

**Labeling Learning Disabilities:
A Qualitative Analysis of Former Special Education Students'
Perceptions of their Educational Experiences**

Honors Thesis

**Presented in Partial Fulfillment of the Requirements
For the Degree of Bachelor of Arts in Education**

**In the McKeown School of Education
at Salem State University**

By

Madelyn Ambler

Dr. Brian Ernest

Faculty Advisor

Department of Childhood Education and Care

Commonwealth Honors Program

Salem State University

2024

Abstract

Students who receive special education services are identified as having one of the 13 disabilities categories recognized by the Individuals with Disabilities Education Act. This identification allows for services such as educational, social-emotional, and/or behavioral supports. However, labeling students with a disability can also have detrimental effects on students. The purpose of this study was to investigate the perceptions of college students with previous individualized education programs (IEP) for learning disabilities (LD) and/or attention-deficit/hyperactivity disorder (ADHD). This study utilized semi-structured interviews and basic qualitative methods to capture the experiences of five current college students at a public, regional university in the northeastern United States who had an IEP during their K-12 experience for LD and/or ADHD. Five themes emerged: (a) effects of labeling, (b) educational experiences, (c) receiving support, (d) others' perceptions, and (e) self-perceptions. Findings support the need for educational initiatives to combat others' negative perceptions of special education students, better explanations about special education services for students, and support for special education students who foster negative self-perceptions.

Table of Contents

Abstract.....	i
Acknowledgements.....	iii
Rationale and Research Question.....	1
Literature Review.....	2
Methods.....	11
Results.....	13
Discussion.....	17
Conclusions.....	18
References.....	20
Appendix A.....	25
Appendix B.....	26
Appendix C.....	27
Appendix D.....	29

Acknowledgements

I have the upmost gratitude for my thesis advisor, Dr. Ernest who made all of this possible. I could not have had a better guide for this journey. His advice guided me through the toughest points in writing my thesis and I am forever grateful for his patience and feedback.

I would also like to thank my participants who made this study possible and who bravely shared their stories with me. This study would be nothing without all of you and I cannot thank you enough for your vital contributions.

I want to thank my mother, Michelle, for her constant support throughout this process and for believing in me and my work.

I also want to thank my fiancé James and my friends and family for supporting me throughout this journey.

I cannot thank you all enough for your encouragement and love.

Rationale and Research Question

Students in special education are identified as having one of the 13 disability categories recognized by The Individuals with Disabilities Education Act (IDEA) and are provided an Individualized Education Program (IEP). This process of categorization or “labeling” a student with a disability can have both positive and detrimental effects on the student. Positive outcomes of being labeled with a disability include gaining access to special education services that can support educational, social-emotional, and behavioral outcomes. However, labeling can also influence the perceptions of both the student and the individuals around them, such as teachers and other service providers. According to Becker’s (1963) classic labeling theory, labeling signals that the individual is different from the majority members of society, which can create a discriminatory effect for the labelers and, in turn, affect the self-image of the labeled. Various researchers have explored how this labeling affects special education students. Shifrer (2013a) found that teachers and parents held lower educational expectations for students labeled with Learning Disabilities (LD) as compared to similarly achieving students that were not labeled with disabilities. Gold and Richards (2012) found that labeling carried more significant discriminatory effects for students of color. Franz and colleagues’ (2023) multilevel meta-analysis representing over 8,000 participants concluded that disability labels can “exacerbate negative academic evaluations, behavioral evaluations, evaluations of personality, and overall assessments of the child” (p. 16).

To expand our understanding the effects of labeling on special education students, the researchers of this qualitative study seek to understand how five college students who previously had IEPs understand and make meaning of their experiences. Although there are 13 disability categories defined in IDEA, this research focuses on the experiences of individuals who had

IEPs for LD and/or ADHD. The research question guiding this study is: How do college students with previous IEPs for LD and/or ADHD perceive their experiences in education?

This study aims to document the voices and perceptions of the participants regarding supportive and stigmatizing practices in special education. Through the process of investigating the perceptions of former special education students, we hope to further reveal what the labels LD and/or ADHD mean to those receiving special education services, how their experiences have shaped them, and how they make sense of the world of education.

Literature Review

Students with Learning Disabilities

According to the National Center for Education Statistics (NCES), 7.3 million students ages 3 to 21 received IDEA services in 2021-2022, which represents 15% of all public school students (NCES, 2023). An IEP is developed for each special education student by an IEP team comprised of teachers, parents, school administrators, related services personnel, and, when appropriate, the student with a disability. The goal of the IEP is to improve educational results for special education students and is considered the “cornerstone of a quality education for each child with a disability” (U.S. Department of Education, 2020, Introduction Section).

The largest category of students served by IDEA is students with LD who comprise 32% of all special education students (NCES, 2023). LD is defined by IDEA, as:

“A disorder in 1 or more of the basic psychological processes involved in understanding or in using language, spoken or written, which disorder may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. Such term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. Such term does not

include a learning problem that is primarily the result of visual, hearing, or motor disabilities, of mental retardation, of emotional disturbance, or of environmental, cultural, or economic disadvantage” (IDEA, 2004, Section 1401 [30]).

However, the federal definition has been widely critiqued. The National Joint Committee on Learning Disabilities (NJCLD) highlight seven purported weaknesses of the federal definition which include (1) reference to psychological process, (2) omission of the intrinsic nature of LD, (3) omission of adults, (4) omission of self-regulation and social interaction problems, (5) inclusion of terms that are difficult to define such as perceptual handicaps, dyslexia, and minimal brain dysfunction, (6) confusion about the exclusion clause, and (7) inclusion of spelling (Hallahan et al., 2019). The struggle to properly define learning disabilities has led researchers, parents, educators, and many others to disagree on the best treatment approaches, what causes learning disabilities, and how to identify them (Hallahan et al., 2019). Learning disabilities may exist side-by-side with other disorders and occur across cultures, races, and languages, resulting in difficulties when identifying, assessing, or instructing students with learning disabilities due to cultural differences (Gartland, 2018). Due to the loose language by IDEA defining what a learning disability is, many states create their own criteria while also using varying methods to identify learning disabilities. This has potentially harmful effects on students who are identified and not identified with LD as they may be identified then stigmatized or may not receive the proper special education services due to false results which state they do not have a learning disability (Maki et al., 2015). These critiques have led leading organizations such as NJCLD and the American Psychological Association to develop alternative definitions, further underscoring the complexity of identifying students with LD.

Students with Attention-Deficit/Hyperactivity Disorder

ADHD is a disability that is specifically mentioned in IDEA under the category of Other Health Impairment (OHI). OHI is defined as “having limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that (i) Is due to chronic or acute health problems such as asthma, attention deficit disorder or *attention deficit hyperactivity disorder*, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette syndrome; and (ii) Adversely affects a child’s educational performance. (IDEA, 2004, Section 300.8 [c] [9]). OHI represents 15% of all special education students (NCES, 2023). However, due to the differences in the ways students are assessed for OHI across the United States, it is difficult to determine how many students are receiving services specifically for ADHD. The last recorded estimation of students with ADHD comes from Forness & Kavale in 2001 with the estimation being that 40% of students receiving special education services under OHI may have ADHD (Briesch et al., 2023). Moreover, there may be many students with ADHD that are not identified for special education services, as only 54% of students with ADHD have an IEP or 504 Plan (DuPaul et al., 2019).

Similarities of LD and ADHD

Both LD and ADHD are neurologically based difficulties that impact a student’s ability to perform specific academic skills (CHADD, 2017). Some organizations, such as The Foundation for People With Learning Disabilities (FPWLD), refer to ADHD as a “learning difficulty” because ADHD impacts learning similarly to LD (FPWLD, 2024). While ADHD is not considered a specific learning disability (SLD) by IDEA, children with ADHD and LD often receive the same special education services and accommodations, as both disabilities affect a student’s ability to learn in similar ways (CHADD, 2017). Moreover, the behavioral

manifestations of ADHD are described in IDEA's definition of LD, such as an impaired ability to complete academic-related tasks such as doing math calculations, reading, writing, thinking, speaking, listening, and understanding or in using language, spoken, or written (CHADD, 2017, para. 5).

ADHD is more similar to LD than it is to other disabilities it is grouped with under the OHI category. Unlike disorders such as hemophilia, lead poisoning, leukemia, epilepsy, and other related health conditions that are listed under OHI, ADHD does not directly affect one's overall physical health.

Comorbidity of LD and ADHD

LD and ADHD can co-occur for a significant number of students, with some estimates indicating 31% to 45% of students with LD may also have ADHD and vice versa (DuPaul et al., 2013). There is also evidence that having ADHD increases the likelihood of a student having LD. The 2007 National Survey of Children's Health (NCSH) found that over 45% of children with ADHD also had LD as a coexisting disorder compared to the 5% of children without ADHD (CHADD, 2019). Moreover, prevalence of comorbid LD and ADHD is on the rise. Estimates of LD in children with ADHD ranged from 8% to 75% "higher over the past decade relative to previous estimates" (DuPaul et al., 2013, p. 45).

Children with comorbid LD and ADHD have been observed to "struggle with greater academic impairment and show more stable deficits than children with each disorder" separately, suggesting a need for more specialized services and supports for students with comorbid LD and ADHD (DuPaul et al., 2013, p. 48). Assessments for either LD or ADHD should look for signs of comorbidity to ensure students are receiving the services and supports they need.

Due to the complexities of identifying students as having LD and/or ADHD, the similar impacts these two disabilities have on students, and the high rates of comorbidity, the current study will include the perceptions of students with former IEPs for either LD and/or ADHD.

Theoretical Framework: Labeling Theory

Becker's (1963) classic labeling theory asserts that labels affect the perceptions of both society and the individual being labeled. Labels indicate that an individual exists outside of what is considered normal by the majority. Becker's theory has been applied to concepts such as race and criminality to explain how labels can "other" individuals by creating biases or prejudices against those being identified as different or deviant. Labeling theory also asserts "the individual's self-image begins to reflect the imposed label" (Gold & Richards, 2012, p. 145).

In 1996, labeling theory was redefined by Scheff as a theory that "ultimately predicts that labeled persons will perceive themselves and behave in accordance with the symbols of the label and others' altered perceptions" (Shifrer, 2013a, p. 463-464). Scheff's initial work was applied to mental illness but has since been applied to various concepts, including individuals with disabilities. Previous research has shown that labels related to learning disabilities disability can lead to stereotyping, status loss, separating, and discrimination that led to poorer outcomes in important life domains (Link & Phelan, 2001). Moreover, research indicates that teachers and parents hold lower academic expectations for students labeled with LD than for similarly achieving and behaving students without the label (Shifrer, 2013a). These directly show the effects of the labeling theory and not only highlight the differing opinions on the usage of the LD label but also the perceptions of others and the effects they could have on the students.

Psychological/Social-Emotional Impact of Learning Disability Label

Labels such as LD and ADHD affect the self-perceptions of students and the perceptions of those around them such as educators, parents, and other students. Despite the label being put on these students to ensure they are receiving equitable treatment, labels have been shown to “adversely affect educational expectations and academic outcomes” (Daley & Rappolt-Schlichtmann, 2018, p. 200).

Self-perception

The labels assigned to children with learning disabilities affect their self-esteem (Savaria & Sinclair, 2011). Ingesson (2007) found that the first six years after the initial creation of their learning disability label was the lowest period of their self-esteem with it steadily increasing afterwards. Testimonials from individuals over the course of one 20-year-long longitudinal study also stressed that most of the study participants struggled the most in childhood, citing stress from academic failure and frustration, self-doubt, fear of social humiliation, issues with self-esteem, social and familial relationships, and bullying (Goldberg et al., 2003). Many participants reported stress due to psychological differences in comparison to their classmates who were not labeled. Moreover, chronic stress from academics spilled into issues at home and caused issues with their relationships with others (Goldberg et al., 2003).

This label can even cause children with LD to be at higher risk for isolation due to peer rejection, report higher levels of loneliness, lower levels of hope, and reduced effort due to their past failures which caused them to have self-doubt (Orly & Margalit, 2014). Additionally, peer rejection affects self-perceptions and mental health wellness of students with disabilities (Atanga et al., 2020). Savaria & Sinclair (2011) report students with LD felt their disability label negatively influenced their self-esteem and educational achievements. Even when the students reported academic performance that was similar to that of typically achieving peers, students

with LD reported self-perceptions that reflected ongoing emotional distress (Orly & Margalit, 2014).

Other's Perceptions

Educator's Perceptions

Special education labels are intended to help students achieve academically and social-emotionally. However, teachers often view students with labels such as LD or ADHD as less capable than their similarly achieving peers (Shifrer, 2013a). Educators also perceive the behavior of students with special education labels more negatively than students without labels who behave similarly (Shifrer, 2013a). Additionally, educators are report lower expectations for future academic success for students with special education labels. Teachers' expectations for students attending some college were 49% less for students with labels compared to student without labels. Significantly, this increased to 96% lower when predicting earning an undergraduate degree. This perception by educators can negatively affect students who feel they are surrounded by adults who do not believe in their capabilities may then use this to begin constructing their own identity with these in mind, altering their perceptions of themselves, often resulting in poor self-esteem (Savaria & Sinclair, 2011). This is increasingly significant as more and more students with LD or ADHD are being included in general education courses. Currently, 70.8% of students with LD being educated in the general education classroom for at least 80 percent of the school day (Hallahan et al., 2019).

Parent Perceptions

Parents and families also have lower expectations of students with labels such as LD or ADHD (Shifrer, 2013a). For example, parent's expectations for attending college 50 percent lower than predictions for students without labels (Shifrer, 2013a). This is critical, as parents are

often central in the IEP process when students are first identified as a child with a disability. Leiter (2007) found that parental attitudes reflected acknowledgment of the exclusive categories “normal” and “disabled,” and that parent's views contributed to their child being categorized by their disability. Parents also often speak for their child during the IEP process, which can contribute to students not being well informed about their disability or supports and accommodations. Many former special education students report that they wished they had been more involved in the IEP processes (Savaria & Sinclair, 2011).

Educational Impact of Learning Disability Label

Although the learning disability label can be beneficial through the services students receive, there is an inherent stigma assigned to the label that is not often discussed within the education world. Labeling Theory believes that assigning individuals with a particular label could influence others' perceptions and create “differential treatment” of the child due to the label (Haft et al., 2022). A few articles argue that it is good practice to properly address the needs of students by sorting students into categories to give the students the proper support such as effective interventions or other practices (Hebbler and Spiker, 2016). These categories are often created through methods such as standardized tests and the IQ-Achievement Discrepancy standard which not only does not take into account the student's sociocultural background but assigns them a category based on their results (Rina and Albert, 2014). This leaves students without the ability to construct their category for themselves and only accept it as it is for the entirety of their academic journey.

It is integral to acknowledge the history behind these labels and how the creation of the labels contributes to the identity of these students. After the creation of IDEA, schools expanded their evaluation and assessment processes in efforts to determine the eligibility of students for

academic support (National Joint Committee on Learning Disabilities 2011). They not only worked on ways they could evaluate students through different instruments and using guiding principles but also by laying out every step of the process. As a result of these supports, not only have high graduation rates increased but also the post-secondary enrollment rates of students with learning disabilities. Despite what has been done and achieved through this, flaws in the assessment process persisted such as what is not measured during these evaluations (Bruefach & Reynolds, 2022). Over the last few decades, they have made strides to ensure this process goes smoothly, however, they failed to realize that there is more to these students than their skills. Not everything about these students can be learned through assessments and evaluations at times may not even reflect how the student can learn best.

Notably, many trust teachers to be the ones to notice and interpret the behaviors of the children, yet few are able to do so successfully and assist them effectively. In one study that discusses the post-secondary education of students with learning disabilities, many students noted that their supportive or non-supportive experiences with professors and other faculty ultimately were the deciding factor in their academic performance. Students noted positive experiences with their professors who often demonstrated their awareness of different student learning needs and spent time working with the student. This allowed the student to flourish in every way. Students who felt unsupported and thought that their professor displayed a lack of awareness or knowledge on disability not only experienced higher rates of anxiety, and some even had to report administrators to higher-ups for unequal behavior in certain cases. The same study also described students struggling when dealing with other faculty and resources when trying to receive accommodations with some finding rigid barriers that inhibited them from getting the accommodations they needed (Lightfoot et al., 2018).

Shifrer, Callahan, and Muller (2013a) reaped similar results about the effects the labels have on the educational paths of students including the most mundane things such as the course selections children with learning disabilities make. The results could not be proven that they are directly linked to the learning disability label, but it can be shown that the label itself defines the students and puts them into a grouping that is limiting. This label has been found to not only contribute to students' negative views of themselves but the adults, such as their parents or even teachers, around them. The study itself stresses that further research must be done to examine the labeling of students with learning disabilities and the removal of its negative effects to continue to provide these students with supports (Shifrer et al., 2013b).

Until recently not much was said about what educators, especially teachers who themselves have learning disabilities, can do to provide solutions to these issues and how to combat the effects of these learning disability labels on children. Many teachers were not formally taught how to properly teach students with learning disabilities, with programs outlining learning disabilities and how to satisfy their needs only beginning to pop up now in teacher preparation programs. However, research suggests that teachers with learning disabilities may hold the answers to this issue. For instance, educators in a study done by Ferri, Keefe, and Gregg, teachers who received the learning disability label referred to it as a tool, saying it allowed them to relate to students and show learning disabilities in a positive light (Ferri, 2001). This in turn inspires children to view their learning disability in a different light and for the students without them to grow accustomed to them being used as well as viewing them with a positive connotation. These teachers were once in these students' shoes and want these labels to be addressed in a way that creates solutions to this age-old issue.

Methods

This basic qualitative study (Merriam & Tisdell, 2016) used semi-structured, individual interview with five college students who has IEPs for either LD or ADHD during their K-12 school experience. The study was approved by an institutional review board at Salem State University (IRB ID: 6241, see appendix A).

Participant recruitment was completed in three stages. First, the researcher announced the opportunity to participate in the research study in college classes. Second, the research recruitment flyer (see appendix B) was posted on campus. Third, participants were recruited through snowball sampling, which involved asking participants to recommend individuals that may be appropriate for the study (Patton, 1990). Identified potential participants were sent a recruitment email with an informed consent document attached (see appendix C). Five participants were recruited and participated in the study. To bolster confidentiality, participants were asked to select pseudonyms related to flowers. See table 1 for participant demographics.

Table 1

Participant Demographics

Participant	Gender Identity	Age	Year in College	Disability Category for IEP
Tulip	Female	21	Senior	ADHD and LD
Orchid	Male	21	Senior	LD
Wallflower	Nonbinary	20	Junior	ADHD
Wisteria	Female	21	Junior	ADHD
Carnation	Nonbinary	19	Freshman	ADHD

The researcher interviewed each participant individually using a semi-structured interview protocol (see appendix D). Since the aim of the study was to explore the perceptions

and experiences of the participants, interviews were selected as the data collection method because they “allows us to enter into the other person’s perspective” (Patton, 2015, p. 426). Each interview was transcribed and then coded in a three-step process. Initial coding was completed with In Vivo codes, which are codes taken directly from the participants language to “keep the data rooted I the participant’s own language” (Saldaña, 2013, p. 7). A second cycle of coding was completed to identify codes that share characteristics and group them into categories. A third and final cycle of coding was completed to identify themes, which Saldaña (2013) defined as “an *outcome* of coding, categorization, or analytic reflection” (p. 14, emphasis in original).

Results

Participants identified five common among their K-12 experiences. These five themes include: (a) effects of labeling, (b) educational experiences, (c) receiving support, (d) others’ perceptions, and (e) self-perceptions.

Effects of Labeling

The first theme that participants described was the effects of being labeled. This theme is defined as the act of receiving the label “LD” and the perceptions of said label by the student as well as others. All five participants identified recognizing the label but all had differing feelings about the label they received. All the participants described having complex relationships with the label they received during the K-12 experience with many noting a lack of understanding of the label at the time. One participant, Wallflower stated that the label “accurately described a piece of the picture, but that wasn’t the whole picture.” Four out of five of the participants noted that the label itself was not problematic but the treatment of the label by others and the school. Carnation summarized this by stating that the “problem isn’t the label, it’s the way the school

treats the label.” One participant, Orchid, even likened the label to a sticker stating that it is as if someone said “I’m just going to put like a random sticker on you and just you can’t really peel it off and then you’re kind of stuck with it.”

Educational Experiences

The second theme described by the participants is educational experiences. This theme is defined as experiences relating to education including their feelings about school, IEP meetings, accommodations, teachers, troubles with advocating for themselves, and changes to make to the education system. This theme is defined as everything within their experiences that falls under education. Four out of five participants noted bad experiences with certain teachers and feeling as though teachers treated them differently due to being labeled. All five participants voiced struggling to advocate for themselves during IEP meetings. Four out of five of the participants viewed their accommodations in a negative light, with three of the participants desiring to get rid of their accommodations. All five described a particularly memorable IEP meeting, with many describing their frustration during and after their meetings over their accommodations. After a difficult IEP meeting, Tulip described their utter disappointment stating:

‘They were saying that I would need to be in the same classroom again with the students with all of the disabilities and I wasn’t really getting accommodations. I sobbed. I sobbed in front of my new teachers. I sobbed in front of my mother just because, again, I had a really bad connotation with my learning disability and the labels that I had on my IEP because I felt they didn’t truly define me’.

Receiving Support

The third theme identified by the participants was the amount of support they received during their K-12 experience. This theme is defined as the many different supports special

education students received ranging from educators to peers. Four out of five of the participants touched on this theme, citing former teachers, therapists, and the LD community as their support. Wallflower stated that “my advisor... took care of a lot of the process for me, along with my guidance counselor” when they were in the process of receiving special education services. Wisteria noted their resource teachers “literally turned out to be some of my favorite teachers’ during their K-12 experience. One participant also noted bonding with other labeled students over mutual struggles or mutual hatred for educators who violated their IEPs, stating, “We all hated her because of it, so it was fine. It gave us something to talk about.”

Others’ Perceptions

The fourth theme that participants noted is others’ perceptions. This theme is defined as the act of feeling or being excluded or “othered” because of special education services or when in the process of receiving said services. All five of the participants identified feeling excluded or othered due to the special education services they received or in the process of receiving these special education services. One participant, Carnation, stated they learned through being excluded in discussions about their accommodations that “no one actually gives a shit about me. I’m the only person who has my back, you know?” Three of the five of the participants also noted struggles making friends due to being excluded and four of the participants also noted social struggles such as bullying and feeling as though they were missing out on social experiences. Many participants also stressed the stigma surrounding the LD label and how the perceptions of others made them feel differently about themselves. Another participant, Tulip, stated, ‘people just made you feel like you were something you weren’t.’ All the participants mentioned being pulled out, and over half described that being pulled out was a negative experience and alienating.

‘For middle school anyways, it was a big challenge just because it, like I said before, was just very alienating and just kind of like Ohh Like OK, you're going to like the special class when everyone else is going to like Chorus or like Spanish or like everything else. So, you know, just like kind of like pulls you out of what everyone else is doing. So, you can't kind of get that like quote-unquote normal experience. So, like, I know that was very much not a fun experience and feeling (Orchid).

Self-perceptions

The fifth and final theme recognized by the participants was their perceptions of themselves and all the different aspects that shaped these perceptions. The theme “self-perceptions” is defined as the way the participants view themselves. All five participants noted at least at some point feeling inadequate to their nonlabelled peers. Wisteria described this as:

I don't want to use the word like dumb or like stupid because I hate those words. But like, I guess sometimes, like, I did feel like maybe I wasn't like as like smart or quick or whatever as like other students.

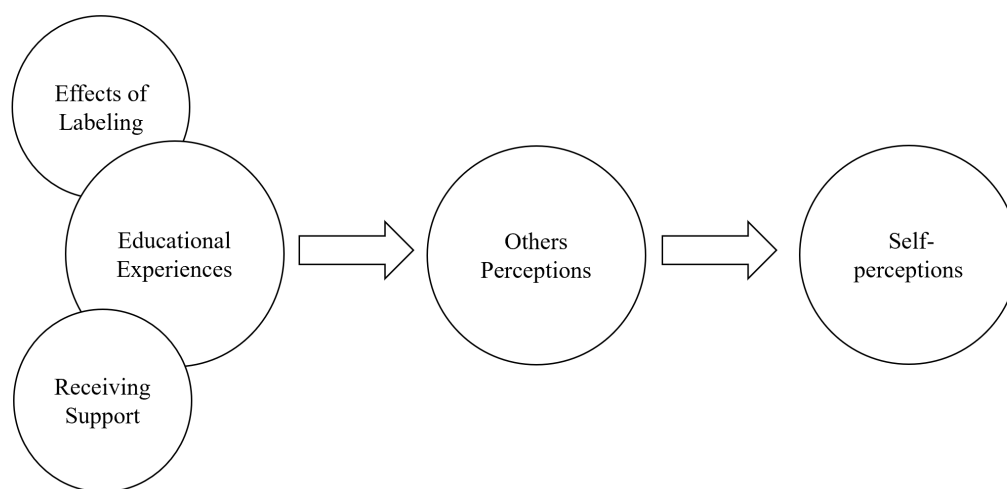
Four out of five of the participants described that they saw the way that their brain functions as different with Carnation summarizing this sentiment by stating ‘literally my brain functions differently’. All five participants noted feeling envious of their classmates who were able to complete assignments without struggle and asked themselves why they could not understand the material. Orchid describes it as ‘it did feel a little bit like Oh wow I can't be at the same level as everyone else’. All five participants also touched on the idea of being normal with four out of five participants noting that they did not feel normal during their K-12 experience. Tulip stated, ‘I felt like I could give up because I just felt like I will never be normal and I will never be like my peers that I see and I can never feel comfortable enough to explain them’.

Discussion

The driving purpose of the study was to investigate the perceptions of college students with previous IEPs for LD and/or ADHD during their K-12 educational experiences. Five major themes emerged from the study including (a) effects of labeling, (b) educational experiences, (c) receiving support, (d) others' perceptions, and (e) self-perceptions. The themes discovered throughout the interviews highlight the vital role of needing to combat negative perceptions of special education students, supporting special education students' self-perceptions, and clarifying special education services for students. The model demonstrating the themes explains their relationship and how each of the themes interacts with one another (see Figure 1).

Figure 1

Theme Relationships and Interactions



First, it was discovered throughout the semi-structured interviews that three themes, a) effects of labeling, (b) educational experiences, (c) receiving support directly worked alongside each other to contribute to the following themes. The (a) effects of labeling or the act of receiving the label “LD” along with the perceptions of said label by the student and others directly partnered with the other two themes. These themes (c) receiving support, and (b)

educational experiences, which reflected the amount of support received by the student and their experiences relating to education led to the theme (d) others' perceptions. These perceptions by others fell into categories: negative and positive as reflected by the students' experiences.

Ultimately, this led to either negative or positive self-perceptions. This was shown in the final theme featured in the diagram, (e) self-perceptions.

The model became useful in exploring how these themes related to one another. The model exemplifies how each of the themes contributes to one another. It shows how (a) effects of labeling, (b) educational experiences, (c) receiving support, (d) others' perceptions, and (e) self-perceptions. This could lead the student to harbor negative or positive self-perceptions depending on others' perceptions.

Conclusions

I explored my motivations as a senior, undergraduate student who desired to investigate the perceptions of college students with previous IEPs for LD and/or ADHD regarding their K-12 educational experiences. This study documented the voices and experiences of five college students who shared how the label affected them throughout their educational journey and how this compared to the literature on the subject. This gave crucial insight into how the LD label affects college students throughout their K-12 experience. The challenges experienced by these students highlight the need for changes to be made to enhance the experiences of future special education students with IEPs for LD and/or ADHD. As the interviews went on, it was found that more must be done to combat negative self-perceptions of special education students and that we must support special education students' self-perceptions. It was also discovered that special education students must be given more clarification on the services they are receiving. The combatting of negative self-perceptions can be done through the normalization of these services

within classrooms through the usage of texts that reflect students who have also received the LD label in a positive light. This can also be achieved through the usage of UDL and CRT techniques in the classroom. This would also support special education students' self-perceptions by supporting the students with accommodations and modifications through UDL in the classroom and fostering a positive relationship with these services. Further clarification can also be given to special education students on their services by special education liaisons and can be supplemented by further explanations by their educators and their guardians. This can be achieved by educating the parents on what these services mean and what they look like as well as the educators who will be teaching the student. Each of these recommendations can be supported through teacher-preparation programs that teach young educators how to use CRT and UDL within the classroom and how to ensure that students receive proper representation within the classroom. Additionally, young educators must be taught how to navigate and implement the services given to their future students and how to give students clarification on these services if needed. The study also highlighted the need for future research to be done mirroring this process with students from different disability categories. As a result of the study, the participants' voices demonstrated the many changes that can be made to better the experiences of future students with IEPs for LD and/or ADHD.

References

- Atanga, C., Jones, B. A., Krueger, L. E., & Lu, S. (2019). Teachers of students with learning disabilities: Assistive technology knowledge, perceptions, interests, and barriers. *Journal of Special Education Technology*, 35(4), 236–248.
<https://doi.org/10.1177/0162643419864858>
- Becker, H. S. (1963). *Outsiders: Studies in the sociology of deviance*. The Free Press.
- Briesch, A. M., Waldron, F. M., & Beneville, M. A. (2023). State Variation Regarding Other Health Impairment Eligibility Criteria for Attention Deficit Hyperactivity Disorder. *School Mental Health*, 15(3), 765–776. <https://doi.org/10.1007/s12310-023-09581-2>
- Bruefach, T., & Reynolds, J. R. (2022). Social isolation and achievement of students with learning disabilities. *Social Science Research*, 104, 102667.
<https://doi.org/10.1016/j.ssresearch.2021.102667>
- Children and Adults with Attention-Deficit/Hyperactivity Disorder. (2017). *ADHD? Learning Disability? It May Be Both*. <https://chadd.org/adhd-weekly/adhd-learning-disability-it-may-be-both/>
- Children and Adults with Attention-Deficit/Hyperactivity Disorder. (2019). *ADHD and Co-occurring Conditions*. <https://chadd.org/about-adhd/co-occurring-conditions/>
- Daley, S. G., & Rappolt-Schlichtmann, G. (2018). Stigma Consciousness Among Adolescents With Learning Disabilities: Considering Individual Experiences of Being Stereotyped. *Learning Disability Quarterly*, 41(4), 200–212.
<https://doi.org/10.1177/0731948718785565>
- DuPaul, G. J., Gormley, M. J., & Laracy, S. D. (2012). Comorbidity of LD and ADHD. *Journal of Learning Disabilities*, 46(1), 43–51. <https://doi.org/10.1177/0022219412464351>

- DuPaul, G. J., Chronis-Tuscano, A., Danielson, M. L., & Visser, S. N. (2018). Predictors of Receipt of School Services in a National Sample of Youth With ADHD. *Journal of Attention Disorders*, 23(11), 1303–1319. <https://doi.org/10.1177/1087054718816169>
- Ferri, B. A., Keefe, C. H., & Gregg, N. (2001). Teachers with learning disabilities. *Journal of Learning Disabilities*, 34(1), 22–32. <https://doi.org/10.1177/002221940103400103>
- Foundation for People With Learning Disabilities (2024). *Attention Deficit Hyperactivity Disorder (ADHD)*. <https://www.learningdisabilities.org.uk/learning-disabilities/a-to-z/a/attention-deficit-hyperactivity-disorder-adhd>
- Franz, D. J., Richter, T., Lenhard, W., Marx, P., Stein, R., & Ratz, C. (2023). The influence of diagnostic labels on the evaluation of students: A multilevel meta-analysis. *Educational Psychology Review*, 35(1). <https://doi.org/10.1007/s10648-023-09716-6>
- Gartland, D., & Strosnider, R. (2018). Learning Disabilities: Implications for Policy Regarding Research and Practice: A Report by the National Joint Committee on Learning Disabilities. *Learning Disability Quarterly*, 41(4), 195–199. <https://doi.org/10.1177/0731948718789994>
- Gold, M. E., & Richards, H. (2012). To label or not to label: The special education question for African Americans. *Educational Foundations*.
- Goldberg, R. J., Higgins, E. L., Raskind, M. H., & Herman, K. L. (2003). Predictors of success in individuals with learning disabilities: A qualitative analysis of a 20-year longitudinal study. *Learning Disabilities Research & Practice*, 18(4), 222–236. <https://doi.org/10.1111/1540-5826.00077>
- Haft, S. L., Greiner de Magalhães, C., & Hoeft, F. (2022). A systematic review of the consequences of stigma and stereotype threat for individuals with specific learning

- disabilities. *Journal of Learning Disabilities*, 56(3), 193–209.
<https://doi.org/10.1177/00222194221087383>.
- Hallahan, D. P., Kauffman, M. James, Pullen, C. Paige (2019). *Exceptional Learners: An Introduction to Special Education* (J. M. Kauffman & P. C. Pullen (Eds.); Fourteenth edition.). Pearson.
- Hebbeler, K., & Spiker, D. (2016). Supporting young children with disabilities. *The Future of Children*, 26(2), 185–205. <https://doi.org/10.1353/foc.2016.0018>
- Individuals with Disabilities Education Act, 20 U.S.C. § 1400. (2004).
- Ingesson, S. G. (2007). Growing Up with Dyslexia. *School Psychology International*, 28(5), 574–591. <https://doi.org/10.1177/0143034307085659>
- Kim, R. (2014). Who can put ‘learning disability label’ on your child? Issues of sociocultural affects on learning disability. *International Journal of Elementary Education*, 3(2), 30. <https://doi.org/10.11648/j.ijeedu.20140302.12>
- Leiter, V. (2007). “Nobody’s just normal, you know”: The social creation of developmental disability. *Social Science & Medicine*, 65(8), 1630–1641.
<https://doi.org/10.1016/j.socscimed.2007.06.006>
- Lightfoot, A., Janemi, R., & Rudman, D. L. (2018). Perspectives of North American postsecondary students with learning disabilities: A scoping review. *Journal of Postsecondary Education and Disability*, 31(1), 57-74.
- Link, B. G., & Phelan, J. C. (2001). Conceptualizing stigma. *Annual Review of Sociology*, 27(1), 363–385. <https://doi.org/10.1146/annurev.soc.27.1.363>

- Maki, K. E., Floyd, R. G., & Roberson, T. (2015). State learning disability eligibility criteria: A comprehensive review. *School Psychology Quarterly*, 30(4), 457–469.
<https://doi.org/10.1037/spq0000109>
- Merriam, S. B., & Tisdell, E. J. (2016). *Qualitative research: A guide to design and implementation* (4th ed.). Jossey-Bass.
- National Center for Education Statistics. (2023). Students With Disabilities. *Condition of Education*. U.S. Department of Education, Institute of Education Sciences. Retrieved May 2, 2024 from <https://nces.ed.gov/programs/coe/indicator/cgg>.
- National Joint Committee on Learning Disabilities. (2011). Comprehensive Assessment and Evaluation of Students with Learning Disabilities: A Paper Prepared By The National Joint Committee on Learning Disabilities: June 2010. *Learning Disability Quarterly*, 34(1), 3–16. <http://www.jstor.org/stable/23053293>
- Orly, I., & Margalit, M. (2014). Socioemotional self-perceptions, family climate, and hopeful thinking among students with learning disabilities and typically achieving students from the same classes. *Journal of Learning Disabilities*, 47(2), 136–152.
[doi:10.1177/0022219412439608](https://doi.org/10.1177/0022219412439608)
- Patton, M. (1990). *Qualitative evaluation and research methods*. SAGE Publications.
- Saldaña, J. (2013). *The coding manual for qualitative researchers*. SAGE Publications.
- Savaria, E., Underwood, K., & Sinclair, D. (2011). If Only I Had Known...: Young People's Participation in the Construction of Their Learning Disability Labels. *International Journal of Special Education*, 26(3), 92-105. <https://doi.org/10.32920/24150447.v1>

Shifrer, D. (2013a). Stigma of a Label: Educational Expectations for High School Students

Labeled with Learning Disabilities. *Journal of Health and Social Behavior*, 54(4), 462–

480. <http://www.jstor.org/stable/43186869>

Shifrer, D., Callahan, R. M., & Muller, C. (2013b). Equity or Marginalization? The High School

Course-Taking of Students Labeled with a Learning Disability. *American Educational*

Research Journal, 50(4), 656–682. <http://www.jstor.org/stable/23526101>

US Department of Education. (2020). *A guide to the Individualized Education Program*.

<https://www2.ed.gov/parents/needs/speced/iepguide/index.html>

Appendix A

IRB Approval

Attachments:

- Informed Consent Form - M Ambler.pdf
- Expedited Review Approved by Chair - IRB ID: 6241.pdf



Expedited Review Approved by Chair - IRB ID: 6241

To: Madelyn Ambler
From: Salem State Institutional Review Board
Subject: Protocol #6241
Date: 09/15/2023

The protocol **Labeling Learning Disabilities: A Qualitative Analysis of Perceptions of Former Special Education Students on Their Educational Experiences** has been approved by the IRB Chair under the rules for expedited review on **09/15/2023**.

As principal investigator and researcher, you are bound by the assurances outlined in the IRB application and agreed upon at application submission. Please notify the IRB in writing of any changes to the approved protocol or of any adverse or unexpected events. You must use the IRB approved consent form or contact the IRB to propose changes. Continuing review is not required for exempt or expedited studies unless stipulated by the IRB at the time of approval or for proposals reviewed by the Full Board in which research participant interventions or interactions are complete, and the only remaining activities relate to data analysis.

The University appreciates your efforts to conduct research in compliance with the federal regulations effective January 21, 2019, institutional policy effective September 1, 2017 and the IRB Procedures Manual effective August 12, 2021, which have been established to ensure the protection of human subjects in research.

This research project has been reviewed by the Institutional Review Board at Salem State University in accordance with US Department of Health and Human Services Office of Human Research Protections 45 CFR part 46 and does not constitute approval by the host institution.

Please contact the IRB with any questions at 978-542-7177 irb@salemstate.edu.

Thank you,
SSU IRB
irb@salemstate.edu

Appendix B

Recruitment Flyer

Volunteers Needed!

Research Study Opportunity

**When?**

Interviews will be conducted in September - Late November either on Zoom or in-person

Questions?

Contact Madelyn Ambler
m_ambler@salemstate.edu

We are looking for SSU student volunteers between the ages of 18-24 who would be willing to share their experiences as students who had an IEP or a 504 plan for a learning disability during their K-12 experience.



Appendix C

Informed Consent Form

INTRODUCTION: Please read this form carefully. If you consent to take part, as a participant, in the studies being undertaken by Dr. Brian Ernest and Madelyn Ambler, then you should sign the consent form. If you have any questions, or are unsure about anything, then you should not sign until your concerns have been resolved and you are completely happy to volunteer.

The study is taking place to investigate the perceptions of students who were labeled with learning disabilities and its overall impact on their K-12 educational experiences. You will be interviewed about your K-12 educational experiences as a student with a learning disability. This involves answering questions about your educational experience, your disability, and your feelings. The information gained from these questions will then be used to speak to the impact of labeling on students with learning disabilities and the general experiences of students with learning disabilities. Any possible personal identifiers (such as your name) will be removed and will not be included in the study. Some questions that may be asked may be difficult to answer or cause discomfort. You may take a break and/or discontinue the interview at any time with no consequence.

PARTICIPATION: You may at any time withdraw from the study. You do not have to give any reason, and no one can attempt to dissuade you. If you ever require any further explanation, please do not hesitate to ask.

RISKS: There are no foreseeable physical risks involved in participating in this study other than those minimal risks encountered in day-to-day life. You may have emotional reactions to some of the questions being asked about your experiences. You may take a break and/or discontinue the interview at any time with no consequence.

BENEFITS: There are no direct benefits to you for your participation in this study. The benefits of this study in general are to understand the experiences of students with learning disabilities and the education and social emotional impact of the learning disability label.

CHOOSING TO WITHDRAW FROM THE STUDY: Your consent and participation in this study are completely voluntary. You can withdraw from the study for any reason at any time without consequences of any kind, and you can withdraw your consent at any time without consequences of any kind. Please contact the principal investigator should you wish for your data not to be used.

ANONYMITY: Data obtained during this study will not be able to be linked to your identity. Each person participating in the study will be given the option to choose a name they would like to be referred to as from a list of flowers to ensure anonymity.

This study has received approval in accordance with current University regulations. You will also be provided with mental health resources, such as Salem State's Counseling and Health Services, the National Suicide Hotline, and the contact information for Disability Services.

For questions or concerns about this study, please contact Madelyn Ambler at m_ambler@salemstate.edu.

Initial if in agreement

1. I confirm that I have read and understood the attached information sheet for the above study. I confirm that I have had the opportunity to consider the information and ask questions and that these have been answered satisfactorily.	
2. I understand that my participation is voluntary and that I am free to not answer any questions I am uncomfortable with or withdraw at any time without negative consequences without giving any reason.	
3. I agree to take part in this study.	
4. I understand that as a result of taking part in this study I will experience any feelings associated with the retelling of my past experiences in efforts to better teaching practices to promote the positive experiences of these students or improve instructional practices by exploring the implications of their experiences.	
5. I understand that the results of this study may be published and/or presented at meetings and may be provided to research sponsors or regulatory authorities. I give my permission for my anonymous data, which does not identify me, to be disseminated in this way. The information will be kept confidential with the exception of information which must be reported under Massachusetts and Federal law such as cases of child or elder abuse.	
6. I consent for video/audio recordings of me to be taken during the experiment for use by the study team only (my image will not be shown to others / and will be destroyed after the data has been analyzed).	

Name of Participant:	Date:	Signature:
Name of person taking consent:	Date:	Signature

Appendix D

Interview Protocol

Demographic Questions

1. What is your gender identity?
2. What age are you currently?
3. What is your current major?
4. Did you go to private or public school?
5. How old were you when you were diagnosed with a learning disability?

Interview Questions

1. How did you feel about receiving the (learning and/or ADHD) disability label?
 1. Did you feel included or excluded in the process and in what ways?
 2. Did you feel the label accurately described you? Why or why not?
 3. Was there anything you would change about the process of receiving the label?
2. Tell me about a significant IEP meeting or a 504 meeting.
3. Tell me some ways that you think your educational experience was similar to students without disability labels.
4. Tell me some ways that you think your educational experience was different from students without disability labels.
5. How did your IEP/504 Plan impact your academic performance in school?
6. How did your IEP/504 Plan impact how you felt about school?
7. How did your IEP/504 Plan impact how you felt about yourself?
8. What is your opinion about the learning and/or ADHD disability label?
9. What, if anything, would you change about the current education system?
10. Is there anything you would like to say about your experience being a student with a learning disability label that I haven't asked you?