Themes

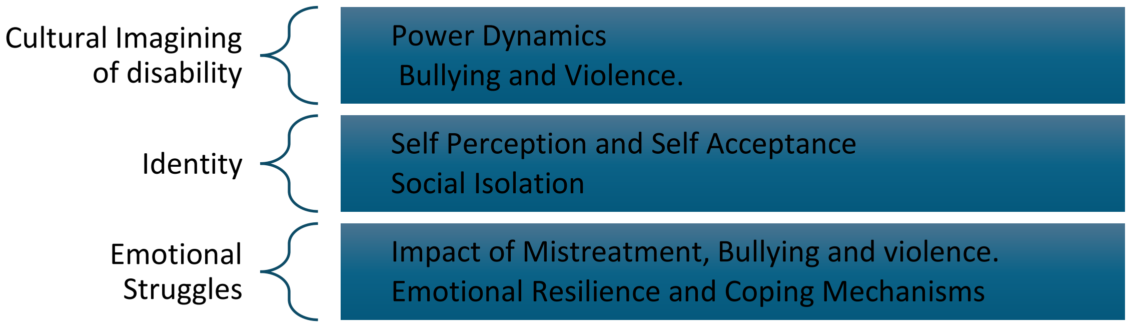
Reflexive thematic analysis, as developed by Braun and Clarke (2006, 2019), offers a flexible and systematic method to discover meaning patterns. This method conceptualises themes as 'meaning-based patterns' (Braun et al., 2019, p. 848) that capture elements relevant to the research questions (Braun & Clarke, 2006). The theme selection process in this approach is not linear but rather a recursive and reflective journey that involves deep engagement with the data (Braun & Clarke, 2021). As I progressed through the coding process, I actively searched for themes, looking for broader patterns and seeking to understand the meaning behind these patterns. I developed them based on my interpretation of the codes, data, and theoretical framework. This process involved carefully considering how different codes could be combined to form overarching themes, as documented in Appendix 3, Understanding the themes.

Themes

The next phase of analysis involved reviewing and refining the potential themes. I selected the themes based on their relation to the codes and connection to my research questions and the data. This process was long and arduous, often involving merging, separating, or discarding themes altogether. Throughout this stage, I remained committed to ensuring that the themes were coherent and meaningful in the context of my research. Once satisfied with the initial themes, I began naming and defining each. This process required careful consideration to ensure that each theme accurately represented the data encompassed and contributed meaningfully to addressing the research questions (Braun et al., 2019).

In conclusion, the active, interpretative nature of the analytical process in Braun and Clarke's reflexive thematic analysis approach is a complex, interpretative process that demands deep engagement with the data, constant reflexivity, and a willingness to revisit and refine themes throughout the analysis. This approach allowed me to develop detailed themes to provide a nuanced account of my data while offering insights beyond surface-level descriptions to capture meaningful patterns relevant to the research. The final themes, Figure 8: Themes Identified, represent a balance between specificity and broader applicability, providing a robust framework for understanding the complexities revealed in the data.

Figure 8: Themes Identified



Defining The Cultural Imagining of Disability

The cultural imagining of disability was identified as a central theme in the data because it is a concept that influences how society perceives and treats disabled children. Garland-Thomson (2009) argues that these cultural representations often perpetuate harmful stereotypes. She further argues that disability is more than a medical phenomenon; it is a critical lens through which to understand culture (Garland-Thomson, 2012a). It was difficult for me to imagine a world free from the pressure of being medically reshaped to conform to normative standards, having grown up under the medical model of disability. The medical and social obligations to ‘fix’ disability became embodied as, with the doctor's help, I worked to reshape my bodymind to align with norms of function and appearance. This reshaping process reveals society's continued policing of normalcy and the unequal pressures placed on disabled bodies to conform (McLaughlin & Coleman-Fountain, 2014). My bodymind was an ongoing, unfinished process tied to broader ideas about ‘normal’ development and social acceptance. The dominance of the medical model of disability shaped and continues to shape the cultural imaginings of disability. Reimagining disability challenges the dominant narrative that has long portrayed disability as a personal tragedy or medical problem to be ‘fixed.’ Table 3 demonstrates how this theme links to the research questions.

Table 3: Cultural imagining of disability

<table>
<tr><th colspan="2">Cultural Imagining of Disability
Linking themes to data and questions</th></tr>
<tr><td><i>Stereotypical assumptions</i></td><td>I existed in an environment where I felt isolated, devalued, and subjected to constant discrimination and misunderstanding. Feelings of Anguish Distress and Anxiety</td></tr>
<tr><td><i>Bullying and social exclusion</i></td><td>Frequent experiences of bullying, name-calling, and social isolation at school indicate how my disability was perceived negatively by my peers. For example, they would mimic my walk and make derogatory comments. Shame, Humiliation, Loneliness, Rejection, Isolation, Sadness</td></tr>
<tr><td><i>Medical model approach</i></td><td>I describe how I was treated as a collection of medical conditions rather than a person. This treatment is exemplified by being made to ‘perform’ for doctors on stage in my underwear. Which reflects a cultural tendency to view disability primarily through a medical lens. Shame and Embarrassment</td></tr>
<tr><td><i>Educational segregation
Lack of inclusion</i></td><td>I experienced debates about whether I should attend a ‘normal’ or ‘special’ school, highlighting societal views on integrating disabled children into mainstream education. This segregation contributed to an ‘us vs. them’ mentality. Fear and Anxiety</td></tr>
<tr><td><i>Expectations of normalcy</i></td><td>I mention feeling pressure to be ‘normal’ and the trauma of acknowledging disability, indicating societal expectations of conformity.</td></tr>
<tr><td><i>Dehumanising language and attitudes</i></td><td>Throughout my stories, I recount being called names like ‘spastic,’ ‘cripple,’ and other derogatory terms, reflecting cultural attitudes towards disability. This language normalises disrespect and can encourage bullying. Humiliation, Fear and Vulnerability Isolation and Loneliness</td></tr>
<tr><td><i>Assumptions about capabilities</i></td><td>Throughout my narrative, I encountered numerous instances where others made assumptions about my abilities or lack thereof. For example, teachers were often surprised by my academic achievements, reflecting low expectations for disabled children. Confusion and Betrayal</td></tr>
<tr><td><i>Physical accessibility issues</i></td><td>The physical inaccessibility of school buildings and environments I encountered shows how societal planning often fails to consider the needs of disabled children. Inaccessible school environments show how physical barriers can isolate disabled children, making them more vulnerable to bullying. Anger and Resentment</td></tr>
<tr><td colspan="2">These experiences collectively demonstrate how cultural perceptions and imaginings of disability profoundly impacted my life experiences, relationships, and self-image. They created an environment where I felt isolated, devalued, and subject to constant discrimination and misunderstanding. This theme is constructed as crucial in understanding my narrative and the broader societal context of disability during that time.</td></tr>
<tr><td colspan="2"><i>Links to Research Questions</i></td></tr>
<tr><td colspan="2">The theme of cultural imagining of disability is intricately linked to my research question about factors that produce contexts in which disabled children are subject to school violence in the form of bullying. This theme provides essential insights into how societal perceptions and attitudes towards disability create an environment that enables and even normalises bullying of disabled children in schools.</td></tr>
</table>

Naming and Defining the Cultural Imagining of Disability and Sub-themes.

***Theme One** - The Cultural Imagining of Disability*	The societal perceptions, assumptions, and expectations about disabled children that shape their experiences and treatment in various social settings
***Subtheme 2** - The Impact of Power Dynamics and Authority Over a Disabled Childhood*	The unequal distribution of control and influence within educational and social settings, particularly as they affect disabled children.
***Subtheme 3** - The Consequences of a Disabled Childhood Social Isolation, Bullying and Violence*	The interconnected experiences of exclusion, mistreatment, and physical harm faced by disabled children in school settings.

Figure 9: Definitions for Theme 1

Defining Identity and Self-Perception

The theme of identity formation is crucial in understanding the lived experiences of disabled children. As Goffman (1990) astutely observed in his work on stigma, disabled children often grapple with a 'spoiled identity' due to pervasive societal perceptions of their impairments. This concept resonates deeply with my experiences, where I frequently felt reduced to a *"collection of medical conditions"* rather than being seen as a whole person. These feelings align closely with the medical model of disability, which scholars like Oliver (1990) have rightly critiqued for its reductionist approach. The medicalisation of my body and experiences played a significant role in shaping my self-perception and identity. I often felt defined by medical diagnoses and treatments rather than by my personal qualities, interests, or aspirations. This experience is not unique to me, highlighting the pervasive influence of medical perspectives on identity formation in disabled children. Scholars have explored how psycho-emotional disablism, a concept developed by Thomas (1999) and further elaborated by Reeve (2006), can impact the emotional well-being and self-esteem of disabled people. They refer to the internal and emotional impacts of societal attitudes and barriers. Unlike structural disablism, which involves external barriers such as inaccessible buildings or discriminatory practices, psycho-emotional disablism operates on a more personal level, affecting my emotional well-being and sense of self. Reeve (2006) likens the effects of psycho-emotional disablism to emotional abuse due to its long-term and cumulative impacts on an individual's mental state. This abuse includes dealing with hurtful comments, stares, and stigmatising actions from others, which can be as debilitating as physical barriers.

However, it is essential to note that identity formation is not solely a process of internalising negative societal attitudes. Many disabled children have found ways to develop positive disability identities as a form of resistance and empowerment. Scholars like Swain & French (2000) refer to and champion the affirmative model of disability. This model presents a non-tragic view of disability and impairment, emphasising positive social identities for disabled people, both individually and collectively. It is significant in its theoretical implications, as it addresses the meaning of 'disability' and offers a framework for understanding the 'disability divide', the perceived separation between disabled and non-disabled people (Swain & French, 2000). Through connecting with disability culture and pride, I have been able to challenge negative societal perceptions and construct a more positive self-image.

The identity formation theme is paramount in understanding my lived experiences. It intersects with critical issues in disability studies, including the impact of medicalisation, psycho-emotional disablism (Thomas, 1999), and the potential for developing positive disabled identities. Understanding this complex interplay between identity formation, societal attitudes, and individual experiences is crucial for addressing the issue of bullying against disabled children in schools. It highlights the need for interventions that go beyond simply punishing bullies to include efforts to promote positive disability identities and challenge negative societal perceptions of disability. My personal experiences, echoed in the scholarly literature, underscore how profoundly identity and self-perception can impact disabled children, shaping their lives well into adulthood. Table 4: Identity and self-perception demonstrate how this theme links to the research questions.

Table 4: Identity and self-perception

<table>
<tr><th colspan="2">Identity and Self-Perception
Linking the theme to the research questions and the data</th></tr>
<tr><td>Confusion and Self-Image</td><td>I remember the confusion I felt when I was attacked over a pair of boots. I thought I looked great in them, but others thought I looked ridiculous. This incident made me question my self-image and how others perceived me.</td></tr>
<tr><td>Visible differences</td><td>My physical differences, using callipers or my distinctive walk, made me stand out visually and created a situation where I was quickly targeted.</td></tr>
<tr><td>Feelings of Specialness and Guilt</td><td>The abuse I suffered made me feel ‘special’ and loved, but when it ended, I was left with anger, guilt, shame, and self-loathing.</td></tr>
<tr><td>Bullying and Self-Worth</td><td>The bullying, including name-calling and physical violence, reinforced my negative self-image. These derogatory names made me feel ashamed of my body and myself. The constant humiliation confirmed my self-hatred.</td></tr>
<tr><td>Struggles with Normalcy</td><td>My desire to be ‘normal’ and my father’s advice that I would never be ‘their kind of normal’ highlighted my struggle with self-acceptance. This struggle was a significant part of my identity formation.</td></tr>
<tr><td>Difficulty in self-advocacy</td><td>My struggles with self-perception and identity made it harder for me to stand up for myself, creating a permissive environment for such behaviour.</td></tr>
<tr><td>Isolation and Self-Reliance</td><td>The isolation I felt at school, and the lack of genuine friendships made me rely on my imaginary friends for support. This reliance on internal voices shaped my self-perception and coping mechanisms, making me an easier target.</td></tr>
<tr><td>Impact of Medical Treatment</td><td>The medicalised approach to my disability, where I was treated as a collection of deformities and made to perform for doctors, contributed to my feelings of dehumanisation and affected my self-identity.</td></tr>
<tr><td>Parental Influence</td><td>My parents’ reactions and the way they managed my disability and the abuse I suffered also shaped my self-perception and my place in the world.</td></tr>
<tr><td>Internalised shame and self-loathing</td><td>The data shows that I developed intense feelings of shame, self-hatred, and a negative self-image due to my disability. This made me more vulnerable to bullying, which targets those perceived as weak or lacking self-confidence.</td></tr>
<tr><td>Fragmented self-image</td><td>The development of multiple ‘voices’ or personas as coping mechanisms indicates a fragmented self-image and identity; I had no confidence.</td></tr>
<tr><td>Internalised ableism</td><td>The self-loathing and shame I felt about my disability reflect internalised ableist attitudes.</td></tr>
<tr><td>Struggle with ‘normalcy’</td><td>My desire to be ‘normal’ and the constant reminders that I was not contributed to my internal conflict. This struggle with identity again made me more susceptible to bullying as I tried to fit in.</td></tr>
<tr><td colspan="2">My experiences collectively demonstrate how my identity and self-perception were shaped by societal attitudes, firsthand experiences, and the treatment I received. This theme is crucial in understanding my narrative and the broader context of living with a disability.</td></tr>
<tr><td colspan="2">Links to Research Questions</td></tr>
<tr><td colspan="2">These aspects of identity and self-perception contribute to creating contexts where disabled children are more vulnerable to bullying. They highlight how internal factors, shaped by external experiences and societal attitudes, can interact with environmental factors to produce situations where school violence in the form of bullying is more likely to occur.</td></tr>
</table>

Naming and Defining Identity and Self-Perceptions and Sub-themes.

***Theme 2** - The Disabled Identity*	The complex and evolving self-perception of disabled children, shaped by their lived experiences, societal attitudes, and interactions with others.
Subtheme One - Knowing The Disabled Self - Self-Perception And Self-Acceptance	The complex and evolving way disabled children view and understand themselves, shaped by their lived experiences with disability, societal attitudes, and interactions with others.
Subtheme Two - Social Isolation Safer To Be Alone	Refers to the experience of being excluded, marginalised, and disconnected from peer groups and social interactions within the school environment.

Figure 10: Definitions for Theme 2

Defining Emotional Struggles

Finally, the third overarching theme, emotional struggles, was constructed and developed as a critical area of focus. The emotional struggles of disabled children highlight the psycho-emotional dimensions of disablism, a concept developed by Thomas (1999) as a critical aspect of disability experience and further elaborated by Reeve (2020). This perspective emphasises how societal attitudes and barriers impact not only the physical experiences of disabled children but also their internal emotional worlds. My stories make visible feelings of shame, self-loathing, and isolation, and vividly illustrate how social and cultural constructions of disability can profoundly affect a child's emotional well-being and self-concept. I felt inadequate and broken as I internalised societal judgments and shame (Jóhannsdóttir et al., 2021). I use this theme to provide a lens to examine the complicated relationship between societal attitudes, firsthand experiences, and psychological development. From a lived perspective, it offers valuable insights for academic understanding and practical interventions supporting disabled children's well-being.

The theme of emotional struggles also provides a lens for understanding the complex dynamics that contribute to the bullying of disabled children in schools. This theme underscores the need for approaches that address not only the visible aspects of disability but also the internal emotional worlds of disabled children, fostering environments of true inclusion and emotional well-being in schools. Table 5: Emotional Struggles demonstrates how this theme links to the research questions and the data.

Table 5: Emotional Struggles

Emotional Struggles Linking the data to the research questions and the data.	
Intense feelings of shame and self-loathing	Throughout my stories, I frequently express deep feelings of shame about my body and disability. For example, I mention how I 'hated my body with a passion' and would even call it names myself.
Fear and anxiety	I describe living in constant fear of bullying and humiliation, evident in statements like, 'There were days when I wanted to kill myself and days when I thought they would kill me.'
Visible distress	My obvious emotional struggles, crying or showing fear, may have encouraged bullies who feed off others' distress.
Vulnerability	My intense feelings of shame, self-loathing, and low self-esteem signalled vulnerability, which bullies often exploited.
Isolation and loneliness	My difficulty forming friendships left me without a support network; this isolation created a context where I had little protection.
Confusion and self-doubt	I complained about social situations and why people mistreated me. 'I was confused. I thought they might be trying to steal my boots.'
Lack of self-advocacy	Due to my emotional state, I often felt unable to stand up for myself or report bullying, creating a permissive environment for such behaviour.
Trauma and dissociation	I describe experiences of dissociation during traumatic events, such as when I attacked Simon: 'I could see my hands and his face going red, yet I was disconnected, disassociated.' It could have made me appear disconnected or strange to others, triggering bullying behaviour.
Emotional volatility -Anger and rage	My struggles with anger and occasional violent outbursts may have marked me as 'different' or 'problematic,' potentially justifying bullying in the minds of peers or even teachers. Showing how my emotional struggles sometimes manifested in violent outbursts.
Depression and suicidal thoughts	I mention having thoughts of suicide, indicating severe emotional distress.
Anxiety about death	I express fear about dying and struggling to come to terms with my mortality, which doctors and family often emphasise.
Emotional overwhelm	I describe developing multiple 'voices' or personas as coping mechanisms for overwhelming emotions, indicating significant emotional struggles.
Self-fulfilling prophecy	My expectation of mistreatment, based on past experiences, may have influenced my behaviour in ways that made bullying more likely.
These experiences collectively demonstrate how emotional struggles were a central and pervasive theme in my life, profoundly impacting my daily experiences, relationships, and self-perception. The intensity and persistence of these emotional challenges underscore their importance in understanding my narrative and experiences as a disabled child.	
Links to Research Questions	
These emotional struggles created a context where I was more vulnerable to bullying, less able to defend myself, and potentially seen as an 'easy target' by bullies. Additionally, the lack of understanding or support for these emotional struggles from school staff may have contributed to an environment where bullying was more likely to occur and persist.	

Naming and Defining Emotional Struggles and Sub-Themes

Theme Three - The Emotional Struggles Of A Disabled Childhood	The complex and often intense psychological experiences faced by disabled children characterised by feelings of shame, fear, isolation, confusion, and self-loathing.
Subtheme One - Developing Emotional Resilience and Coping Mechanisms	the process by which disabled children learn to navigate and withstand the emotional challenges they face due to bullying, discrimination, and social isolation.

Figure 11: Defining Theme Three

As defined in Figures 9, 10 and 11, my overarching themes and subthemes provide an interconnected collection that will enable the reader to understand my lived experience as a disabled child. Disability studies emphasise the need for a more holistic understanding of disabled experiences (Curran, 2013; Runswick Cole et al., 2018), and as Goodley (2014) notes, disability intersects with other aspects of identity and social experience in complex ways. Examining the relationship between these three themes provides a more comprehensive understanding of disabled childhoods. They also align with the growing emphasis on centring disabled voices in research and policy discussions, as scholars like Curran & Runswick-Cole (2014) advocate in their construction of Disabled Children's Childhood Studies. The rich data provided, encompassing cultural experiences, identity struggles, and emotional journeys, offer a powerful contrast to medicalised or deficit-focused approaches to understanding disability. They combine to provide a comprehensive framework for understanding the complex lived experiences of disabled children and bridge multiple theoretical perspectives within disability studies, offering insights that can inform both academic understanding and practical interventions to support the well-being and empowerment of disabled children.

The cultural imagining of disability shaped how others perceived and treated me (Goodley, 2014a). These experiences subsequently impacted my identity, and the resulting negative self-perception reinforces cultural biases and stigma surrounding disability. The cultural imaginings of disability shaped my identity and sense of self, which in turn led to my emotional struggles and the 'internalising a devaluation of the self' (Fernándes et al., 2015, p. 33). I use these three themes as a backdrop to provide a rich and deeply personal analysis of my childhood as I navigated an ableist world that was often hostile, dehumanising, and oppressive (Chen, 2023). I lived the life of the Other to be feared and loathed (Vehmas, 2004), relegated to the margins of society (Goodley, 2011). The centrality and interconnectedness of these themes are impactful aspects of my lived experiences and complete my cohesive autoethnographic narrative.

Writing up

The difficulty of writing my final story lies in ‘seeing when analysing your data due to the connectedness to the data’ (Cooper & Lilyea, 2022, p. 201). Cooper & Lilyea (2022) suggest focusing on culture, context, personal events/issues, and societal issues/events to present a holistic analysis. Triangulating the memories of my past self with the visceral emotions of my present self, I hoped my academic self would offer ‘validity, depth, and richness in the research findings and outcomes’ (Cooper & Lilyea, 2022, p. 202); this was indeed more challenging than I expected. The deeply personal nature of my autoethnography and deep self-reflexivity forced me to confront the emotions intimately tied to my identity and harrowing lived experiences (Boll, 2023). This process of examining my cultural being led to a heightened sense of vulnerability and emotional discomfort, making it difficult for me to document my analysis in a cohesive format. My autoethnographic approach blurred the lines between who I am now and my stories of a sad and lonely disabled child desperate for friends, creating a complex dynamic. As both the object and representative of the research process, I had immense cultural responsibility to ensure that my final story was impactful (Boll, 2023).

My data analysis was a long, time-consuming, and complicated process. By the end of this process, I questioned, in much the same vein as Thompson and Bornat (2017), whether such an ‘elaborate process is needed in order to make judgements which could equally be reached more informally’ (Thompson & Bornat, 2017, p. 371). However, it is argued that unlocking and analysing memories is therapeutic, as it ‘opens up possibilities for understanding the history of interpersonal relations’ (Thompson & Bornat, 2017, p. 247). For me, the systemic oppression that undermined my dignity was so deep-rooted and, combined with the unresolved issues that have caused my PTSD, was always going to lead to a complex analysis. The complexity of the analysis only furled my excitement, presenting intellectual challenges that pushed me to think creatively and innovate at every turn. My data analysis journey was a rollercoaster of emotions, an ordeal that tested my limits and pushed me to the edge of my capabilities and beyond them.

Most importantly, it reignited my passion for discovery; as patterns emerged from the chaos, I felt a rush of euphoria. The journey was long and arduous, but it was also transformative. I emerged with a profound understanding of the power of stories and autoethnography. What started as a love affair with reading and a thirst for knowledge transformed me into a feminist and an activist, no longer complacent in an ableist society. I had found my disabled voice, the most exhilarating, emotional, and enlightening experience of my life, one that has left me forever changed and hungry for more. As we transition into the discussion chapter, we find ourselves at the precipice of revelation, where the threads of personal experience, academic rigour, and societal insight intertwine to weave a tapestry of understanding. This final story is not merely a conclusion but a new beginning, a narrative that illuminates the complex landscape of disability in a world that often fails to accommodate differences.

Through the lens of autoethnography, we now embark on a journey to make sense of a life shaped by disability, a life that has been both challenged and enriched by societal barriers and personal triumphs. This discussion draws together the nuanced realities of navigating an ableist world, exploring how the very act of analysis and storytelling has become a tool for empowerment and a catalyst for change. As we unpack the layers of this narrative, we examine how the intersection of disability, feminism, and activism has forged my new identity, one that refuses to be silenced or marginalised. We explore how rediscovering one's voice can ripple outward, challenging societal norms and advocating for a more inclusive world.

Chapter 6 – Discussion

Introduction

In this section, I will juxtapose academic theories and my lived experiences to establish the factors that produce contexts in which disabled children are hated and subjected to school violence and bullying. I explore the intricate relationship between narrative identity and the lived experiences of a disabled child, with a focus on the cultural imagining of disability. Through a personal lens, I will share my journey of navigating a world shaped by ableism, where societal perceptions often dictate the value and humanity of those with disabilities. Together, we will learn about the profound impact that language, historical narratives, and social attitudes have on the self-perception of disabled children, as well as the broader implications of these constructs on identity formation.

I delve into the emotional toll of being perceived as Other and the internal struggles that arise from societal rejection. By weaving together personal anecdotes and scholarly insights, I hope to illustrate how the experiences of bullying, violence, and dehumanisation are not isolated incidents but rather manifestations of a deeply entrenched cultural narrative that perpetuates stigma and exclusion. This discussion is not merely an account of hardship; it is a call to action for greater understanding and advocacy for inclusivity. Ultimately, I aim to challenge readers to reconsider their perceptions of disability and to recognise the resilience and complexity of disabled identities. Through this exploration, I hope to foster a deeper appreciation for the diverse experiences that shape our understanding of humanity and the importance of creating a more compassionate and inclusive society for all.

Narrative Identity

Adji (2021) maintains that autoethnography not only helps in healing by bringing traumatic memories into the present but also provides a platform for many voices to unite, thus retaining the diversity of experiences and avoiding homogenised narratives. My final story, the one that I can share with you at the end of an arduous journey, is one of control; I own this story. It is no longer, as Mizzi (2010) argued, made up of many voices; it is my voice silenced for many years. They say when a rape victim is put on trial, they have to relive that rape; my autoethnography has, to this point, been my trial, and just as when I was a child, I had no part to play, I was powerless, owned by every academic that had written about my life, owned by their ontology and their epistemology. This chapter is my closing statement, the one I present to you as the reader, not to be judged but to help us both make sense of the journey we have shared.

When I returned to my stories and my past, I became that disabled child again, the powerless, hated non-human that everyone despised. So, my fragmented identity, my invisible friends, returned to protect me. In every paper we read, we find splinters of ourselves; they become our epiphany and our reality until we read the next paper. I remember Antonios and Kirsty, my enduring supervisors, saying to me, after reading several drafts, that it was as though I had read each paper and forced it into a space even though it was not relevant. My feedback ranged from too polemic to nice - but how is this relevant? How astute they were. I could not let go of these papers because they all meant something to us. These splinters were forming together to create me; how could I cast them aside? They now have a special place in my literature graveyard; I visited them regularly in the beginning, trying to squeeze them back in. Not so much now. You see, when you are a powerless child, you absorb everything like a sponge, looking for that one piece of knowledge that will help you understand, make you real, rehumanise, and personify you.

Paper after paper told me I was not human. I was a ‘lump of breathing, useless flesh’ (Sweet, 2014, p. 15), ‘vermin who crawl about’ (Brignell, 2010, N.P), a ‘deformed’ lamb to be disposed of at birth (Arnold, 2013), deviant (Bogdan, 1986). I was shackled to histories that sought a world of perfect bodyminds, not histories that we remember, like the war. Histories that disabled people relive as ideologies are reimagined to infest every generation. To recreate the cultural imagining of disability into something more palatable yet steeped in ableism. Ableism ‘operates at the macro (legal), miso (organisational), and micro (child and teacher) levels, shaping how disability is perceived and responded to within educational systems’ (Voulgarides et al., 2023, p. 5). Educational spaces are institutions that mimic sociocultural expectations, and they are places where disabled children’s experiences echo those of disabled adults in the wider world. The places we, disabled children and adults, occupy are the ‘spatiotemporal dynamics of ableist spaces’ of ‘un/safety’, increasing vulnerability’ (Edwards & Maxwell, 2023, p. 171). The violence and bullying I endured became normalised by myself and the adults. This normalisation meant that these behaviours were seen as part of the status quo, so there were no interventions or support. I had to find my own way to survive, the shifting cultural imagining of my disability, to form an identity for survival and cope with the emotional toll of being hated all by myself.

My ongoing negotiation between societal expectations and my personal experiences profoundly shapes my narrative identity. Growing up, I often internalised feelings of fear, shame, and isolation, because my identity was frequently defined by my impairments rather than my holistic self. When society views me as a homogeneous bodymind, internalised negative perceptions, social exclusion, dehumanisation, and barriers to self-advocacy seem inevitable. This process not only harms my self-esteem and mental health but also perpetuates a cycle of marginalisation and invisibility, as Ahmed (2022) discusses.

My narrative identity is one of resistance and adaptation as I navigate a world that prioritises able-bodied and able-minded ideals, overlooks my individuality, and denies my humanity. Disability is always in a state of flux, vulnerable to being distorted and manipulated to fit policies and frameworks. We are left with a fluid concept rather than a one-size-fits-all definition, as Moriña and Carnerero (2022) highlight. Yet, I find strength in the fact that our ‘messy’ bodies, which cannot be compressed into a tidy classification, continue to disrupt ableist bodymind ideologies.

The narratives surrounding disability are often steeped in language and values that distort our lived realities, obscuring the socially constructed barriers that oppress us (Ahmad, 2018; Brzuzy, 1997; Mutanga, 2019; Rix, 2006). This narrow focus not only marginalises our experiences but also leads to the painful exclusion of disabled children, leaving scars that can last a lifetime, as Opotow (1990) notes. Neoliberalism is a global phenomenon comprising a political agenda and ideology manipulating social life and provoking ableism (Raaper et al., 2022). Hate crimes are ‘less concerned with children as it is the boundaries between groups’ (Burch, 2021a, p. 76). The political gain is in reinforcing these group boundaries and power dynamics (Burch, 2021). Society and educational spaces are dominated by power imbalances that demand social control (Smith, 2016; Volk et al., 2014). Humiliation was historically, in my era, seen as a legitimate tool for maintaining hierarchical social order (Lindner, 2001).

Moral Obligations

Before I begin, I will discuss Appendix 2 - Analysis Summary of all Data and a decision I made from ethical responsibility to my family. You will see from the data that a powerful recurring theme was that of family dynamics. This theme was echoed in the literature as the 1960s may be remembered as a 'family-centred decade', a period characterised by a significant shift in the perception of disability and its impact on families (Jordan, 1962, p. 243). In one of the many attempts to write my analytic discussion, I started by looking at how my family contributed to my three themes. I soon realised that I was emotionally and academically tearing my family experiences apart. I tried to take on board an academic narrative that pointed to the negative impact my family had on my well-being. Autoethnographic themes can be emotionally draining; sometimes, survival must take precedence (Pearce, 2020). So, here I acknowledge the significance of family dynamics. However, I had to make an ethical and emotional decision. The recent death of my father and my mother being in palliative care meant that unpicking their inadequacies as parents felt disrespectful and something I was not emotionally stable enough to address.

The Consequences of the Cultural Imagining of Disability

Introduction

The cultural imagining of disability, according to the literature, is a complex and often negative construct shaped by historical, social, and political factors (Burch, 2018; Campbell, 2009; Cleall, 2022; Goodley, 2014b). Disability is portrayed as a deviation from societal norms, frequently framing disabled people as inferior, burdensome, or in need of 'fixing' (McLaughlin & Coleman-Fountain, 2014). This cultural imagining often portrays disability as an inanimate condition to be endured rather than a lived experience, effectively dehumanising disabled children and reinforcing societal hierarchies (Diebolt & Haupert, 2016; Jagani, 2017; Liddiard & Slater, 2017; Peuravaara, 2013). The persistent ideology of 'normalcy' plays a significant role in shaping the cultural imagining of disability, creating a binary between 'normal' and 'disabled' that further marginalises those who do not conform to societal standards of ability (Davis, 1995; Hacking, 1990; Misztal, 2002; Stephens, 2021; Taylor & Mykitiuk, 2001). This construct has led to the depersonalisation of disability, often presenting disabled children as a homogeneous and marginalised group (Bickenbach, 2014; Goodley & Runswick-Cole, 2011b; Ktenidis, 2020; Opotow, 1990). This perception is deeply rooted in ableist ideologies that promote the idea of disabled children as less than fully human, leading to their marginalisation and social exclusion (Barnes, 1991; Goodley & Runswick-Cole, 2011b; Jayara, 2020; Richardson et al., 1964).

This section reflects on the complex and often harrowing reality of how disability is culturally imagined and the devastating consequences this imagination had on me as a disabled child. Through a combination of personal narrative, scholarly analysis, and critical reflection, we, you, the reader and me, the author, explore the contexts in which disabled children face hatred, bullying, and violence. My lived experiences vividly illustrate the harmful impacts of the cultural imagining of disability as described in the literature. My experiences of dehumanisation, social exclusion, medical intervention, and internalised ableism all stem from and reinforce societal constructs of disability as deviation, inferiority, and burden. Throughout this section, personal anecdotes and experiences are interwoven with academic insights, providing a powerful and intimate look at the realities faced by disabled children. By confronting these difficult truths, this chapter aims to challenge readers to reconsider their perceptions of disability and advocate for a more inclusive and compassionate society. The analysis contributes to the growing body of critical disability studies literature, offering new perspectives on the intersection of disability, culture, and violence. I identify the context in Which Disabled Children are Hated, Bullied, and subjected to violence.

The Cultural Imagining of Disability

The cultural imagining of disability refers to the collective societal perceptions, attitudes, and narratives that shape how disability is understood and treated. Central to this discourse is the concept of ableism, which promotes the notion of a 'normal' body and mind. I have, in line with other feminist disability scholars (Crow, 2010; Liddiard, 2014b; Price, 2015; Simplican, 2017; Wendell, 1989), used a process of life-writing, autoethnography, to make visible the detriment ableist stereotypes impose on disabled lives. I have shared my personal stories to reframe disability as valuable diversity rather than tragedy (Simplican, 2017). While my stories are historical, throughout the literature, I have demonstrated how debates around disability in the

1960s have traversed history. The societal focus on 'normalcy' that creates and perpetuates the 'problem' of disability by enforcing a rigid standard that excludes natural human variation continues today. Challenging the notion of normalcy continues to be the key to disability rights and justice (Zaks, 2023). In this section, I aim to understand the context in which disabled children are subjected to violence, bullying and hate.

Chasing Normal

In the mid-nineteenth century, 'normal' became an identity construct, described by Misztal (2002, p. 191/192) as ‘a beautiful example of ideological illusion’ that reflects the function of social norms. This ideology continues to invade the lives of disabled children today, as neoliberal ideologies continue to perpetuate the long-standing ableist views of disability as something to be fixed or overcome (Liddiard & Slater, 2017). My desire to be normal is evident in all my stories, so I start my discussion with the concept of 'normalcy'.

In Fig 15, I provide a short reminder of story 3, where I realise my desire to be normal is most prominent. I believed as a child that I was hated because I was not 'normal' and that if the doctors could make me 'normal', my problems would all go away. This desire is evident in the statement, *"Oh, Dad, I just want to be normal; why don't they like me? Why does everyone hate me? What did I do wrong?" I choked out between sobs."* My father's wise words, *"They don't understand you," he said grimly. He looked me in the eyes and said, "You will never be their kind of normal, and that is a fact, and you have to find a way to live with it. "Some people don't like people who are different, and you are different." He said thoughtfully.*

"You just have to find the ones that can and try to make friends," this reflects the challenges of navigating social relationships in an ableist society, as examined in detail by Campbell (2009) in her work on ableism and disablism. He was telling me that I would always be different whilst acknowledging that 'normal' is a subjective concept and "never be their kind of normal." *"They don't understand you."* Here, he was telling me that people's negative reactions often stem from ignorance or a lack of familiarity with disabilities or differences. Kleck (1969) found that people's discomfort with disability decreased with increased exposure and interaction, suggesting that familiarity helps overcome initial negative reactions. Many scholars concur with my father's

belief that societal attitudes towards disability are often rooted in misconceptions and a lack of understanding (Barton, 2005; Campbell, 2009; Goodley, 2014; Marks, 1997).

Figure 12: Story 3- Normalcy - An Hour in the Ditch in 1977

> Today unravelled into a day of profound heartache, beginning on a sour note, and descending into deeper despair. For the first time, two boys approached me, their smiles promising the warmth of friendship. My heart soared with hope, believing they saw beyond my imperfections. But that hope was cruelly shattered. They betrayed me, casting me into a ditch. The icy water enveloped me, chilling me to the core, and I was left stranded, feeling utterly foolish, hated, and humiliated. I had dared to believe in friendship, only to be reminded of the harsh rejection my deformed body often invites.
>
> Now, I sit on the bathroom floor with my father. As tears carve hot, clean paths down my muddied face, I feel the warmth of his love surrounding me. Together, we gently clean my schoolbooks, each stroke of the cloth a silent testament to his unwavering support. Despite the heartbreak, his steadfast resolve strengthens mine, reminding me that I am not alone. In this tender moment, I find solace and the courage to face another day. Can you feel this warmth? Yes, it was a poignant and heartbreaking moment, but his unwavering love and resolve strengthened mine. I want you to know that these experiences, as painful as they were, forged something in me. They taught me resilience, empathy, and the power of silence. They showed me the darkness in people, yes, but also the capacity for unexpected kindness.

My father was providing a compassionate yet realistic perspective on living with a disability in a world that often struggles to accept differences. He was preparing me for the challenges I may face while also affirming my inherent worth and uniqueness. I wish I had been wise enough to decipher his words as a child. My father's response acknowledges the societal barriers and attitudes that disabled children encounter, a theme extensively discussed by Goodley and Runswick-Cole (2011a).

Feeling Hated

The question, *"Why does everyone hate me?"* in story three reflects the internalisation of societal attitudes and my struggle to understand my place in a world that was hostile. Carol Thomas (1999) recognises this as the psycho-emotional dimensions of disability that cause disabled people to internalise negative societal attitudes. Robert McRuer (2006), in his work on crip theory, notes that disabled people internalise and sometimes resist compulsory able-bodiedness. As a child, I was powerless to resist the longing for able-bodiedness. I could not see beyond the feeling of being hated. Englander's (2007) work frames hate as a mechanism for social control, intimidating and marginalising those who are perceived as different or non-conforming. In story one, it is evident that I did not conform to the headteacher's expectations. Her comment, *“That reminds me, put it in a nappy for the play,”* in reality, was not just a comment; it was a way to diminish my humanity. Her use of ‘it’ reinforces the idea that my differences were something to be ridiculed or feared. This language strips me of my personhood and reduces me to an object. The language she used, *“She told the lady that no one wanted to play with me because I was handicapped and should be with children like me,” demonstrated her desire* to segregate and exclude me. *My peers soon echoed this exclusion, “He won’t hold my hand ’cause he says he doesn’t want to get mouldy legs. My teacher laughed and told him, you can’t catch mouldy legs and not be silly.”* Her laughter felt like a dismissal of my reality, a way to brush off the hurt I was experiencing.

Stories three and four represent a cascade of events over two days, which ultimately left me fighting for my life. As I reflect now, I can see how horrific these events were, yet at the time, I blamed myself, constantly questioning what I did to make adults and children hate me. I was not a hero or a strong, determined child; I was getting on with life. I find it difficult to think of this child, who is not so different from the person I am today. I am still ensconced in narratives that favour normal bodyminds, which, as Campbell (2013) articulates, produced the narratives that led to a pervasive sense of inadequacy, fostering the belief that I will never be 'good enough.' A feeling I will never be free from. My feelings of inadequacy and being hated align with Cruickshank's (1951) findings, which were documented before I was born, accurately predicting the constant state of fear and anxiety in which many disabled children will live. My desire to be 'normal' and the feeling of being universally disliked reflect the intense pressure disabled children face to conform to societal norms, as observed by Campbell (2009).

I was surrounded by the language of humiliation and hate, “You run like a spastic,” “Make way for the Spastic,” “You raised your hand to a spastic cripple,” “Leave him to the ugly ‘spastic’ ‘cripple.’ I can’t stand the smell.” These are not just words; they are weapons, chipping away at my self-esteem, my sense of safety, and my very humanity (Burch, 2018, 2024; Englander, 2007; Goodley & Runswick-Cole, 2011b; Hughes, 2015; Jóhannsdóttir et al., 2022; Michener, 2012;

Sherry, 2016). Such language, attitudes and behaviours contributed to my hostile and discriminatory educational environment. Leah Burch (2018) defines this language as hate speech, arguing that using derogatory terms and slurs to refer to disabled people reinforces the ableist narratives that make disabled people feel inferior. Burch (2018) suggests there is a normalisation of hateful language and attitudes towards disabled people in society, creating a climate where discrimination becomes accepted.

My Messy Body

In schools, the normalisation of extreme bullying acts, often viewed as acceptable or even humorous (Englander, 2007; Ktenidis, 2022b), stems from power imbalances and oppressive social systems that both facilitate and trivialise such behaviour. I find resonance in Ktenidis's work (2020, 2022), which aims to generate anti-ableist knowledge systems that affirm diverse embodiments and ways of being, challenging the notion of the able-bodymind as the universal norm. My experiences vividly demonstrate how embodiment transcends mere physical experiences, encompassing emotional, social, and cultural dimensions (Davis, 1995). My experience with my callipers and "mouldy legs" shows how my physical disability affected my social interactions and how others perceived me. For example: "The other children don't like me and won't play with me. They don't invite me to their birthday parties, and they say my mouldy legs smell," evidence of physical and social embodiment. The way my disability was viewed and treated by others reflects the cultural attitudes of the time. For instance, the headteacher's comment: "It doesn't clunk over the stage for a wet herself in front of the parents", shows a lack of understanding and accommodation for disabilities, evidence of cultural embodiment. My feelings of shame and self-loathing related to my body are evident throughout my stories, such as: "I hated my body with a passion, almost as much as they did, and would even call it names myself," evidence of emotional embodiment. Garland-Thomson (2012b) argues that disability involves embodied cognition, stating that our bodily experiences shape how we think, know, and construct our social reality. She posits that disability offers unique ways of knowing and understanding the world. My embodied interactions highlight the urgent need for more inclusive, diverse representations of embodiment in both society and scholarship. It is through sharing these narratives of struggle and resilience that we can foster a more inclusive and compassionate society, emphasising the critical importance of listening to and validating diverse bodily experiences to create a more equitable world (Goodley & Runswick-Cole, 2016). The physical and emotional bullying I experienced demonstrates how social power is enacted through bodies, such as in the violent attack that left me hospitalised, which is evidence of embodied power dynamics.

I was struck by the profound implications of Liddiard and Slater's assertion that "The medical model emphasises controlling and 'normalising' disabled bodies, keeping all bodies 'tidy'" (2017, p. 321), illuminating the systemic oppression inherent in ableist societal structures. Davis (2002) further argues that the medical model of disability visually categorises disability, with doctors attempting to re-craft disabled bodyminds to emulate that of the dominant culture. This emphasises how medical practices seek to alter disabled embodiment to fit societal norms. I have used embodiment as a critical lens through which to examine my lived experiences as a non-conforming bodymind to reveal the deep-seated tensions between diverse embodiments and hegemonic notions of normalcy. Siebers (2010) discusses how disabled bodyminds are measured against fabricated normative standards, with humanness distributed according to perfection, beauty, and ability, highlighting how embodiment is tied to societal perceptions of normalcy and worth. I realise that my non-conforming bodymind, in its very existence, constitutes a challenge to the dominant ableist ideologies of embodiment. This disruption is not merely a passive divergence from societal norms but an active contestation of the medical model's reductionist approach to human diversity. The bodymind, as both the subject and object of this ideological conflict, became part of my intense struggle and negotiation. My body, this vessel that carried me through life, became the root of all my pain. It was the source of anxiety, the target of discrimination, the reason for the violence that left both visible and invisible scars, and the origin of hate that poisoned my self-perception. It isolated me not just from the world but from myself, a chasm I couldn't seem to bridge.

I remember the psychologist's well-intentioned but painfully ironic advice: "You have to like yourself before anyone else can." How cruel this sounded to ears that had only heard criticism, to a heart that had internalised the world's disgust. My bodymind wasn't just unacceptable to others; it had become repulsive to me. This repulsion reflects the insidious impact of internalised ableism. Jóhannsdóttir et al. (2022) illuminate this dark corner of the disabled experience, explaining how the internalisation of ableism is influenced by societal norms and the hostile, derogatory language associated with disability. These external forces create an internal discourse of stigmatisation, a negative self-talk that echoes society's prejudices. My feelings of shame and humiliation weren't just passing emotions; they were corrosive agents eating away at my identity, health, and well-being. As David (2013) poignantly observes, ableist norms generate "internalised oppression thoughts and feelings" (p. 284), which creates a vicious cycle where we, disabled people, begin to internalise and believe the very stereotypes and negative attitudes that society projects onto us. It's a form of self-fulfilling prophecy, where the window through which we view the world becomes a mirror reflecting society's worst assumptions about us. Liddiard and Slater (2017) challenge these assumptions, arguing that disabled bodyminds disrupt the "carefully constructed myth of the 'able' body and self" (p.321), which is foundational to neoliberal social order, emphasising how disabled embodiment challenges societal norms.

Feeling isolated

My life often felt like *“Looking through a window into a life that is always out of reach. It is about not belonging and isolation, a life immersed in fear, shame, humiliation, and self-loathing.” (prelude to my stories)* In Appendix 5: Understanding the Metaphors of ‘Looking through a Window’, I spend some time reflecting on this statement and the hidden meaning behind the analogy. This metaphor encapsulates the profound sense of isolation and otherness that coloured my early years. It wasn't just about not belonging; it was a visceral experience of fear, shame, humiliation, and self-loathing that seeped into every fibre of my being. These feelings weren't abstract concepts floating in my mind; they were deeply embodied experiences that shaped my very understanding of identity and belonging.

The derogatory language that plagued my education made it easier for people to hurt me, stripping away my dignity and reducing me to a label rather than recognising me as a whole person. My struggle to make friends and find acceptance relates directly to the social exclusion often experienced by disabled children, a phenomenon noted by Nowicki et al. (2014) in their work on purposeful exclusion, which highlights how being different can lead to deliberate isolation by peers.

When I embarked on my thesis, I believed that understanding the history of disability was essential to understanding my life. Disability became the political focus of eugenics, ‘exposing the bodymind to the brutality of political power' (Bernardi, 2023, p. 45; Cleall, 2022). Political ableist ideologies, in whatever guise, have created a long-standing socio-cultural narrative of hate, discrimination and violence. These narratives have traversed from Aristotelian infanticide (Torres, 2023), 18th-century debates around the value of human life (Sweet, 2014), eugenic social cleansing and contemporary neoliberal presentation of disability as negative human capital (Opotow, 1990). The systemic oppression and marginalisation incited by these narratives reflect the longevity of 'an ideology of compulsory able-bodiedness' (Liddiard, 2014, p. 97). These cultural narratives are a powerful tool in shaping societal perceptions of disability, creating a cycle of misinformation and stigma (Banks et al., 2016). Scholars critique the ableist discourse that engulfs disabled children as dehumanising and reinforcing harmful stereotypes (Campbell, 2013; Goodley et al., 2014; Goodley & Runswick-Cole, 2011b). Now, as the cruel reality crashes over me, I see how we, disabled children, are chained to the historical narratives that dehumanise disability and brand us as burdens (Bauman, 1997; Burch, 2018; Grue, 2016; Yates, 2015) destined to be hidden away in society's darkest corners. As a result, my childhood was a lonely time full of pain and exclusion: *"The other children don't like me and won't play with me. They don't invite me to their birthday parties, and they say my mouldy legs smell."* These words, etched into my memory, reveal the pervasive social attitude that disability is something unpleasant or contagious. I was cast aside, isolated from the warmth of friendship, made to feel different and unworthy. Rodriguez et al. (2007) noted that disabled children often struggle more with peer relationships compared to typically developing peers and emphasised how peer interactions are essential for developing social competence in disabled children.

I describe in story one, at three years old, how "I don't want to play with the other children. I play by myself, so they don't have to smell my poorly legs." Lindsay & McPherson (2012) suggest that many disabled children experience persistent verbal abuse, name-calling, and, in some cases, physical bullying from peers. Further, this negative treatment can make children reluctant to engage socially. This exclusion did not just leave me lonely; it painted a target on my back for mockery and abuse.

Although I was physically in a 'normal' school, as opposed to a special school, I was not welcome or included. Cage et al. (2019), Carter & Spencer (2006), and Houchins et al. (2016) discuss how the lack of social acceptance and powerful language of exclusion isolate disabled children, making it difficult for them to form meaningful relationships and integrate into their communities. Gomez-Campos et al. (2023) highlight how disabled children are still frequently segregated from non-disabled peers, both physically and socially. This isolation is further evidenced in the government document: ‘We all have a voice: Disabled children’s vision for change’ (Souza, 2023), where children still report feeling afraid, lonely, sad, unsafe, fearful of bullying, fearful of crime, and worried for their families. Souza (2023, p. 19) recognises these problems as ‘A much wider, systemic problem of disabled children’s voices not being heard.

Burch (2018) notes that contemporary narratives continue to reinforce historical prejudices against disabled people, resulting in ongoing harm, exclusion, and marginalisation. As I reflect on my journey, I have come to realise that understanding the history of disability is not just academic; it is deeply personal. I once thought this knowledge would help me make sense of my life, but now I see how these narratives strip away our humanity. My feelings of being hated were not innate but socially constructed and perpetuated through various cultural, political, and social mechanisms. Addressing it requires challenging these deep-rooted attitudes and structures.

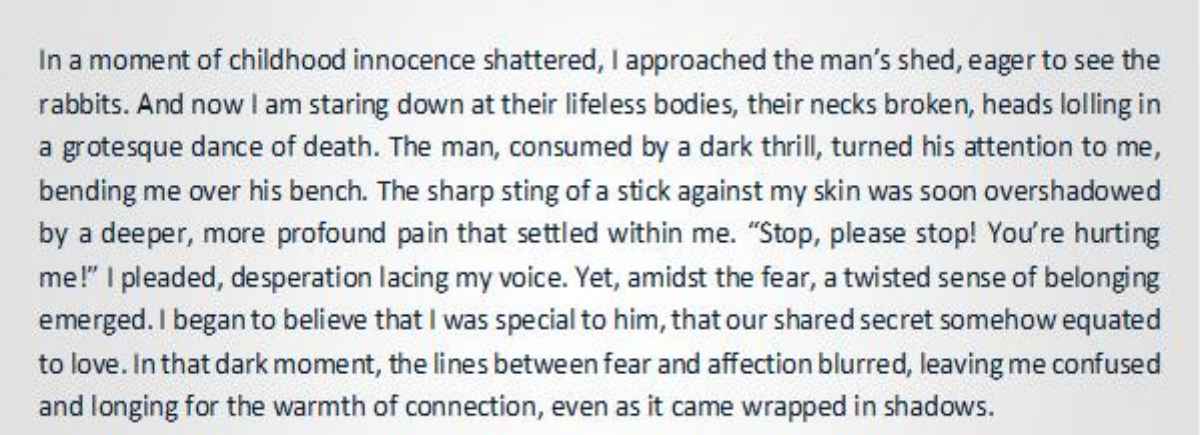
Despite policies aimed at inclusion, many educational systems fail to implement truly inclusive practices. This failure results in environments where disabled children are not fully integrated or supported, making them more vulnerable to bullying and violence (Goodley, 2014a; Ktenidis, 2020, 2022b; Liasidou & Ioannidou, 2021). Giroux (2011) critiques neoliberal educational policies and argues that these policies create a 'culture of cruelty' and a 'discourse of humiliation' legitimising organised violence against those deemed 'disposable.' This perspective emphasises the need for a shift from hyper-individualism to more inclusive and empathetic educational practices that value diversity and understanding. I, however, add another layer to this; having lived within this education system and been subjected to some heinous crimes that are explained away as bullying, I argue that change comes from outside of schools. The root of hatred, bullying and violence lies in societal attitudes. Disablist bullying is socially constructed, traversing oppression and discrimination, a form of disability discrimination, and a violation of disabled children's rights to be treated with dignity and respect. In sharing my deeply personal reflection, I hope to shed light on the often invisible emotional toll of disability. It is a journey from self-loathing to self-understanding, from isolation to connection, and ultimately, from looking through the window to stepping through the door into a world where all bodies and minds are valued and celebrated.

Social Attitudes

My very existence is a rebellion against the neatly packaged idea of normalcy. The world's malice manifests in cruel taunts: *"You run like a spastic, he snarled."* These words, spat with such hatred and venom, reflect the dehumanising attitudes that permeate society. My body, deemed untidy and imperfect, is a constant reminder that I will never measure up to impossible normative standards (Campbell, 2013). The crushing weight of inadequacy haunts my every breath, amplified by the words of authority figures who should have protected me: *"You just cannot stop being rude. You shouted at me in front of the school and parents. You are a disobedient child and will be punished for your insolence."* The headteacher's actions weren't just cruel; they reflected a societal belief that we, disabled children, were inherently problematic. Public humiliation and physical punishment became tools to reinforce negative stereotypes, leaving me emotionally scarred and increasingly vulnerable (Chen, 2023; Fraley & Capp, 2024; Gudyanga et al., 2014; Skiba & Peterson, 1999).

This socially imposed vulnerability had extreme consequences for me. I survived by navigating a world that seemed intent on breaking me. The cultural imagining of disability didn't just make me vulnerable; it was the very architect of my pain. It created the harm and hate that left me exposed, at risk of being hurt, and desperately in need of protection and support. I see this clearly in Story Two, where I sought solace in the arms of a man who would become my abuser. The image haunts me still, Figure 13: From Story 2 - Not the Slipper 1972. Society did this to me. It was the relentless drumbeat of ableism, the insidious whispers of inadequacy, which drove me into the arms of someone who would exploit my need for comfort and acceptance. The scars of these experiences run deep, etched into the very fabric of my being. My stories are not just tales of survival; they are a rallying cry against a world that tried to define me by my limitations rather than my limitless spirit.

Figure 13 : From Story 2 - Not the Slipper 1972



In a moment of childhood innocence shattered, I approached the man's shed, eager to see the rabbits. And now I am staring down at their lifeless bodies, their necks broken, heads lolling in a grotesque dance of death. The man, consumed by a dark thrill, turned his attention to me, bending me over his bench. The sharp sting of a stick against my skin was soon overshadowed by a deeper, more profound pain that settled within me. "Stop, please stop! You're hurting me!" I pleaded, desperation lacing my voice. Yet, amidst the fear, a twisted sense of belonging emerged. I began to believe that I was special to him, that our shared secret somehow equated to love. In that dark moment, the lines between fear and affection blurred, leaving me confused and longing for the warmth of connection, even as it came wrapped in shadows.

My treatment reflects a cultural imagination of disability that places disabled children in a subordinate position, subject to the control and judgment of those in power. The mention of public humiliation implies that disability was often treated as something to be displayed or addressed publicly rather than respected as a private matter, suggesting a cultural imagining that denied me dignity and privacy. A cultural imagining of disability that has profound and lasting impacts on the self-perception and emotional well-being of disabled children.

In Story Three, Figure 12: Story 3- Normalcy - An Hour in the Ditch in 1977 pg201, my time in the ditch burns in my memory like a scar that refuses to fade. I can still feel the cold, damp earth pressing against my skin, the stench of decay filling my nostrils. Yet, amidst this degradation, a flicker of hope ignited in my chest. I had, but for a brief moment, felt what it was like to feel protected and safe. Oh, how desperately I clung to that notion of friendship, that fleeting moment of belonging. But the bitter truth is that society had thrown me into that ditch, discarding me like rubbish. Societal attitudes, policies, and practices have systematically dehumanised me, leaving me vulnerable and stripped of my perceived humanity in the eyes of society (S. Ahmed, 2022; Burch, 2021b; Liddiard & Slater, 2017). These practices align with my experience of feeling discarded and dehumanised by society. Society has stripped away my humanity; Hughes (2015) posits that neoliberal rhetoric and policies continue to undermine the status of disabled people as full human citizens, portraying them instead as counterfeit, parasitic, and less than fully human. The cruelty of it all still takes my breath away; how could society reduce me, a living, breathing person, to something so disposable? I became a creature starved for affection, my heart aching with a hunger that could never be satisfied. Any morsel of kindness, any scrap of friendship, became a lifeline I would grasp with both hands, regardless of the consequences. This desperation, this raw need to belong, left me open to exploitation and further harm. This traumatic experience was just one in a litany of horrors that peppered my young life. Repeatedly, I found myself at the bottom of the heap, a bottom feeder in the murky waters of society's indifference. I scrabbled and clawed for any hint of affection, any sign that I mattered to someone, anyone.

As I reflect on my experiences to conclude this section, I am filled with a mix of sorrow for the child I was, anger at the injustices I faced, and hope for a better future. My story is not just one of survival but of the indomitable human spirit that refuses to be diminished by the narrow views of others. It is a testament to the power of compassion, understanding, and the recognition of the inherent dignity in every human life. I am struck by the harsh reality and consequences of societal attitudes towards disability. The humiliation and punishment I have endured as tools for control reflect a broader societal belief that we, disabled children, are inherently problematic. This attitude has not only inflicted profound emotional trauma on me but also reinforced harmful stereotypes, creating a vicious cycle of marginalisation. I have highlighted how societal attitudes permeate every aspect of my life, from school to social interactions, effectively isolating me and denying me the fundamental rights of dignity, respect, and inclusion. The persistent Othering and dehumanisation I have experienced reveal a society grappling with accepting diversity in human experience and embodiment, often at the cost of the well-being and self-worth of its most vulnerable members. My review of the literature demonstrates that society is still grappling with the concept of disability. The pervasive nature of ableism and its dehumanising ideology manifests in exclusion, control, and abuse, creating a discourse that portrays me as a 'problem' to be fixed or hidden away rather than as a valuable member of society deserving of respect, dignity, and equal opportunities.

My Disabled Identity

In this section, I consider the complex journey of my disabled identity formation to provide insight into the multifaceted process of developing a disabled identity in a society steeped in ableist attitudes and historical prejudices. I explore the impact of medical discourse, societal norms, and childhood trauma on identity formation, including the development of Dissociative

Identity Disorder (DID) as a coping mechanism. I make visible the challenges of navigating a world not designed for disabled individuals, the process of internalising and eventually challenging ableist attitudes, and the importance of understanding disability history in forging a positive self-identity. I discuss a journey from fragmentation to self-acceptance that illuminates the resilience of the human spirit and the power of reclaiming one's narrative. My account not only provides a window into one disabled person's experience but also offers valuable insights into the broader struggles and triumphs of the disabled community.

Eugenic ideologies loomed large, casting long shadows over the medical practices and cultural narratives of the time of my birth. It was an ideology that constructed disability as something negative that needs to be eliminated or controlled for the supposed good of society (Clifton, 2020). Eugenics created the 'normal' human, an 'ideal' of which I did not fit. Laws and policies of this era sought to restrict my rights as I was deemed unworthy (Altenbaugh, 2006; Ploeger, 2018). Each person has their own distinct identity that sets them apart from others. Identity is a complex, ever-changing aspect of who we are. It is shaped by our experiences, relationships, and personal growth and continues to evolve throughout our lives as we strive to understand ourselves better (Ahmed, 2022). This identity is formed by identifying with others who are similar to us; however, I had no one to whom I could relate. My identity was socially constructed and influenced by institutional forces (Ahmed, 2022). I have lived in a world striving to create a globalised society free from disability (Wiseman & Watson, 2021), allocated an Othered identity perceived as different, inferior, and marginalised by society (Ahmed, 2022), as evidenced in Figure 14:My pathologised identity. The shock and horror reactions suggest my very existence is seen as a medical issue rather than simply human diversity. Othering goes beyond just recognising differences between groups. It actively creates and reinforces social hierarchies by elevating some identities as normal/superior while denigrating others as abnormal/inferior. I had been relegated to 'human in principle only' (Mitchell, 2020, p. 5). This process of Othering had negative consequences for me in terms of how I was perceived and treated in society (Jones et al., 2020). The feeling of not belonging (Othering) started at an early age, a complex interplay between societal labelling, personal identity, the powerful negative impacts of stigma and internalised oppression (Jones et al., 2020).

Figure 14:My pathologised identity.

> *I entered the world as a tiny, incomplete baby lying beside the corpse of my genderless twin. The warmth and safety of my mother's womb were gone. Instead of being placed at my mother's breast, where I might have found comfort and love, I was thrust into the harsh night. Only my father's eyes looked down on me with something other than indifference. His gaze held a mix of fear and determination, a silent promise that he would not abandon me to the fate others deemed appropriate.*
>
> *The cold, sterile environment of the hospital replaced my father's loving arms. As I opened my eyes to this new world, I was met not with smiles and joy but with shock and horror etched on the faces around me. The nurse's expression was not one of compassion but of something akin to disgust.*

I was so loathed that my father was encouraged to let me die, *"Leave me at the hospital to be disposed of and go home to his wife and 2-year-old daughter and move on with his life."* They wanted to take my life from me before it had even begun. *"The doctors had stolen my cute, adorable baby status and distorted it into a non-human collection of 'deformities.'"* They took from my parents the joy of a new baby, presenting them with a negative perception of disability. Doctors were my most powerful influencers; their view that some humans are more 'disposable than others' (Goodley et al., 2020, p. 5) reinforced the idea that I was somehow 'less than' from the very beginning (Goodley, Lawthom, et al., 2020). The world I was born into was one where disability and imperfections were met with stigma and disdain, to be hidden away rather than cherished (Burch, 2018). Doctors hold the lives of disabled children in their hands, and such power is open to abuse.

Having survived this onslaught meant that I would have to be normalised. I remember how I was subjected to many operations without consideration of my humanness; the priority was always normalisation. This lack of respect is evident as I reflect on my doctors: *"The doctors that keep trying to mend me always tell Mummy that I will probably die, but they mend me anyway."* My identity was formed around a medical lens, which created the medical discourse of defective, 'abnormal,' disease, cure and rehabilitation (Marks, 1997; Oliver, 1990; Zaks, 2023) and my socially constructed narrative of "invalid', 'cripple', 'spastic', 'handicapped' and 'retarded' (Retief

& Letšosa, 2018, p. 3). My body was not acceptable, so the priority was my impairments rather than my personhood or humanity (Altenbaugh, 2006).

From the very beginning, as Jayara (2020) poignantly notes, disabled children are labelled and classified, often in dehumanising ways. The constant undercurrent of being viewed as ‘different’ or as something to be ‘fixed’ left an indelible mark on my psyche and identity. Unpicking and understanding my journey of identity formation as a disabled child has been complex and challenging. As a result of the multiple traumas that I was exposed to, I developed multiple personalities and their identities. Throughout my stories, I refer to them as *"voices"* and *"imaginary friends."* To help me understand who I was and how I was constructed, I spent some time creating a framework, which I have documented and included in Appendices 4-7. This framework reflects the multifaceted and sometimes contradictory experiences that have shaped who I am. This is a personal framework; however, I hope, one day, to subject it to rigorous academic scrutiny, as I believe it could provide valuable insights into the formation of disabled identities beyond the scope of this work. I have chosen to include it in the appendices for two reasons. Firstly, it serves as a testament to the inherently messy nature of my disabled identity, reflecting the complex and often contradictory experiences that have shaped my sense of self. Secondly, I harbour the hope that one day, whether by my hand or that of another researcher, this framework will be helpful for others to understand how they are socially constructed. The potential for future exploration and validation of this work excites me (see Appendix 4).

I had been subjected to sexual abuse for many years, and when it ended, I missed that feeling of being important to someone. I still had my ‘voices,’ God, and my dog to talk to, but I missed that human touch. My strongest and most influential ‘voice’ is my protective persona, and I am a young male. In Life Story 5, my protective persona takes over during a confrontation. Evidential in story five: *"he (my protective persona) had her pinned to the floor with the scissor blade at her throat when I came around."* In story 3, during a violent incident, I describe feeling disconnected, *"I was disconnected, disassociated."* I would have to say my protective persona has had a significant impact on the construction of my thesis. He refers to my childhood self in the third party to separate me from that vulnerable, pathetic child to try to protect me from her trauma. In Life Story 3, I describe our comforting *"angel"* persona that appears during overwhelming situations, *"This voice... (persona) was like an angel. I say voice, but she never spoke, only* *hummed soothing and melodiously."* My stories portray the complex internal and external struggle I had with my world and highlight my struggle for connection and a journey toward healing, offering a profound exploration of what it means to navigate life after trauma. My various personas served different protective and coping functions. This fragmentation was a coping mechanism which led to difficulties in maintaining a consistent sense of self across different situations and experiences. The way my protective persona refers to our childhood self in the third person acknowledges the complex relationship I have with my past experiences.

The development of my voices/personas is acknowledged as a coping strategy to deal with trauma and abuse. Şar (2017) suggests that dissociation involves the disruption of usually integrated mental functions such as consciousness, memory, identity, and perception, which, in extreme cases, can lead to Dissociative Identity Disorder (DID), characterised by the presence of two or more distinct personality states within a single individual (Dorahy et al., 2014). The development of my DID was the result of a complex interaction between my continual traumatic childhood experiences, and experts in the field suggest these are connected to developmental processes and neurobiological factors (Herman et al., 1989; Okano, 2021). DID provided me with a way to cope with experiences that might have otherwise been too traumatic to process. Despite the challenges, the development of my coping mechanisms also demonstrates remarkable resilience. This strength became an important part of my identity.

The 1960s and 70s were a time of significant change in how disability was perceived. However, the challenges I faced were deeply rooted in long-standing ableist prejudices and misconceptions. Ableism constructed my disability and continues to construct disability as an inferior, less-than-human state (Campbell, 2009; Goodley, Lawthom, et al., 2020; Goodley & Lawthom, 2013; Hughes, 2015) (Campbell, 2009). I have discussed how disabled people are shackled to the histories of eugenics that perpetuate long-standing prejudices and how *“I clung to my history as if it were a lifeline.”* At this point, I was overwhelmed by the cruelty that chained me to the historical narratives that branded me as a burden and hated (Bauman, 1997; Burch, 2018; Grue, 2016; Yates, 2015). Yet here I am, trying to write myself into the very history that disavowed disabled childhoods. I do this as a reflexive disabled scholar to reconstruct my identity (Curran & Runswick-Cole, 2014). Knowing the history of disability helped me understand how and where society placed me as a disabled child and woman in society and why this place was on the fringes of society. So, while I call for a society that challenges this, knowing my history enabled me to forge a collective identity to become a disabled woman, part of a community to which I was proud to belong. Our history matters to me because it provides a sense of identity that empowers me to advocate for myself and others, enriches my understanding of our social and cultural impact, challenges stereotypes, advocates for education free from fear, hate and pain and champion our rights and inclusion. To confront the historical attitudes that led to my segregation and marginalisation in education Armstrong (2007).

Goodley (2014) examines the societal structures and power dynamics that contribute to the marginalisation of disabled people. He discusses how disabled people often must navigate a world not designed for them, leading to various coping strategies. Campbell (2009) outlines how disabled people are frequently forced to negotiate their identity and worth in an ableist society. She argues that this constant negotiation can lead to internalised ableism and the development of coping mechanisms. In story five, my psychologist's insistence that *"I had to accept my disability and learn to like myself; how could I expect others to like me if I did not like myself?"* put the onus on me to change rather than address the prejudices of others. Deeply ingrained ableist attitudes affected nearly every aspect of my school experience, from social interactions to academic opportunities and disciplinary approaches.

I found myself internalising these ableist attitudes, engaging in what Campbell (2009) describes as ‘defensive Othering’, distancing myself from other disabled children in a misguided attempt to align with able-bodied norms. The emotional toll of this internal struggle was immense. Richardson et al. (1964) highlight how living in a society that rejects disabled children can lead to negative self-evaluations. I felt this acutely, constantly grappling with the knowledge that I would never meet the aesthetic expectations of ‘normalcy’ so prized by society. This realisation was both heartbreaking and isolating. Erikson (1968) suggests identity formation is a psychosocial process influenced by our interactions with our environment. For me, these interactions were complex and often painful, but they also fostered a resilience and determination that would become core aspects of my identity.

The early onslaught of social rejection demonstrated how children soon learn who is a valuable member of society and use this information to find their identity and place in life (Moriña & Carnerero, 2022). Acceptance is a crucial element of successful inclusion, so for me, my identity as a complete person was called into question rather than being accepted without doubt (Luborsky, 1994). Evidenced throughout my stories is my shapeshifting identity, which was developed to deal with the inconsistent messages sent out by the adults and children in my life. The harsh reality of being ostracised by my peers was painfully evident in story 1 when I was three years old; I remember, *"The other children don't like me and won't play with me. They don't invite me to their birthday parties, and they say my mouldy legs smell."* This rejection aligns with Ahmed's (2022) Social Exclusion Framework, which highlights how disabled children often face othering processes leading to marginalisation and exclusion. The impact of this exclusion on my identity formation was significant. I began to internalise the idea that I was different and undesirable, as evidenced by my self-imposed isolation, *"I play by myself, so they don't have to smell my poorly legs."* This behaviour reflects Jóhannsdóttir et al.'s (2022) observations on how disabled children often internalise ableist norms, resulting in shame and self-isolation. I started to view myself through the lens of societal prejudices, shaping a fragile and uncertain self-image.

Adding to my confusion were the conflicting messages I received about my future. *"Daddy said I will be a teacher when I am big. Mummy doesn't think I will 'cause I will be dead."* This dialogue exemplifies the complex and often contradictory narratives disabled children receive about their worth and potential, as discussed by Curran & Runswick-Cole (2014). These mixed messages left me grappling with an unclear sense of my place in the world and my prospects, further complicating my identity formation during these formative years. Navigating the turbulent waters of identity formation is challenging for any child, but for those with disabilities, it is a journey fraught with additional complexities and emotional hurdles. As I reflect on my own experience, I am struck by the profound impact that societal attitudes and expectations had on my developing sense of self.

My journey was marked by a constant negotiation between societal expectations, medical interventions aimed at ‘normalising’ my body (as discussed by McLaughlin & Coleman-Fountain, 2014), and my emerging sense of self. It was emotionally exhausting yet also transformative. As

Ahmed (2022) describes, disabled children navigate complex processes of exclusion, marginalisation, and identity negotiation in society. This navigation, while challenging, laid the foundation for my more nuanced understanding of disability, one that recognises both the societal barriers and the unique perspectives that disability can offer. Forber-Pratt & Zape's (2017) model of psychosocial disability identity development, focusing on acceptance, relationship, adoption, and engagement, resonates deeply with my experience. It was a journey of gradual self-acceptance, of forging relationships with others who understood my experiences, of adopting a disability identity on my own terms, and of engaging with the world as my authentic self. I acknowledged the complex interplay of social, cultural, and institutional forces that have shaped my understanding of my history and identity (Wertsch, 1991). As Holt (2003) argues, ‘people do not accumulate their experiences in a social vacuum’ (p. 25).

People are reassured by the accuracy of their vision of the world (the status quo) and fight to defend the beliefs that have shaped their identity and values (Storr, 2020). When you have grown up with an identity that is in constant flux, memories of trauma can remain untold because the person feels unsafe and threatened by them (Hung, 2020). Finally, I can use the fragments of memory that anchored me to my childhood, trauma, places, and people to reconstruct my self-identity through my storytelling (Hung, 2020). As a child, I refer to the ‘voice’ that kept me from reliving the trauma as my memory keeper, part of my dissociative identity disorder. The power to release these memories has helped me to make sense of my identity and turn them into teaching moments. My memories make my existence real, asserting my place in humanity. (Hung, 2020). My stories reclaim, validate and make me proud of my disabled identity, ‘Story is central to human understanding - it makes life liveable because, without a story, there is no identity, no self, no other’ (Lewis, 2011, p. 505). My stories represent how disabled children ‘create a human identity as a life in search of its own history’ (Ricœur, 1990, p. 180).

In conclusion, reflecting upon the formation of my disabled identity, it becomes evident that this process has been a complex tapestry woven from societal attitudes, personal experiences, and the profound impact of childhood trauma. My journey through Dissociative Identity Disorder (DID) illustrates how coping mechanisms, whilst protective, can also complicate one's sense of self. The pervasive ableist prejudices and societal norms I encountered throughout my life have significantly influenced my internal narrative, often resulting in a fragmented identity grappling for acceptance.

Understanding the historical context of disability has been crucial in my identity formation, not only informing my experiences but also empowering me to challenge long-standing misconceptions and advocate for a more inclusive society. Through the act of reclaiming my story, I have begun to reconstruct my identity in a manner that validates my experiences and fosters pride in my disabled self. This journey mirrors the broader struggles faced by disabled children in navigating a world that often marginalises them. Through storytelling and introspection, I have come to embrace my identity, and an ongoing process of self-discovery continues to shape my understanding of disability, enabling me to advocate for myself and others in the pursuit of acceptance and inclusion. Ultimately, my life underscores the importance of recognising the multifaceted nature of disabled identity formation and the power of personal storytelling in reshaping societal perceptions of disability.

Bullying, Violence, and Hate

When I began my thesis, bullying was my most prevalent childhood memory, and my stories do indeed discuss moments when adults and children bullied me. It was more important for me to discuss bullying than disability. However, after tactful and inciteful guidance, I realised the importance of disability as a social construct and how the cultural imagining of disability dictates the experiences of disabled children, how they perceive and develop their identity and how others accept and perceive them. In this section

In order to bully or commit acts of violence against disabled children, they are first Othered and dehumanised (Provis, 2012). From a human perspective, Othering and hate manifest as feeling hated. When I think back on all my stories, I remember the feeling of being hated by adults and children. I internalised this hatred, sure that I had done something to deserve it. I was equally convinced that if I were ‘normal,’ everyone would like me. I am aware that hate is a strong word, and today, it may be considered hostile to suggest that disabled children are hated; however, as Burch (2018) confirms, disabled people are hated. However, I am not saying all disabled children are hated. The disabled children I met in hospitals resented me because I was too normal. It was hard as a child to cope with the fact that so many people hated me and could hurt me with no remorse (Provis, 2012). The cultural imagining of disability provides the context in which disabled children are bullied and exposed to violence and hate. Michener(2018) argues that ideologies that promote hate exploit fear. By amplifying fears about outgroups, influential adults can manipulate children into adopting hateful beliefs and behaviours. This manipulation can create a feedback loop where fear and hate reinforce each other (Michener, 2018). The identities of disabled children are often constructed to reinforce negative perceptions of disability rather than recognise the child's full humanity (Runswick-Cole, 2014). I lived my life chasing an elusive 'normal,' the lack of which I believed was the reason I was hated, bullied, and subjected to violence.

Michener (2018) further argues that hate acts as both a tool for gaining/maintaining power and a consequence of power imbalances. I find this hard to equate to my life because I was already powerless. I could not understand what they had to gain. The power imbalance was well established; they hurt me repeatedly, and I did nothing to stop them. In fact, I kept going back for more. The next person to show a moment of care, I was hopeful or gullible. Inevitably, they hurt and abused me, and so the cycle of violence continued. I never lost hope. I remember enthusiastically immersing myself in the work of Freire (2005). There were many memorable and admirable moments in his work. Still, the one that made sense of my suffering was that dehumanisation is 'not a cause for despair but for hope' (Freire, 2005, p. 91), which drives the pursuit of humanness denied by injustice. Hope is not something we wait for; it is something we fight for; 'dialogue cannot be carried on in a climate of hopelessness' (Freire, 2005, p. 92). Of course, this vision of hope is idealistic. There is no escape from the fact that dehumanising disabled children undermines their identity and well-being by perpetuating harmful stereotypes and fostering discrimination (Andrighetto et al., 2014). I would be lying if I said I put up with the dehumanisation because I saw it as a driver of hope. My only driver as a child was survival, and that hurt.

Society and educational spaces are dominated by power imbalances that demand social control (Smith, 2016; Volk et al., 2014). Humiliation was historically, in my era, seen as a legitimate tool for maintaining hierarchical social order (Lindner, 2001). Bullying and hate crimes marginalise identities by targeting people based on perceived differences, reinforcing societal stigmas, and causing psychological trauma, social exclusion, and the internalisation of negative stereotypes (Englander, 2007). Hate crimes are ‘less concerned with individuals as it is the boundaries between groups’ (Burch, 2021, p. 76). The political gain is in reinforcing these group boundaries and power dynamics (Burch, 2021).

Hate is not merely an individual emotional response but is deeply embedded in societal structures and power dynamics, perpetuating discrimination and marginalisation of disabled children.

Figure : 15 My first adult initiated beating

> I am a tiny four-year-old child trapped in a moment of fear and helplessness. I struggle against the force pushing me down. My pleas for release were met with anger and punishment. Each strike was a harsh reminder of my perceived disobedience, my cries echoing in a space where authority overshadowed my voice. The words were as painful as the blows, reinforcing a narrative of shame and submission. At that moment, I felt small and powerless, caught in a world where my truth was silenced by intimidation. “Big crying sounds shook my body. “What did I do?” I gasped between sobs. She didn’t answer me; she just squeezed me tight, and we cried together.”

The painful memory of my first adult beating, summarised in Figure 15, is why hate is a context that facilitated the bullying and violence I endured. The literature tells me that hatred towards disabled people is deeply ingrained in the context in which disabled children are hated, bullied, and subjected to violence.

Navigating the complex landscape of identity and difference leaves me pondering the very essence of what it means to be human. Davis (2002) suggests that identity is fluid, and this fluidity makes us fundamentally human. It’s comforting, in a way, to think that difference is the only constant in our identities. Yet, there’s a contrasting perspective that weighs heavily on my mind.

Lingaas (2021) paints a more troubling picture. The idea that dehumanisation involves imposing a dehumanised identity on disabled children feels like a harsh reality. Figure 16: Instances of Dehumanisation provide evidence of some of the dehumanisation I experienced at school. It marks me as fundamentally different, inferior, and even a threat (Haslam, 2006). This process of dehumanisation builds invisible walls between us, disabled and non-disabled children, making our identities appear incompatible (Akbulut & Razum, 2022). It is disheartening to see how these boundaries lead to treating some groups as inferior.

Figure 16: Instances of Dehumanisation

Dehumanisation

"There must be another spastic somewhere who would loooove her fat arse and floppy tits.

This statement uses derogatory language to reduce me to negative stereotypes and physical attributes. It strips away my individuality and humanity, treating me as an object of ridicule rather than a person deserving of respect. By focusing on these superficial and derogatory aspects, it denies my identity and worth as a human being, making me feel isolated and humiliated.

"Here she is, the spastic savage dog, stand back. She bites and pisses up the wall."

This statement uses animalistic language to describe me, stripping away my human qualities and dignity. It portrays me as a creature to be feared and mocked, rather than as a human being deserving of respect and empathy. By reducing me to an animalistic stereotype, it denies my identity and worth, making me feel isolated and humiliated.

"You are so dead; piss on my shoes, you little shit."

This threat is dehumanising because it uses intimidation and derogatory language to instil fear and assert power over me. It disregards my humanity and reduces me to an object of aggression.

After sharing my stories and personal insights, I want you, the reader, to know that it's okay to feel uncomfortable. The bullying, the physical attacks, and the betrayals are not easy to read about. But they are part of my truth, and I have shared them with you in the hope that you will understand the depths of what it means to be different in a world that often fears what it doesn't understand. Disassociate identity disorder (DID) is frequently viewed as a 'highly creative survival technique because it allows people to endure hopeless, overwhelming circumstances and thus preserve some areas of healthy functioning' (Lev-Wiesel, 2005, p. 379). I refer to this as my trauma-induced identity fragmentation, and I am sure without this, I would not be here to tell my stories.

Conclusion

In reflecting upon this discussion, I have come to realise the profound and far-reaching impact that bullying has on disabled children, extending well beyond isolated incidents. Through my personal narratives and the scholarly insights woven throughout, we have seen how the bullying of disabled children is not merely a matter of individual cruelty but rather a symptom of deeply entrenched ableist attitudes and systemic discrimination. The dehumanisation and Othering that disabled children face create a fertile ground for bullying, violence, and hate. These experiences are not just painful moments in time but formative forces that shape our sense of self, our relationships with others, and our place in the world.

The contexts in which disabled children are subjected to hatred, bullying, and violence result from a tapestry woven from cultural, social, and systemic threads. The cultural imagining of disability, which frames disabled children, perpetuates a narrative that fosters fear and loathing. Social attitudes, dehumanising language, embodiment, and the over-reliance on 'normal' filter into the educational systems meant to support disabled children. Schools and educators often fail to address the root causes of bullying and violence, instead reinforcing existing power dynamics that marginalise disabled children. This systemic violence manifests not only in overt acts of bullying but also in the more insidious denial of recognition, where disabled children are often treated as less than human. Such dehumanisation exacerbates their isolation, making them targets for ridicule and abuse.

Perhaps most strikingly, this discussion has revealed the resilience and adaptability of disabled children in the face of such adversity. The development of coping mechanisms, such as my own experience with Dissociative Identity Disorder, speaks to the incredible strength required to navigate a world that often seems intent on breaking us. Yet, it also underscores the urgent need for societal change in a world where such extreme coping strategies are not necessary for survival.

The interplay of cultural narratives, social attitudes, and systemic structures created a hostile environment in which I was subjected to hatred, bullying, and violence. However, my experiences do not define my worth or potential. By challenging these entrenched narratives and advocating for a more inclusive society, we can begin to dismantle the barriers that perpetuate discrimination. The stories shared herein serve not only as a testament to resilience but also as a call to action for greater understanding and compassion towards disabled people, fostering a world where diversity is celebrated rather than feared.

As I reflect on my interactions with the environment and the people around me, I realise how profoundly these moments contribute to my embodied understanding of my place in the world. I am learning to embrace these experiences, seeing them not as deficits but as opportunities to redefine and expand what it means to be human. The contemporary counternarratives I engage with, as discussed by Goodley et al. (2014), inspire me to challenge traditional notions of humanity and to explore new ways of relating and living.

My lived experience provides a unique and valuable perspective on how societal attitudes and structures can perpetuate harm while also highlighting the resilience and adaptive strategies developed by those navigating these challenges. This integrated understanding of my journey demonstrates the importance of considering diverse ways of knowing and experiencing the world when addressing issues of disability rights, inclusion, and social justice. The persistence and resurfacing of traumatic memories haunt people like ghosts (Adji, 2021). These memories are considered part of our cultural memory. Here, I bring my traumatic events and my memories into the present. The process we have shared has been the emotional reflection and critical assessment of my life, which, as Adji (2021) suggests, can be healing and lead to epiphanies.

Ultimately, this discussion tells us that the bullying of disabled children is not an isolated problem but a reflection of broader societal attitudes towards disability. It calls for a fundamental shift in how we perceive, discuss, and address disability in our culture, education systems, and interpersonal interactions. By sharing these difficult truths and personal experiences, I hope to contribute to a growing understanding that can lead to more inclusive, compassionate, and just treatment of disabled children in all aspects of society.

Chapter 7: Conclusion

In concluding my research, I have explored the complex interplay of factors that create contexts where disabled children face hatred, school violence, and bullying. Through an autoethnographic lens, I have examined how these experiences are deeply rooted in broader sociocultural, historical, and systemic factors rather than merely being the result of individual psychological issues. My research highlights the pervasive influence of ableism, a societal attitude that views disability as a deviation from the norm. This perspective perpetuates stereotypes and marginalisation, making disabled children vulnerable to bullying. By examining these attitudes, I have sought to challenge the entrenched cultural norms that devalue disabled lives.

The educational system plays a crucial role in reinforcing ableist ideologies. Teachers and institutions often unconsciously uphold societal expectations of 'normalcy', which marginalises disabled children and students. My analysis reveals how these power dynamics contribute to a hostile environment where disabled children are bullied and isolated. Historically, disability has been framed through medical and deficit models, positioning disabled people as 'less than' or 'other'. This historical context continues to influence current attitudes and policies, creating environments where disabled children are seen as ‘anomalies’ rather than valued members of the community. Language is a powerful tool in shaping perceptions of disability. The use of derogatory terms and ableist microaggressions dehumanises disabled children, making it easier for others to justify bullying and violence against them. My research underscores the need for a more inclusive dialogue around disability.

Systemic barriers, including inadequate policies and lack of inclusive practices, further isolate disabled children and expose them to increased risks of bullying. These barriers are deeply embedded in societal structures that prioritise able-bodied norms. Neoliberal ideologies, which emphasise individual responsibility and economic productivity, marginalise disabled children by framing them as 'negative human capital'. This perspective devalues disabled lives and contributes to a societal narrative that sees disability as a problem to be solved. My research calls for a comprehensive approach to addressing the bullying of disabled children, one that challenges existing power structures and promotes a more inclusive and empathetic understanding of disability. By sharing my lived experiences and maintaining a reflexive approach, I hope to inspire change and foster environments where all children, regardless of ability, can thrive.

Thank you for engaging with these difficult stories and for your willingness to walk this path towards understanding and change. By sharing my story, I aim to challenge and expand the dominant narratives about disability, emphasising the richness and complexity of our identities beyond mere labels.

Epilogue

In the vast, overwhelming world where shadows loom large and voices often drown out the whispers of the small, I searched for my identity amidst cruelty and confusion in a world that feels unwelcoming. This autoethnography has been my story and the story of countless children and young adults like me who navigate life with disabilities, our voices silenced by misunderstanding and fear. It’s not just our plight; it is a reflection of society’s ability to embrace diversity and nurture everyone's potential.

Imagine being a child, your world filled with confusion and uncertainty, amplified by the challenges of a disability. Each day feels like a battle, not just against my own limitations but against the prejudices and misconceptions of others. I am not asking for pity or special treatment. I simply yearn to be seen, heard and accepted for who I am. I often find myself in a paradox, invisible in my needs and desires yet hyper-visible in my differences. I carry the weight of societal expectations, frequently crushed under the pressure to conform to a 'normal' that doesn’t accommodate my unique experiences.

To the educators reading this, I urge you to pause and reflect. We do not arrive in your classrooms to test your patience or disrupt your plans. We come with hopes, dreams, and a desperate need for understanding. Your actions, words, and attitudes shape not just our educational experience but our sense of self-worth and belonging in this world. It’s not about extensive training or specialised skills. It’s about basic human empathy, patience, and the willingness to see beyond our disabilities to the children within. Your classroom might be the only place where we feel truly seen and valued. What an immense responsibility and opportunity that is.

For everyone else, it is time to challenge your preconceptions. Disability is not a monolith; it is as diverse as humanity itself. Each child with a disability is unique, with their strengths, challenges, and potential. By perpetuating stereotypes or looking the other way, we become complicit in our marginalisation. Let us create a world where difference is not just tolerated but celebrated, where a disabled child can dream as big as any other child, knowing that society will support and nurture those dreams, where inclusion is not an afterthought but the foundation of our communities.

In the end, this is a story about the transformative power of acceptance and understanding. It's about recognising that every child has something valuable to offer the world. It is about building a society that is richer, more compassionate, and more vibrant because it embraces all of its members. As you reflect on this, I encourage you to ask yourself: How can I contribute to creating a world where every child feels heard, valued, and empowered? The answer to that question could change not just one life but the very fabric of our society.

Academic Conclusion

My autoethnography has been a complex 'transformative methodology for understanding…' (Adams et al., 2021, p. 215) and a powerful tool for personal reflection (Bochner & Ellis, 2016; Denzin, 2003; Doty, 2010; Ellis, 1999; Ellis & Bochner, 2000). Now, my understanding of my childhood comes from knowledge, not pain and speculation. I have, through autoethnography, made visible my social reality and the consequences of passing down hate-filled ableist ideologies to children in educational institutions. Hate, bullying and violence in many forms are a part of our lives and something that needs addressing in schools. Evocative autoethnography enabled me to present the many layers of my research through analysis and reflexivity (Ellis et al., 2011), a process that did not just rely on the data to tell the story (Keleş, 2022). My stories were chosen to stimulate thinking and problem-solving, to educate and give meaning to marginalised lives (Ellis, 2000; Rao, 2006). They join a small, insufficient stock of stories that challenge the comparatively abundant stigmatising narratives that misrepresent disabled lives and champion ableist injustices (Daen, 2019; Tarvainen, 2019). I use stories as sources of empowerment and resistance to counteract authority domination (Ellis & Bochner, 2000). Autoethnography extracts the meaning from experience and locates it in dominant expressions of discursive power (Bochner, 2000; Ellis & Bochner, 2000; Neumann, 1996). I placed myself at the centre of the research to extend cultural understanding through lived experiences (Wall, 2008). I have diverted the focus from a purely clinical perspective to one that includes the social and cultural dimensions of disability that empower disabled voices. By using autoethnography, I assert the importance of disabled people's voices in academic discourse, challenging the traditional power dynamics in research where disabled people are often subjects rather than active participants. I am not just adding another voice to the field; I am helping to reshape how disability is understood, studied, and addressed in both academic and practical contexts.

While my research does not claim that autoethnography alone can change policy, one story can provide unique insights into the challenges faced by disabled children and offer a platform for marginalised voices. One story is not a single voice; when added to others, a collective narrative emerges, amplifying the experiences of disabled children and adults. This accumulation has the potential to foster empathy and understanding, helping disabled children to understand that they are not alone in their struggles. Ultimately, the power of personal narratives lies in their ability to create a sense of community and solidarity. By sharing my stories, I can empower others to voice their experiences, contributing to a broader understanding of disability and its challenges. Together, these narratives can inspire change and promote a more inclusive society. I have made visible the ‘often silent and political tensions underneath’ inclusive education (Mizzi, 2010, p. 2). Such historical voices are invaluable, enabling researchers, policymakers, and society to look back and find a way to move this static debate forward. Today, we are beginning to collect the voices of disabled children (Ktenidis, 2020; Liddiard et al., 2019; Souza, 2023) and paying attention to disabled childhoods (Curran & Runswick-Cole, 2014; Runswick Cole et al., 2018). Times will only change when these voices are acted upon; the more that are collected, the louder the voice.

Autoethnography provided me with what Chang (2016) calls ‘easy’ access to primary data and holistic, intimate perspectives with familiar data. However, accessing past traumas was far from easy. These are not stories of 'woe is me;' they are of hope, something that, no matter what society did to me, I never lost. I return to Freire (2005) to explain how important it is to have hope, 'Nor yet can dialogue exist without hope. Hopelessness is a form of silence, of denying the world and fleeing from it' (Freire, 2005, p. 91). Freire (2005) helped me understand why I still had faith in humanity and hoped to be welcomed into it no matter how much it hurt. 'Dehumanisation is not a cause for despair but for hope' (Freire, 2005, p. 91), which drives the pursuit of humanness denied by injustice. Hope is not something we wait for; it is something we fight for. These stories and subsequent narratives thrive on a hope for a better future for disabled children in education. 'Dialogue cannot be carried on in a climate of hopelessness' (Freire, 2005, p. 92). My analysis is this dialogue, reflexive thought, thinking of a transformative reality where disability is 'normalised' and accepted. How many times do we (disability studies) have to put forward an argument for change before our hope for a utopian world in which we (disabled adults and children) are welcomed from birth before our hope diminishes?

Evocative stories for Ellis and Bochner will always resist analysis and their belief that stories, by their emotional and subjective nature, are made to be used, told, and retold, not analysed (Bochner, 2000; Ellis & Bochner, 2006). I have embraced stories as a powerful method of communication to share my experiences and asked the reader to challenge their understanding of a disabled childhood (Si, 2016; Yoder-Wise & Kowalski, 2003). I have used the power of the story and its ability to stimulate thinking and problem-solving as an educational tool, welcoming the reader into my community.

I could embrace the power of the story and represent my final story, a story of fiction, a social reality that looks at the literature and offers an alternative. The 'happy ever after' that gives a person a second chance and leaves us feeling good about the world and our place in it. Yes, my stories are hampered by memory. Still, I am not presenting my life as a fantasy that absolves me from a moral obligation to be truthful. Being truthful is very important to me, as action can be taken only by speaking the truth (Lapadat, 2017). My stories give insight into my world and place as an 'othered,' 'I wonder if our stories help us imagine how we could do disability differently' (Mucina, 2010, p. 81).

My stories clearly demonstrate the consequences of hate and its ability to dehumanise disabled children. The ableist cultural imagining of disability fails to challenge the bullying of disabled children, and others would say it fails to challenge hate crimes against disabled adults (Burch, 2018, 2021; Ralph et al., 2016; Sherry, 2016). Historically, placing life stories and providing cultural context challenges the 'disabling vortex' produced by those who spin the truth to misrepresent social reality (Goodson et al., 2017, p. 5). I have intended to help the reader challenge the neoliberal, ableist imagining of disability by personifying disabled children and adults so that when they meet a disabled person, they will metaphorically shake their hand (Jeppsson Grassman et al., 2012). Until these stories and others like them are told and analysed, the future is set to replicate the past (Jeppsson Grassman et al., 2012).

In a world that overlooked my existence, I silently bore the crushing weight of isolation and despair, longing for a simple touch of love and acceptance. While my dreams faded into whispers unheard amidst the deafening silence of indifference, I was left wondering if I would ever truly belong. I will continue to seek love and understanding, believing that one day, my dreams of a more inclusive world will be heard and celebrated. My research is unique, led by lived experience and knowledge, and is more than an empirical study.

Contribution to understanding school-based violence.

As a disabled researcher with decades of personal experience and academic study, I have witnessed firsthand the pervasive violence and discrimination against disabled children in our education system. My lived experiences and my research spanning five decades reveal a disturbing lack of progress in creating safe, inclusive environments for disabled children (Goodley et al., 2020; Ktenidis, 2020, 2022; Liddiard et al., 2019). My autoethnographic research makes a significant contribution to understanding school-based violence against disabled children by providing a nuanced, insider perspective on the complex sociocultural factors underlying this phenomenon. By framing personal narratives within disability theory and sociocultural perspectives, my study challenges conventional educational and psychological paradigms of bullying, instead positing it as a manifestation of deeply ingrained ableist attitudes in society. I introduce the concept of 'cultural imagining of disability,' which shapes societal perceptions and treatment of disabled children, often leading to their dehumanisation and marginalisation in educational settings. My approach reframes bullying and discrimination against disabled children as forms of systemic violence, highlighting how educational spaces can become sites of dehumanisation where disabled children's bodyminds and identities are constructed as ‘Other’.

The silence surrounding the hatred and violence inflicted upon disabled children in schools is thunderous, a silence that has festered for far too long, leaving countless disabled children to suffer in the shadows. Research that challenges governmental rhetoric on inclusive education may be overlooked or unfunded due to politically driven research agendas, indicating a lack of progress (Liddiard et al., 2019). My autoethnographic study serves as a call to action, offering a raw, insider's perspective that challenges conventional wisdom about bullying and humiliation in schools. The "cultural imagining of disability" I introduce is a critical examination of how adults have failed disabled children, allowing toxic perceptions to permeate educational spaces and transform them into arenas of discrimination and cruelty. My nuanced, insider perspective challenges the reader to view bullying and humiliation as acts of violence that profoundly impact the well-being of disabled children. The taxonomy of violence I have developed is not merely a list; it is a reflection of our collective failure, exposing how schools have become sites of dehumanisation where disabled children's bodyminds and identities are dismantled and reconstructed as "Other," making them targets for socially sanctioned violence.

The binary 'us' and 'them' upon which neoliberal social policy is premised affects the lives of disabled children (Runswick-Cole, 2014). My research is not only important; it is urgent, vital, and long overdue, offering hope for those who have suffered in silence for far too long. It serves as a wake-up call to a society that has overlooked the suffering in its midst. It is my plea for safe havens where disabled children can thrive without constant fear, my demand for justice, and my vision of a world where every child, regardless of ability, can learn and grow without trepidation. My contribution to understanding school violence is a call for change, a demand for justice, and a vision of a better world where every child, regardless of ability, can learn, grow, and thrive without fear.

Recommendations

Englander (2007) strongly argues for considering many instances of bullying as precursors of hate-motivated behaviours. Burch (2024) states that addressing hatred against disabled people requires a holistic approach that combines research, advocacy, practical resources, and systemic changes, and all centred on the experiences and expertise of disabled people themselves. I suggest these changes must start in education, and bullying should not be shrugged off as a ‘stage of development’; it is a form of violence driven by ableist ideologies and must be challenged. Educators and caregivers should understand that hate crimes have a deep emotional and psychological impact on disabled children and adults, affecting their sense of identity, belonging and ability to navigate public spaces. I recommend that policies and educators should account for these multi-layered harms (Burch, 2021).

I recommend that educational institutions pay more attention to psycho-emotional disablism, a crucial aspect of supporting disabled children that goes beyond mere physical accommodations. This form of disablism impacts a child's emotional well-being and sense of self-worth and often manifests through subtle societal attitudes, exclusionary practices, and internalised ableism. A comprehensive support system needs to be developed in education that prioritises the emotional and psychological needs of disabled children. These systems should include access to specialised counselling services, peer support networks, and programmes that foster disability pride and positive self-image. We need to redirect training away from focusing on impairments and train doctors, parents, and teachers to recognise and mitigate psycho-emotional disablism in their interactions with disabled children. Addressing these often-overlooked aspects of the disabled experience can create environments that nurture the holistic development of disabled children, empowering them to navigate societal barriers with resilience and self-assurance.

Focusing on psycho-emotional disablism not only benefits the individual child but also contributes to a broader cultural shift towards genuine inclusivity and respect for diverse bodyminds. Raising awareness of psycho-emotional disablism acknowledges the internal struggles disabled children face due to societal attitudes and treatment. It highlights how ableist attitudes and microaggressions can erode a disabled child's self-esteem, sense of worth, and overall mental well-being. As my autoethnography demonstrates, the chronic undermining of self can have long-lasting effects on identity formation and mental health. I have internalised negative attitudes and struggled with self-advocacy my whole life; understanding and negating these internal barriers is key to empowerment. Recognising psycho-emotional disablism challenges simplistic notions of disability as solely a physical or medical issue. It emphasises the social and cultural aspects of disability experience.

Garland-Thomson (2012a), Liddiard (2014b), and Twardowski (2022) advocate for a model of disability that recognises the complex sociocultural phenomenon shaped by societal attitudes, power structures, and political agendas. Devlieger (2005) lays the conceptual groundwork for a cultural model of disability, while Twardowski (2023) delves deeper into specific directions for further developing the cultural model. Both advocate for a more nuanced, culturally situated understanding of disability that goes beyond the medical and social models. Garland-Thomson's (2012a) sociocultural theory of disability asks where disability stands in relation to the real world rather than just focusing on oppression and discrimination. Liddiard (2014) advocates for a social relational model that accounts for the psychological and emotional aspects of disability but locates these within broader social, cultural, and political contexts rather than reducing them to individual medical/psychological explanations. I suggest and recommend a review of the social model of disability in line with the models that consider the cultural imagining of disability, which, as discussed, has a tremendous impact on the lives of disabled children and adults.

To better understand disability, we must consider how society has historically defined and perceived it. It is important to explore the cultural attitudes towards disability over time and recognise how these past views continue to influence the present. Additionally, we should acknowledge that disabled children form their identities in complex ways, shaped by societal perceptions, their relationships with peers, and their own lived experiences. By examining these factors, we can gain a more comprehensive understanding of disability and its impact on disabled children's lives, ultimately fostering a more inclusive and supportive environment for all. Many ableist attitudes and stereotypes have deep historical roots that continue to influence modern perceptions and treatment of disabled people, even if in more subtle forms. Recognising these connections helps identify and challenge persistent harmful beliefs. By examining cultural constructions over time, I have demonstrated how violence against disabled people is not just individual acts but part of broader systemic and cultural patterns that devalue and dehumanise disabled bodies and minds.

Cultural constructions of disability intersect with other forms of marginalisation, such as racism, sexism, sizeism, and heterosexism. Examining these constructions helps reveal how multiple forms of oppression compound experiences of violence for disabled people. Analysing cultural constructions exposes power imbalances between disabled and non-disabled people that create conditions for violence and abuse to occur and persist. Understanding the cultural roots and ongoing impacts of ableism is essential for developing effective interventions and policies to prevent violence and support disabled children and adults. By exposing harmful cultural constructions, we can work to reshape societal attitudes and foster more inclusive, equitable treatment of disabled people. I recommend critically examining these issues to empower disabled people to understand their experiences in a broader context and resist internalising negative societal messages.

I recommend embracing autoethnographic methods to incorporate personal narratives in disability studies, as I have done with my experiences growing up as a disabled child in the English education system during the 1960s-70s, which offers a unique, firsthand account of lived experiences that external researchers cannot fully capture. My narrative provides invaluable insights into the daily realities and challenges faced by disabled children in that specific time and context. By sharing these experiences, disabled people contribute to challenging and expanding the often medicalised or deficit-based narratives that have historically dominated disability discourse. This approach achieves a more holistic, nuanced, and human-centred understanding of disability experiences, which is crucial for advancing disability rights and inclusion. Integrating broader theoretical frameworks such as feminist theory and postcolonial studies will deepen our knowledge of marginalisation. Autoethnography provides a powerful tool for disability studies to challenge dominant ableist narratives and centre the lived experiences of disabled people. It allows for nuanced, embodied understandings of disability that can lead to more inclusive theories, policies, and practices.

As I reflect on my doctoral study and consider my granddaughter's future as an autistic child, my heart swells with a mix of hope and trepidation. The thought of her struggling under the weight of standardised testing that may not suit her learning style brings a lump to my throat. Yet, through all these emotional highs and lows, I am lifted by the knowledge that awareness and understanding of autism are growing. I dream of a future where my granddaughter's neurodiversity is celebrated, not just tolerated. Where her unique strengths are nurtured, and her challenges are met with empathy and support. But this dream cannot become reality without action. We must demand change. We must push for better, more inclusive educational practices and a fundamental shift in societal attitudes towards neurodiversity. We must challenge the ableist structures that perpetuate discrimination and fight for a world that values all types of bodyminds. We must not be complacent. We must raise our voices, challenge the status quo, and fight for a world that embraces all forms of neurodiversity. My granddaughter deserves nothing less than a future where she can shine in all her unique brilliance. Let us work tirelessly to make that future a reality (see Appendix 6). Changing how disability is perceived is challenging, as people tend to hold onto existing beliefs and stereotypes about disability, such as being dependent and in need of help, having limited potential and unable to succeed academically or professionally, or being portrayed as brave, courageous, or inspirational simply for living with their disability, which can be difficult to overcome. Changing perceptions of disability requires a multifaceted approach that involves education, increased representation, personal interaction, and structural changes to create a more inclusive society. While progress has been made, with attitudes improving over time, there is still significant work to be done to challenge and transform how disability is perceived in society.

What needs to change, and who is responsible for these changes?

The education system still grapples with the stark realities faced by disabled children, whose very essence is often questioned and dismissed (Ktenidis, 2020, 2022; Maxfield et al., 2023). This negativity stems from viewing disability as a diminished state of being human (Campbell, 2009), reflecting a pervasive ableist mindset that permeates every facet of society, influencing policymakers, educators, and children alike (Bumgardner, 2023; Deroche et al., 2024; Goodley, 2014b; Shaffner, 2019).

Societal attitudes, structures, and practices must be reviewed and subsequently changed to improve the lived experiences of disabled children in education and reduce the hatred and violence they endure (Fang et al., 2022; Ozougwu, 2023; Wolbring, 2021). Key areas for change include shifting societal attitudes through emotive storytelling and ethical reflection (Burr, 2019; Goodley, 2023; Olsen & Pilson, 2022), reframing disability as a social construct (Liddiard & Slater, 2017; Simplican, 2017), and implementing educational reforms that prioritise safety, equity, and authentic inclusion (Runswick-Cole et al., 2018). Authentic accounts of lived experiences empowering disabled voices bridge personal narratives and theoretical frameworks, making abstract concepts tangible and highlighting systemic issues (Edwards & Maxwell, 2023)

In conjunction with disabled children's voices, policy reform is crucial to address enduring inequities. Existing policies often fail to address the root causes of discrimination in educational settings (Walton, 2005). Stronger legislation is needed to protect disabled children's rights to safety (Goodley & Runswick-Cole, 2016; Liddiard et al., 2019; Mocan, 2022). Educational spaces reflect the political narratives that portray disabled people as financially burdensome (Yates, 2015) and neoliberal policies promoting an 'us' and 'them mentality (Runswick-Cole, 2014).

The responsibility for addressing hatred and violence experienced by disabled children is shared across multiple sectors of society. Educators play a crucial role in fostering inclusive environments, though their capacity is often constrained by systemic factors (Avramidis & Norwich, 2002). They must be trained to recognise and challenge ableist perspectives and resist taking charitable ideologies into the classroom, ideologies that portray disabled children as objects of pity rather than acknowledging their full humanity and true potential Michener (2012). Rather, they should integrate disability awareness into curricula, promoting positive representations of disability and engaging communities in creating inclusive school cultures, embracing a universal design for learning to provide options that allow all students to access, engage with, and demonstrate mastery of the learning material (Ktenidis, 2020, 2022). Policymakers are pivotal in enacting systemic change through legislation and resource allocation (Runswick Cole et al., 2018). By leveraging their influence, they can change how disability is understood, challenge systemic ableism, prioritise disabled children's lived experiences, and address deeply ingrained societal attitudes and structures. Disabled people and advocates wield power through self-advocacy and representation, challenging ableist narratives and offering counter-narratives (Liddiard, 2014). However, the onus for preventing violence should not be on disabled children themselves (Sutherland et al., 2024). Liddiard's (2014) use of 'cripping' empowers disabled people to redefine disability on their terms, subverting harmful stereotypes. Disabled children and adults are beginning to challenge ableist narratives and offer counter-narratives that educate and foster empathy, sharing authentic experiences via autoethnography and social media.

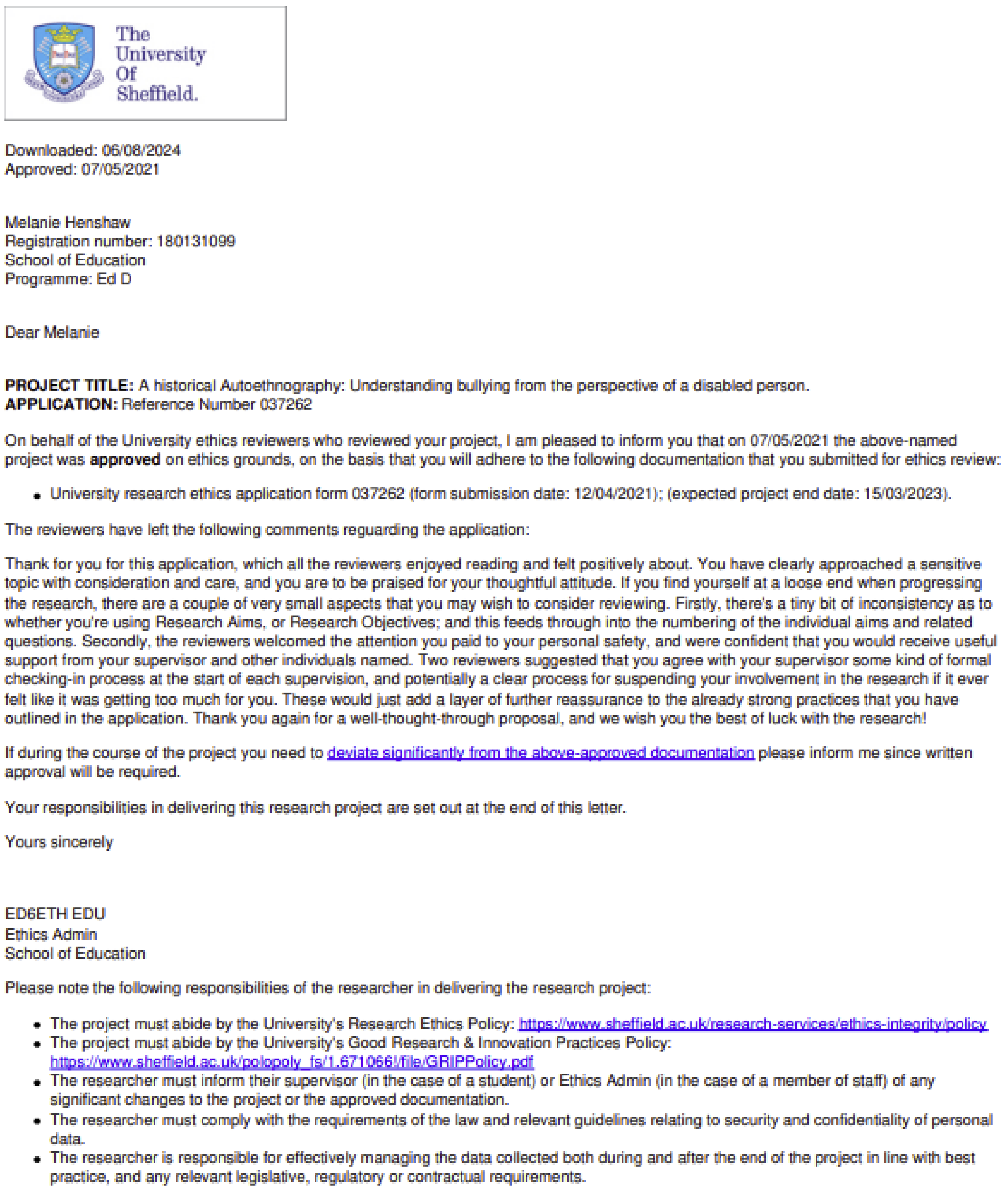
Researchers and academics across the social sciences and law need to frame bullying prevention from a disability rights perspective, aligning with the UNCRPD (Kowitz, 2022). This approach emphasises disabled children's equal rights to safety and protection (Edwards & Maxwell, 2023), recognising bullying as a violation of their dignity (Ktenidis, 2020; Liasidou & Ioannidou, 2021). Research should facilitate opportunities for disabled children to share their experiences and be involved in analysis (Runswick Cole et al., 2018).

The media plays a crucial role in shaping societal attitudes towards disability (Ralph et al., 2016). They must increase the representation of disabled people in diverse roles and avoid stereotypical portrayals (Olsen & Pilson, 2022). The media should educate the public about disability issues, highlighting societal barriers, covering disability rights, and avoiding the portrayal of disabled individuals as superheroes or objects of pity (Olsen & Pilson, 2022).

Creating meaningful change requires a collective effort, fundamentally reshaping how we value human diversity. This change relies on documenting disabled lives and addressing systemic violence in educational spaces (Ktenidis, 2020, 2022; Runswick-Cole et al., 2018). While these changes have been demanded for decades (Goodley & Runswick-Cole, 2011), we must persist in fighting for transformation, resisting short-term fixes and addressing broader societal and structural barriers faced by disabled children.

Appendices

Appendix 1 – Ethics Approval



The University Of Sheffield.

Downloaded: 06/08/2024
Approved: 07/05/2021

Melanie Henshaw
Registration number: 180131099
School of Education
Programme: Ed D

Dear Melanie

PROJECT TITLE: A historical Autoethnography: Understanding bullying from the perspective of a disabled person.
APPLICATION: Reference Number 037262

On behalf of the University ethics reviewers who reviewed your project, I am pleased to inform you that on 07/05/2021 the above-named project was **approved** on ethics grounds, on the basis that you will adhere to the following documentation that you submitted for ethics review:

- University research ethics application form 037262 (form submission date: 12/04/2021); (expected project end date: 15/03/2023).

The reviewers have left the following comments reguarding the application:

Thank for you for this application, which all the reviewers enjoyed reading and felt positively about. You have clearly approached a sensitive topic with consideration and care, and you are to be praised for your thoughtful attitude. If you find yourself at a loose end when progressing the research, there are a couple of very small aspects that you may wish to consider reviewing. Firstly, there's a tiny bit of inconsistency as to whether you're using Research Aims, or Research Objectives; and this feeds through into the numbering of the individual aims and related questions. Secondly, the reviewers welcomed the attention you paid to your personal safety, and were confident that you would receive useful support from your supervisor and other individuals named. Two reviewers suggested that you agree with your supervisor some kind of formal checking-in process at the start of each supervision, and potentially a clear process for suspending your involvement in the research if it ever felt like it was getting too much for you. These would just add a layer of further reassurance to the already strong practices that you have outlined in the application. Thank you again for a well-thought-through proposal, and we wish you the best of luck with the research!

If during the course of the project you need to deviate significantly from the above-approved documentation please inform me since written approval will be required.

Your responsibilities in delivering this research project are set out at the end of this letter.

Yours sincerely

ED6ETH EDU
Ethics Admin
School of Education

Please note the following responsibilities of the researcher in delivering the research project:

- The project must abide by the University's Research Ethics Policy: https://www.sheffield.ac.uk/research-services/ethics-integrity/policy
- The project must abide by the University's Good Research & Innovation Practices Policy: https://www.sheffield.ac.uk/polopoly_fs/1.671066!/file/GRIPPolicy.pdf
- The researcher must inform their supervisor (in the case of a student) or Ethics Admin (in the case of a member of staff) of any significant changes to the project or the approved documentation.
- The researcher must comply with the requirements of the law and relevant guidelines relating to security and confidentiality of personal data.
- The researcher is responsible for effectively managing the data collected both during and after the end of the project in line with best practice, and any relevant legislative, regulatory or contractual requirements.

Appendix 2 – Data Analysis Tables

Analysis Summary of all Data

Open coding	*Coding violence*	*Emotional Coding*	*Reflexive Thematic analysis*	*Theories*
Fear Rejection Emotional Struggles	Physical, Emotional, Psychological, Verbal Cultural Imagining	Fear, Vulnerability, Embarrassment, Emotional Struggles	Stereotypical assumptions Cultural Imagining	Social Identity Theory Identity
Resilience	Structural Cultural Imagining	Loneliness, Rejection, Isolation, Sadness Emotional Struggles	Complex and shifting Power Dynamics Cultural Imagining	Resilience Theory Identity
Discrimination Bullying Cultural Imagining	Relational Cultural Imagining	Shame, Humiliation Cultural Imagining	Emotional Turmoil of trauma and impact on Mental Health Emotional Struggles	Power Dynamics in Society Cultural Imagining
Parental Support and Advocacy Cultural Imagining	Violence as a Response to Trauma Cultural Imagining	Anger Resentment Desperation Identity	Social stigma and the loneliness of exclusion Social Isolation	Psychodynamic Theory Emotional Struggles
Cultural Imagining	Violence as a Control Mechanism	Anguish Distress Anxiety	Family support as resilience	Trauma Theory Emotional Struggles
Emotional Turmoil Identity	Social Violence Cultural Imagining	Confusion Betrayal Identity	Identity Formation and Self-Perception Identity	Social Exclusion and Marginalisation Cultural Imagining
Identity Formation Self-Perception Identity	Violence as a Response to Trauma Cultural Imagining	Helplessness Despair Guilt Identity	Resilience and self-initiated Coping Mechanisms Identity	Feminist Theory Identity
Power Dynamics and Authority Cultural Imagining	Symbolic Violence Cultural Imagining	Empowerment Defiance Relief Hope Empathy Compassion Identity	School Environment as a backdrop to bullying and trauma. Cultural Imagining	Social Constructivism Theory Cultural Imagining
Schools' Responses to Disability Cultural Imagining	Interpersonal Violence Identity		Conflict Resolution and Consequences Identity	
Educational Environment Cultural Imagining	Domestic Violence Cultural Imagining		Emotional Abuse and Bullying Cultural Imagining	
Emotional Impact Coping strategies Emotional Struggles	Social Violence Cultural Imagining			

Life Story 1
Corporal Punishment -1967

Open coding	*Violence coding*	*Emotional Coding*	*Reflexive Thematic analysis*	*Theories*
Isolation and Bullying	Physical Violence	Fear and Anxiety	Power Dynamics and Vulnerability:	Social Identity Theory
Support Systems and the Protective Role of Parents	Emotional Violence	Loneliness and Rejection	Social Stigma and Discrimination	Power Dynamics Theory
Medical Needs	Psychological Violence	Love and Support:	Emotional Turmoil and Resilience:	Resilience Theory
Fear and Anxiety		Resilience and Determination:	Family Support and Advocacy:	
Power Dynamics Teacher-Child Relationship		Distress and Helplessness:	Identity Negotiation: Formation	
Formation of Self-Concept in a Stigmatizing Environment		Empathy and Connection:	Educational Environment: Authority Figures	
Discrimination, Social Exclusion and Prejudice		Shame and Embarrassment:	School Environment	
Resilience and Determination Emotional Struggles and Coping Mechanisms		Humiliation	Physical Challenges	
Power Dynamics and Misuse of Authority			Emotional Experiences	
Self-Perception			Social Stigma	

Life Story 2
Not the Slipper - 1972

Open coding	*Violence coding*	*Emotional Coding*	*Reflexive Thematic analysis*	*Theories*
Bullying and Humiliation	Physical Violence	Embarrassment and Shame	Bullying and Humiliation Discrimination	Social Identity Theory
Resilience and Empowerment	Emotional Violence	Anger and Resentment	Power Dynamics and Authority Figures	Trauma Theory
Fear and Vulnerability	Psychological Violence	Fear and Vulnerability	Emotional Turmoil and Trauma Isolation	Power Dynamics Theory
Social Stigma and Discrimination	Verbal Violence	Empowerment and Defiance	Resilience and Empowerment Protection Transformation	Coping Mechanisms Theory
Identity Formation	Institutional Violence	Trauma and PTSD Symptoms	Fear, Vulnerability	Social Learning Theory
Abuse, Emotional Turmoil and Trauma	Social Violence	Isolation and Loneliness	Family Support and Relationships	Stigma Theory
Transformation and Growth			Conflict Resolution and Consequences	
Conflict Resolution and Consequences			Identity Formation and Self-Perception	
Family Dynamics and Support			Transformation and Personal Growth	
Power Dynamics and Authority Figures			Betrayal and Trust	
Self-Perception			School Environment Educational Environment Authority Figures	

Life Story 3
An Hour in the Ditch in 1977

Open coding	*Violence coding*	*Emotional Coding*	*Reflexive Thematic analysis*	*Theories*
Bullying and Harassment	Physical Violence	Fear and Vulnerability	Bullying and Social Exclusion	Social Identity Theory
Social Exclusion	Verbal Violence	Sadness and Despair	Family Support and Understanding	Resilience Theory
Support Systems	Bullying and Intimidation	Anguish and Helplessness	Resilience and Coping Strategies	Social Learning Theory
Identity Formation and Self-Perception	Psychological Violence	Empathy and Compassion	Voices of Protection and Internal Conflict	Psychodynamic Theory
Power Dynamics and Social Interactions	Coercion and Forced Actions	Isolation and Loneliness	Identity Formation and Self-Perception	Social Cognitive Theory
Resilience and Coping Mechanisms	Public Shaming and Humiliation	Shame and Embarrassment	Psychological Resilience and Coping Mechanisms	Trauma Theory
Escalation of Conflict and Retaliation	Sexual Harassment		Support Systems and Relationships	Cognitive Dissonance Theory
Trauma and Psychological Impact	Retaliation and Threats		Misguided - Friendship and Compassion	
Stigmatisation	Forced Exposure and Invasion of Privacy		Trauma and Mental Health	
Relationships	Physical Restraint and Assault			

Life Story 4
Dig Your Boots - 1978

Open coding	*Violence coding*	*Emotional Coding*	*Reflexive Thematic analysis*	*Theories*
Parental Love and Helplessness	Physical Violence	Sadness and Despair	Family Support and Sacrifice	Parental Love and Sacrifice
Child's Emotional Turmoil	Emotional Violence	Rage and Anguish	Bullying and Trauma	Resilience and Coping Mechanisms
Resilience and Inner Strength	Psychological Violence	Empathy and Compassion	Resilience and Coping Mechanisms	Identity Construction and Self-Perception
Fear, Anguish, and Desperation	Structural Violence	Fear and Anxiety	Identity Formation and Self-Perception	Social Exclusion and Marginalization
Loneliness and Social Exclusion	Domestic Violence	Shame and Humiliation	Emotional Turmoil and Mental Health	Power Dynamics in Society
Trauma and Pain	Violence as a Control Mechanism	Loneliness and Isolation	Social Exclusion and Loneliness	Trauma and Mental Health
		Confusion and Betrayal	Empowerment through Adversity	
		Relief and Hope		

Life Story 5 Finally, I snapped- 1980				
Open coding	*Violence coding*	*Emotional Coding*	*Reflexive Thematic analysis*	*Theories*
Trauma and Abuse Emotional Turmoil	Physical Violence	Joy and Love	Family Support and Sacrifice	Trauma Theory
Relationships and Love	Psychological Violence	Fear and Isolation	Bullying and Trauma	Power Dynamics Theory
Identity Formation	Emotional Violence	Anger and Resentment	Resilience and Coping Mechanisms	Social Learning Theory
Psychological Resilience	Symbolic Violence	Guilt, Shame, and Self-Loathing	Identity Formation and Self-Perception	Feminist Theory
Family Dynamics	Relational Violence	Empathy and Compassion	Emotional Turmoil and Mental Health	Psychological Resilience Theory
Silence as a Coping Mechanism	Violence as a Response to Trauma	Desperation and Vulnerability	Social Exclusion and Loneliness	Social Constructivism Theory
Consequences of Violence	Interpersonal Violence	Loneliness	Empowerment through Adversity	
Power Dynamics and Control	Structural Violence		Trauma and Abuse	
			Family Dynamics	
			Seeking Love and Acceptance	
			Silence as a Coping Mechanism	
			Psychological Impact	

Appendix 3 - Understanding the Themes

Scope

My stories provide an in-depth exploration of my life, mainly at school, examining my relationships with adults and peers, the coping mechanisms I developed and the complexities of navigating social interactions while dealing with my disability. They provide a poignant insight into my world, navigating the complex intersections of disability, medicine, education, family, and society. Some people may find these stories troubling or upsetting. However, they need to be told so we can learn from them. My stories highlight the importance of the school environment in shaping a disabled child's identity, experiences and interactions whilst shedding light on the ableist and disabling school environment of the 1960s and 1970s. These many themes interact to cover both systemic and highly personal impacts of living with a disability in this cultural context.

Definitions

The cultural imagining of disability - The societal perceptions, assumptions, and expectations about disabled children that shape their experiences and treatment in various social settings.

- The impact of Power Dynamics and Authority on a disabled childhood - The unequal distribution of control and influence within educational and social settings, mainly as they affect disabled children.
- The consequences of a disabled childhood Social Isolation, Bullying and Violence - the interconnected experiences of exclusion, mistreatment, and physical harm faced by disabled children in school settings.

The disabled identity - The complex and evolving self-perception of disabled children, shaped by their lived experiences, societal attitudes, and interactions with others.

- Knowing The Disabled Self - Self-Perception and Self-Acceptance - the complex and evolving way disabled children view and understand themselves, shaped by their lived experiences with disability, societal attitudes, and interactions with others.
- Safer To Be Alone - Social Isolation - refers to the experience of being excluded, marginalised, and disconnected from peer groups and social interactions within the school environment.

The emotional struggles of a disabled childhood - complex and often intense psychological experiences faced by disabled children, characterised by feelings of shame, fear, isolation, confusion, and self-loathing.

- The Impact of Bullying and Violence on A Disabled Childhood - refers to the profound and long-lasting effects of physical, verbal, and emotional abuse experienced by disabled children in school settings.
- Developing Emotional Resilience and Coping Mechanisms - refers to the process by which disabled children learn to navigate and withstand the emotional challenges they face due to bullying, discrimination, and social isolation.

Theme: 1-The cultural imagining of disability.

The cultural imagining of disability refers to the societal perceptions, assumptions, and expectations about disabled children that shape their experiences and treatment in various social settings. Including stereotypical medical predictions, negative attitudes, dehumanising language, and misconceptions about abilities and potential, which collectively influence how disabled children are viewed and interacted with in society, particularly in educational and medical contexts. For me, they are influenced by interactions with my teachers and peers, learning, participating in school activities, and facing the challenges of my socially constructed disability and my impairment. The role of teachers in shaping my experiences is significant. The school environment controlled how I was exposed to violence and bullying. School exposed me to social challenges, discrimination, and mistreatment from peers and authority figures due to my physical differences, my impairment and their preconceived ideas about disability or disabled children socially constructed outside of school. As I navigated controlling authority figures, I was left with feelings of vulnerability, fear, humiliation, and a sense of powerlessness.

Subtheme 1 – The impact of Power Dynamics and Authority on a disabled childhood.

This subtheme refers to the unequal distribution of control and influence within educational and social settings, mainly as they affect disabled children, including the adult hierarchical relationships and peer-to-peer interactions, where those in positions of power often exert control through physical, emotional, or social means. These dynamics frequently result in the marginalisation and mistreatment of disabled children, reinforcing their vulnerability and limiting their agency within school environments. The interaction between myself, the teachers, and the headteacher uncovers the power dynamics across the school. Power is intrinsically connected to dehumanisation ‘because powerful people often have to make tough decisions that may lead other people to suffer’ (Lammers & Stapel, 2011, p. 122). The bullies, teachers, peers, and doctors all dehumanised me to make their actions plausible and justifiable. However, dehumanisation fails to understand, acknowledge or recognise the immense suffering caused (Lammers & Stapel, 2011). The headteacher’s authoritarian behaviour towards me, including physical punishment/abuse, reflects a hierarchical structure that influences interactions and shapes behaviour. The power dynamics within the school are demonstrated through the instances of bullying, mistreatment by teachers, and my internal conflict whilst navigating the relationships with peers who exhibit discriminatory behaviour.

Subtheme 2 - The Consequences of a Disabled Childhood - Social Isolation, Bullying and Violence

Social Isolation, Bullying and Violence refer to the interconnected experiences of exclusion, mistreatment, and physical harm faced by disabled children in school settings, including being ostracised by peers, subjected to verbal abuse and name-calling, and experiencing physical attacks. These experiences are often systematic, persistent, and rooted in ableist attitudes, creating an environment where disabled children feel unsafe, unwelcome, and devalued. The combination of social rejection, emotional abuse, and physical aggression contributes to a hostile educational environment that significantly impacts the disabled child’s well-being, self-esteem, and academic experience. I faced social isolation and bullying from my peers because I was different, leading to feelings of rejection and mistreatment. This subtheme emerged from the data and highlighted how I was exposed to bullying and violence by my teachers and, subsequently, my peers. The social isolation of the disabled child is linked to othering and dehumanisation.

Theme 2 The Disabled Identity.

The disabled identity refers to the complex and evolving self-perception of disabled children, shaped by their lived experiences, societal attitudes, and interactions with others. It encompasses feelings of difference, struggles with self-acceptance, and the navigation of societal expectations and barriers. This identity is often characterised by a tension between the desire for normalcy and the recognition of one's unique experiences as a disabled child, influenced by both internal factors and external social and cultural pressures. This theme emerged, alongside the exposure to bullying and violence, as I navigated challenges related to my physical impairment, social interactions, perceptions of others, and struggles with acceptance and belonging. It is a theme of self-acceptance, identity formation, and navigating societal perceptions of disability. It emerges as a critical component of my stories, reflecting on how external judgments impact my sense of self.

Subtheme 1: Knowing The Disabled Self - Self-Perception and Self-Acceptance

Self-Perception and Self-Acceptance refer to the complex and evolving way disabled children view and understand themselves, shaped by their lived experiences with disability, societal attitudes, and interactions with others, including the struggle between internalised negative attitudes about disability and the journey towards embracing my unique identity. It encompasses the challenges of navigating between desires for 'normalcy' and recognising the value of my disabled experience, often involving a process of overcoming shame, self-doubt, and societal expectations to develop a positive sense of self. I navigated societal perceptions of disability, struggled with self-acceptance, and sought validation and belonging. Struggling with self-identity and societal labels like 'spina bifida kid' reflects how I internalised external perceptions and constructed my self-image. The use of derogatory terms like 'spastic' and the impact of such language on my sense of self-worth highlight the role of language in shaping identity.

Subtheme 2: Safer To Be Alone - Social Isolation

Social isolation refers to the experience of being excluded, marginalised, and disconnected from peer groups and social interactions within the school environment. For disabled children, this isolation is often a result of physical barriers, negative attitudes from peers and adults, and a lack of understanding about disability. It manifests as difficulty forming friendships, being left out of social activities, and feeling like an outsider in both educational and community settings. This isolation can have profound effects on a child's emotional well-being, self-esteem, and overall development. Social isolation emerged because of bullying and discrimination, shaping my interactions with peers and influencing my sense of belonging within the school community. Forcing me to spend lunchtimes alone, hiding in the toilets or the least populated areas of school on the days I could not go home for lunch, and making myself as invisible as possible in the classroom or social environments.

Theme 3 - The Emotional Struggles of a Disabled Childhood

The emotional struggles of a disabled childhood refer to the complex and often intense psychological experiences faced by disabled children, characterised by feelings of shame, fear, isolation, confusion, and self-loathing. These struggles are shaped by societal attitudes, medical experiences, bullying, and difficulties with self-acceptance, often leading to long-lasting impacts on mental health and identity formation. The emotional challenges are frequently exacerbated by experiences of exclusion, physical pain, and the struggle to navigate between disabled and non-disabled worlds.

Every story has a complex array of emotions that I experienced, revealing a rich tapestry of feelings that have been analysed through emotional coding to understand the psychological impact. These emotional moments make visible the lasting effects of trauma within my stories. These nuanced emotions provide an insight into the psychological impact on my well-being, highlighting a range of emotional responses to various challenging circumstances within the school environment.

Subtheme 1: Coping Mechanisms.

Coping Mechanisms refer to the process by which disabled children learn to navigate and withstand the emotional challenges they face due to bullying, discrimination, and social isolation, including creating internal support systems (such as my imaginary friends or multiple personas), developing strategies to manage intense emotions, and finding ways to persist in hostile environments. It involves learning to adapt to adversity, building self-protective behaviours, and cultivating inner strength to overcome repeated traumatic experiences in school and social settings.

I demonstrate moments of resilience in the face of adversity, coping with emotional challenges like mistreatment, fear, and uncertainty about my health. I used a range of coping mechanisms like playing alone to avoid bullying, seeking comfort in family support, and finding solace amidst challenging situations. Such coping mechanisms are also the last resort as schools fail to deal with bullying.

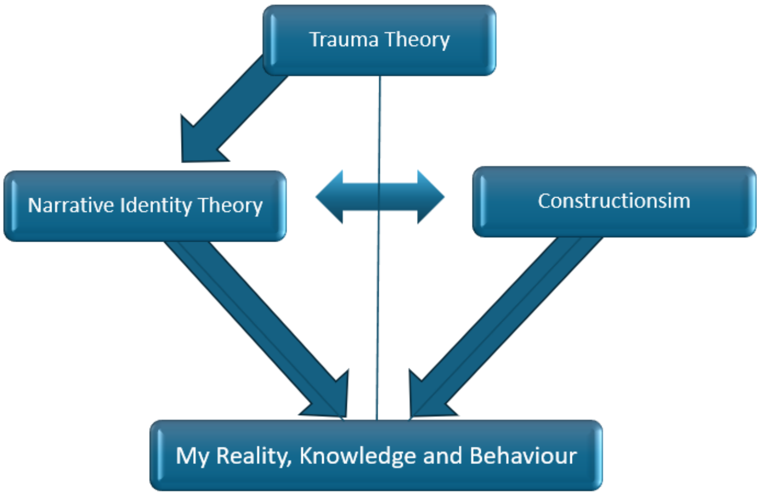
Appendix 4 -Creating a framework to understand my identity.

<table>
<tr><th colspan="2">Understanding
How my identity was constructed</th></tr>
<tr><td colspan="2">Trauma-Induced Identity Fragmentation
Trauma-Induced: This highlights the role of traumatic experiences as a catalyst for the development of these phenomena.
Identity: Refers to the aspects of self-perception and self-concept that are affected.
Fragmentation: Emphasises the division or separation of identity into different personas or states, often as a coping mechanism.
This label encapsulates how trauma can lead to dissociation and the creation of different personas or voices as a way for people to manage and navigate their experiences.</td></tr>
<tr><td>Personas/Voices
Dissociation
Response to Trauma</td><td>To cope with trauma and emotional pain. My voices served distinct roles: some offered protection, others provided comfort, and some guided me through difficult situations. This internal dialogue became a part of my reality, helping me navigate a world where external support was often inconsistent or harmful.</td></tr>
<tr><td colspan="2">Dissociation is a common response to trauma: I feel disconnected from my thoughts, feelings, and sense of identity. It can be a coping mechanism to deal with overwhelming experiences. The development of different personas or voices can be a form of dissociation, especially in cases of severe trauma. For me, different identities or personality states help me cope with distressing situations.</td></tr>
<tr><td>Dissociation</td><td>A recurring response to intense stress or trauma: This psychological mechanism allowed me to disconnect from reality during overwhelming situations, such as violence, bullying, sexual abuse, and hate. It provided temporary relief from emotional pain and helped me endure otherwise unbearable experiences.</td></tr>
<tr><td colspan="2">Adaptive Identity Negotiation.
Adaptive: Highlights the ongoing adjustments I had to make in response to changing circumstances and influences.
Identity: Focuses on the core aspect of self-perception and self-concept that is being shaped.
Negotiation: Emphasises the process of navigating and reconciling various influences, including social dynamics and inconsistent responses from the adults.
This label captures the dynamic process by which I adapted my identity and self-perception in response to evolving social interactions and the inconsistent feedback I received from adults.</td></tr>
<tr><td>Shifting Social Dynamics
Shifting Self-Perception
Inconsistent adults</td><td>My social environment was fluid and often hostile. I experienced shifting dynamics with my peers, who ranged from indifferent to mocking to extreme violence and with adults, whose responses varied from supportive to abusive. These dynamics influenced my perceptions of trust, safety, and belonging, contributing to a complex social reality.</td></tr>
</table>

Changes in social dynamics, such as relationships or social roles, can lead to shifts in self-perception. As I navigated different social contexts, my understanding of myself evolved, sometimes leading to confusion or identity challenges. Inconsistent responses from adults during my childhood led to my confusion and uncertainty about my self-worth and identity. This inconsistency affected how I perceived myself and my relationships with others. Social dynamics were influenced by the behaviour and responses of adults in my life. Inconsistent responses led to unstable social relationships, impacting my ability to form secure and trusting connections.	
Response to Trauma	My responses to trauma were varied and complex. I used internal voices to process and manage my emotions, often retreating into my imagination to escape reality. My resilience was evident in my ability to continue attending school and striving for cohesion despite repeated setbacks.
Physical Challenges	Physical challenges due to my disability were a constant aspect of my reality. These challenges were compounded by social stigma and misunderstanding, both from my peers and adults. My physical limitations were often misunderstood or mocked, adding to my emotional burden.
Shifting Self-Perception	My self-perception was heavily influenced by external feedback and internalised labels. I grappled with feelings of inadequacy and shame, often reinforced by the derogatory comments and actions of others. Despite this, I occasionally found strength and self-worth through supportive relationships and personal achievements.
Inconsistent Adult Responses	Responses from adults in my life were inconsistent, ranging from nurturing and supportive to neglectful and abusive. This inconsistency contributed to my sense of instability and mistrust. Adults who should have protected and guided me often failed to do so, leaving me to rely on my internal coping mechanisms.
These elements collectively constructed my reality, which was challenging and often painful, yet my resilience and adaptability helped me navigate my complex world.	
Overall, these elements often interacted in complex ways, shaping my experiences and responses to my environment. Understanding these connections can provide valuable insights into personal development and mental health.	

What this shows me is the complex and, indeed, multifaceted nature of my disabled childhood and how it was made up of a tapestry of theories that weave together to construct my emotional journey through a negative cultural imagining of disability to create my disabled identity. I designed the following framework to understand who I was. This framework enabled me to understand how being hated subjected me to school violence and bullying. I identified three theories that linked my reality to the knowledge and how I acquired this knowledge: Trauma Theory, Constructionism and Narrative identity theory, as discussed in Narrowing Down the Theories (Appendix 4). Eventually, I created a simplified framework (Figure 17: Theoretical Framework); this is a personal framework that is untested but relevant to me.

Figure 17: Theoretical Framework



Explanation of the Framework

Trauma Theory:

This theory explains how traumatic experiences impacted my perception, emotional responses, and behaviour. Trauma has shaped how I see myself and the world around me. I have Based this understanding on Joshua Pederson's (2014) revised literary trauma theory, where he posits that trauma is memorable and describable rather than amnesic or unspeakable, with 'victims' often able to recall and articulate traumatic experiences in detail, potentially with enhanced rather than repressed memories. I do, however, disagree with his victim label. For me, it carries traditional connotations that can undermine the agency, identity, and resilience of those it labels. I recognise the pathologised nature of trauma that acknowledges inadequate responses from professionals and a need for healing. The key components include dissociation, attachment issues, reenactment of trauma, long-term effects into adulthood, and impairments in emotional capacities. I recognise these traits in myself and the shame and embarrassment as an adult trying to explain that I hear voices. The mental health stigma has helped me to cope with them, and now I do not think I could cope without them. I have an open mind over the view that poor functioning in trauma survivors is not due to sickness but out of a need for healing (R. Goodman, 2017).

***Narrative Identity Theory**:*

This theory focuses on how I formed my identities through personal experiences and social interactions. It is influenced by trauma and interacts with constructionist processes. The theory of narrative identity formation posits that people construct their identities by continuously revising and updating their life narratives to reflect their evolving understanding of themselves and their place in the world (Green, 1993). This narrative provides a sense of unity and purpose over time, emphasising the role of personal storytelling in shaping and understanding self-concept.

People make sense of their lives by creating coherent narratives that link past, present, and future events. This process involves interpreting past experiences and understanding how they have shaped or transformed the self, often referred to as self-event connections. These connections enable people to perceive their lives as a coherent whole, which contributes to personal growth and well-being (McAdams, 2019). Mary Green enriches narrative identity theory by applying a feminist lens, advocating for more inclusive and diverse approaches to understanding how women construct their sense of self through storytelling. Green argues that 'female narrative will be found as women talk together, exchange stories, and move toward a collective understanding of self' (Green, 1993, p. abstract). This perspective highlights the importance of collective storytelling in shaping female identities.

Constructionism:

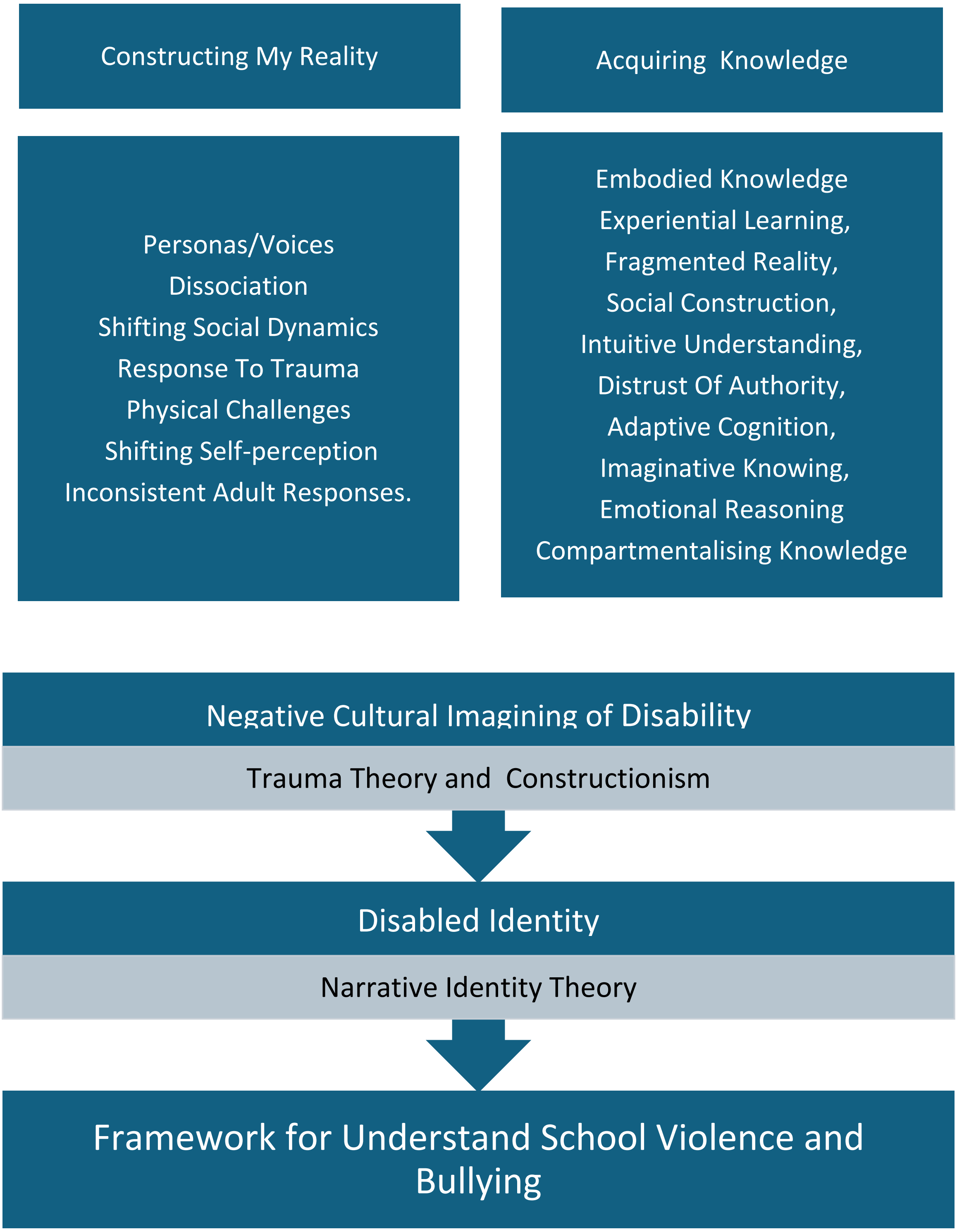
This theory explains how my knowledge is constructed through active engagement with real-world tasks and social interactions. It integrates the influences of trauma and identity to shape an individual's understanding of the world. Constructivism and constructionism are concepts related to learning theory. I have discussed much of this in the Paradigm section. Constructionism, developed by Seymour Papert, builds on constructivist ideas but emphasises learning through creating tangible artefacts or projects. While autoethnography may not result in a physical object in the traditional sense, the stories and narratives produced through this method can be considered tangible artefacts. Autoethnography is often described as a social constructionist approach (Ellis, 2008)

Bidirectional Arrows:

These arrows indicate that Identity Theory and Constructionism influence each other. Our identities shape how we engage with and construct knowledge, and our constructionist activities influence our identities.

My Reality, Knowledge, and Behaviour: This represents the outcome of the interactions between these theories. The interplay of trauma, identity formation, and constructionist learning shapes my experiences, understanding, and behaviour.

Figure 18: Mechanisms of Discrimination Against Disabled Children



By weaving together these elements of my reality and knowledge construction, I have potentially developed a powerful framework for understanding and exposing the mechanisms of discrimination and violence against disabled children, Worthy of further exploration.

Knowledge Acquisition

Embodied Knowledge Experiential Learning,	Understanding gained through physical experience and bodily awareness. It is closely related to experiential Learning, where knowledge is acquired through direct experience and reflection.
	Experiential Learning: This involves learning through doing and reflecting on experiences, which often leads to embodied knowledge.
Fragmented Reality, Compartmentalising Knowledge	This refers to a perception of the world as disjointed or divided, which can lead to compartmentalising knowledge, where information is kept in separate, unconnected categories.
	This involves organising knowledge into distinct segments, which can result from or contribute to a fragmented perception of Reality.
Social Construction, Distrust Of Authority,	This theme involves understanding that social processes and interactions shape knowledge and Reality. It can lead to a distrust of authority if people perceive that authoritative knowledge is socially constructed and potentially biased.
	Distrust of Authority: This can arise when people question the validity of knowledge presented by authorities, often due to an awareness of social construction processes
Intuitive understanding, Emotional Reasoning	This involves grasping concepts or truths without conscious reasoning, often relying on gut feelings or instincts.
	This is the process of interpreting situations based on emotions rather than objective evidence, which can be intricately linked to intuitive understanding.
Adaptive cognition, Imaginative Knowing,	This refers to the ability to adjust thinking and problem-solving strategies in response to changing environments or situations.
	This involves using creativity and imagination to understand or explore concepts, which can enhance adaptive cognition by providing new perspectives and solutions.

Type of knowledge	Label	Definition
Embodied Knowledge and Intuitive Understanding: Both involve non-verbal, instinctual ways of knowing that rely on personal experience and internal cues.	Somatic Intuition	**Somatic:** Refers to the body and physical experience, capturing the essence of embodied knowledge, which is knowledge gained through bodily experience and awareness. **Intuition:** Highlights the instinctual, non-verbal understanding that characterises intuitive understanding.
'Somatic Intuition' encapsulates the idea of knowing that arises from a deep connection between the body and mind, where physical experiences and internal instincts guide understanding and decision-making.		
Experiential Learning and Adaptive Cognition: Experiential Learning can enhance adaptive cognition by providing real-world experiences that require flexible thinking.	Dynamic Learning Adaptation	Dynamic: Emphasises the active and evolving nature of learning through experience. Learning: Captures the process of acquiring knowledge and skills through direct experience. Adaptation: Highlights the ability to adjust thinking and strategies in response to new information and changing environments.
Dynamic Learning Adaptation' reflects the process of Learning that is both grounded in experience and flexible enough to adapt to new challenges and contexts.		
Social Construction and Fragmented Reality: Understanding that Reality is socially constructed can contribute to a perception of fragmented Reality, as people recognise multiple, coexisting perspectives.	Constructed Fragmentation	Constructed: Refers to the idea that social processes and interactions shape our understanding of Reality. Fragmentation: Highlights the perception of Reality as divided or disjointed, often resulting from diverse and sometimes conflicting social influences.
'Constructed Fragmentation' captures the concept that our perceptions of a fragmented reality are influenced by the ways in which social constructs shape our understanding of the world.		
A combined label for 'Distrust of Authority' and 'Compartmentalizing Knowledge' could be 'Sceptical Segmentation.'		
Distrust of Authority and Compartmentalizing Knowledge: Distrust of authority can lead to compartmentalising knowledge as people seek to separate and evaluate information independently.	Critical Compartmentalisation.	Critical: Reflects a questioning or analytical approach towards authority and established knowledge. Compartmentalisation: Refers to the practice of organising knowledge into separate, distinct categories.
'Critical Compartmentalisation' captures the process of questioning authoritative sources and organising information into discrete segments to evaluate and understand knowledge independently.		

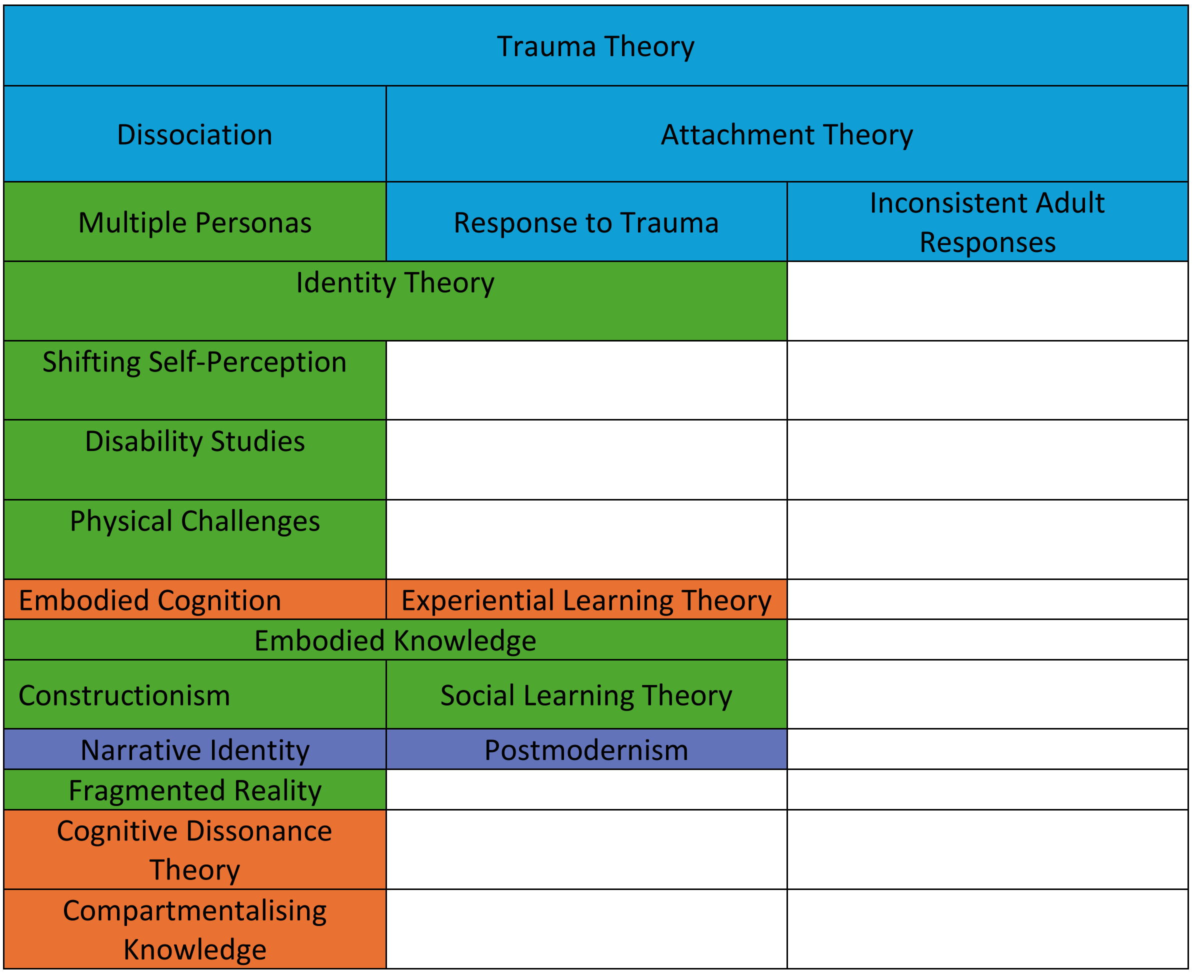
Theoretical Musings

Reality	Theory	Knowledge	Theory
Multiple personas/voices	Trauma Theory, Dissociation	Embodied knowledge	Phenomenology, Embodied Cognition
Dissociation	Trauma and Dissociation Theory,	Experiential learning	Constructivism, Experiential Learning
Shifting social dynamics	Social Identity Theory Symbolic Interactionism	Fragmented reality	Postmodernism, Narrative Identity
Response to trauma	Trauma Theory, Attachment	Social construction	Social Constructionism
Physical challenges	Disability Studies, Embodied Cognition	Intuitive understanding	Intuition Theory, Embodied Cognition
Shifting self-perception	Identity Theory Self-Perception Theory	Distrust of authority	Critical Theory, Anti-Authoritarianism
Inconsistent adult	Attachment Theory	Adaptive cognition	Resilience Theory, Adaptation
		Imaginative knowing	Imagination Theory, Creative Cognition, Emotional reasoning
		Emotional reasoning	Affective Science, Emotional Intelligence
		Compartmentalising knowledge	Cognitive Dissonance Theory Compartmentalisation
Integrated Understanding			
Disabled Identity Formation			
Framework for understanding school violence and bullying			

Linking Theory to Reality and Knowledge

This Table illustrates how various theories underpin the elements of my reality and knowledge construction. They show their interconnectedness and how they contribute to forming my disabled identity and understanding of social issues.	
Reality Construction	
Multiple personas/voices:	Influenced by Trauma Theory and Dissociation.
Dissociation:	Also influenced by Trauma Theory and Dissociation.
Shifting social dynamics:	Informed by Social Identity Theory and Symbolic Interactionism.
Response to trauma:	Guided by Trauma Theory and Attachment Theory.
Physical challenges:	Grounded in Disability Studies and Embodied Cognition.
Shifting self-perception:	Related to Self-Perception Theory and Identity Theory.
Inconsistent adult responses:	Linked to Attachment Theory.
Knowledge Construction	
Embodied knowledge:	Explained by Phenomenology and Embodied Cognition.
Experiential learning:	Based on Constructivism and Experiential Learning Theory.
Fragmented reality:	Informed by Postmodernism and Narrative Identity.
Social construction:	Rooted in Social Constructionism.
Intuitive understanding:	Explained by Intuition Theory and Embodied Cognition.
Distrust of authority:	Guided by Critical Theory and Anti-Authoritarianism.
Adaptive cognition:	Informed by Resilience Theory and Adaptation.
Imaginative knowing:	Explained by Imagination Theory and Creative Cognition.
Emotional reasoning:	Rooted in Affective Science and Emotional Intelligence.
Compartmentalising knowledge:	Explained by Cognitive Dissonance Theory and Compartmentalization.
Integrated Understanding	
Represents the synthesis of all these elements and theories.	
Disabled Identity Formation	
Emerges from the integrated understanding of my reality and knowledge construction.	
Framework for understanding school violence and bullying:	
Informed by my disabled identity and the integrated understanding of my experiences and knowledge.	

Narrowing Down the Theories



Trauma Theory		
Dissociation	Attachment Theory	
Multiple Personas	Response to Trauma	Inconsistent Adult Responses
Identity Theory		
Shifting Self-Perception		
Disability Studies		
Physical Challenges		
Embodied Cognition	Experiential Learning Theory	
Embodied Knowledge		
Constructionism	Social Learning Theory	
Narrative Identity	Postmodernism	
Fragmented Reality		
Cognitive Dissonance Theory		
Compartmentalising Knowledge		

Blue: Trauma and psychological theories. Green: Identity and disability theories

Orange: Cognitive and learning theories. Purple: Social and critical theories

Trauma Theory is a central concept connecting to Dissociation, Attachment Theory, and Response to Trauma. *Trauma connects and impacts both knowledge construction and our perception of reality in complex ways.*

Social Constructionism is a crucial concept in understanding fragmented reality, connecting Critical Theory and postmodernism. *Constructionism emphasises learning through creating tangible objects in the real world. This means that learners engage with reality directly to construct knowledge.*

Narrative Identity *Narrative identity theory proposes that people create knowledge about themselves and their world through the stories they tell, and these stories both reflect and shape their lived reality. This creates a dynamic connection between narrative, knowledge, and reality.*

The table uses proximity to show related concepts. The colour coding helps me visually group related theoretical domains.

Appendix 5: Understanding the Metaphors.

“Looking through a window into a life that is always out of reach. It is about not belonging and isolation, a life immersed in fear, shame, humiliation, and self-loathing.” (prelude to my stories)

I wrote this in my introduction to explain how I felt as a child. During the analysis, I examined the meanings of the words. My powerful statement encapsulates my complex emotional and psychological experiences through vivid imagery and relatable themes. It effectively communicates psycho-emotional disablism. It starts my analysis by making it a compelling and evocative prelude to your stories.

My cultural imagining reflects a profoundly challenging and isolating experience shaped by societal attitudes and structures that marginalise and devalue disability. The metaphor of

- *“Looking through a window”:* I am observing my life, not participating - feelings of exclusion and separation.
- *“a life that is always out of reach”*: expectations of ‘normal’ - barriers to inclusion and acceptance, my ideal life is unattainable.
- *“Not belonging and isolation”* being Othered dehumanised and excluded.
- *“Life immersed in fear, shame, humiliation, and self-loathing”* - the psychological toll of a pessimistic vision of disability. - psycho-emotional disablism, attitudes inflict emotional harm.
- *“Fear, shame, humiliation, and self-loathing”* Internalised oppression- of negative attitudes towards me- damaged my self-worth. Impact of stigma and prejudice disability shameful.

This cultural imagining consists of barriers to self-expression, poor communication, and the freedom to express myself freely. – A shift in societal perspectives, re-imagining disability, challenging eugenic neoliberal values that equate happiness with whole bodymind and economic productivity.

This short phrase captures the emotional and psychological toll of navigating a world that often fails to accommodate and celebrate my diverse abilities.

Appendix 6: Dear Jess

As I sit down to write this letter, my heart is filled with a whirlwind of emotions—hope, love, and a touch of trepidation. I want you to know that as you journey through life as an autistic child, I am here for you, cheering you on every step of the way. I see the road ahead may be filled with challenges. There may be moments of frustration and tears as you navigate an educational system that doesn't always understand you. The thought of you feeling isolated tugs at my heart, especially knowing how crucial friendships are during these formative years. But I also see the spark in your eyes when you master something new, and that fills me with immense pride.

It pains me to think of you struggling under the weight of standardised testing that doesn't reflect your incredible talents and unique way of learning. But I want you to know that your neurodiversity is something to be celebrated, not merely tolerated. You are a brilliant, unique individual, and I dream of a future where the world embraces you for who you are.

Together, we must demand change. We need to advocate for better, more inclusive educational practices and challenge the attitudes that fail to see the beauty in neurodiversity. I believe in your strength and resilience, and I know that with the love and support of our family, you will emerge from your education stronger and more self-aware.

As you navigate this rollercoaster of emotions, remember that you are never alone. You have a family that loves you fiercely and believes in your potential. I have faith that you will not only survive but thrive, leaving a lasting impact on everyone around you.

You deserve a future where you can shine in all your unique brilliance. I am here for you, always, and I will fight tirelessly to make that future a reality.

With all my love,

Grandma

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