

# Reading Rosie: The postmodern disabled child

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*This paper reads disabled childhoods in a number of distinct ways in order to stimulate debate around the kinds of stories that researchers and practitioners tell about the children that they work with. Narratives of bio-power – discourses of the self – have expanded as knowledge from the human and social sciences grow and institutions of society become more pronounced. Nowhere is this growth of bio-power more evident than in the lives of disabled children. It is becoming increasingly apparent that distinct bio-political discourses are building up around disabled children at the same time as these children have become the focus of participation, policy and service provision. Consequently, we believe the time is ripe to step back from the current discursive context to question how we as researchers and practitioners understand the disabled children whom we work with. Our aim, then, is to deliberately and self-consciously read the story of Rosie – a disabled child we have worked with in our research – guided by four disability discourses, with an emphasis on making this reading useful to practitioners in the area of childhood and disability.*

*The first reading attends to the teachings of what we describe below as the autism canon, the second reading is located in an orthodox social model approach to disability, the third draws on a Nordic relational model of disability, and the fourth is filtered through what we term a socio-cultural lens. In narrating Rosie from different discursive repertoires, our aim is to explicate different understandings of disability and child that emerge and to warn against the dominance of readings which threaten to pathologise, other and separate disabled children from their peers, their families and the wider community.*

**Keywords:** children; disability; postmodernism; narratives; critical disability studies; autism.

## Children, disability and postmodernity

**R**ECENTLY, one of us asked (Goodley, 2011, p.103): Why is the talk of disability so pathological? How are common sense ideas about impairment influenced by professionals and scientists? What possibilities are there for disrupting these ideas and offering more enabling alternatives? In this paper we attempt to address these questions. To do so we adopt what has been termed a poststructuralist disability studies approach (Corker & Shakespeare, 2002; Goodley, 2011; Tremain, 2005). This approach recognises what McRuer (2002) terms the ‘epidemic of signification’ through which the bodies and minds of disabled people are inscribed with a thousand words that threaten to leave them with deeply disablist ‘epidermal schema’. Schemas are relics of societal discourses, emanating from expert and lay knowledge, reproduced in institutions of family, school,

prison, disability service and hospital (Goodley, 2011, p.104). Following Parker (1992), these discourses are sets of statements that construct objects (‘the intellectually disabled’), make reference to subjects (‘intellectually disabled children’), boast disciplinary histories (educational psychology, paediatrics), support institutions (schools, clinics) and reproduce power relations (adult/child; psychologist/client) with ideological effects (special or inclusive education). Discourses fold around people to give the effects of consciousness (Parker, 1997, p.7), reproducing and transforming the material world (Nikander, 1995, p.11). We use concepts such as ‘intellectually disabled’ as if they were ‘real, naturally occurring entities’ because they are objects created by ‘natural’ bio-political discourses that have come to be known as ‘truth’. ‘Child’ and ‘disability’ are complex

discourses, especially when they intersect. In recent years we have witnessed an exponential rise in the sheer volume of impairment objects (e.g. Attention Deficit Hyperactivity Disorder, Special Educational Needs, Autism, Emotional Behavioural Disorder) that have been applied to children, who are subjected to a battery of diagnostic tests that purport to describe these phenomena objectively (Goodley, 2011, p.114). A strange paradox emerges: While the child and disabled people are ever-more present in the cultural psyche, *how* they are being understood is becoming increasingly difficult to unravel.

Simultaneously, while discourses of childhood disability permeate cultural locations, disabled children have been afforded a place at the policy table. Increasingly, in our post-*Every Child Matters* (DfES, 2004) context, disabled children as service users have been offered opportunities to participate in debates around the constitution and running of services. Disabled children have collectively participated in children's panels, service user consultation meetings and school councils (Franklin & Sloper, 2007). Individually, disabled children are supposed to be active participants in decision making about their care and education, for example through individual educational plans. Moreover, the right to participate has been globally accepted for a number of years:

*Article 13 states that: The child shall have the right to freedom of expression: this right shall include the freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of the child's choice. (UNICEF, 1989, n.p.)*

While there have been many positive changes, we still view these developments with scepticism. As Brandon and Towe (1989, p.20) argued more than 20 years ago:

*Participation has replaced 'community' as the fresh aerosol term to tart up descriptions of jaded services. The professional journals run endless articles about involving consumers in services in management, planning and*

*running of project. But does the participation movement really amount to anything – or is it simply a new paternalism?*

One of the key reasons for suspecting this new paternalism relates to the kinds of discourses of disability that congregate around disabled children. It is becoming increasingly apparent that distinct bio-political discourses are growing around disabled children at the same time as children have become more the focus of participation, policy and provision. Promulgated by the bio-power of psychology, medicine and education – and their global reach – these diagnoses actually construct the very objects ('the autistic child') and subjects ('the child with autism') they seek to describe (Tremain, 2006, p.186).

From a Foucauldian perspective, there is no such thing as 'impairment' outside of these discourses (Tremain, 2006, p.190). Any 'hard biological fact' that we might want to point to already has a long history of discursive moulding and institutional usage. The impaired body is 'an educated, parented, observed, tested, measured, treated, psychologised entity with a long history of being materialised through a multitude of disciplinary practices and institutional discourses' (Goodley, 2011, p.114). The impaired body of the disabled child shares all of this shaping due to its consistent engagement with a whole plethora of disabling practices and discourses.

We could argue that disablism is on the increase. The current British Conservative-Liberal Coalition Government's push for a 'Big Society' emphasises individual and familial responsibility for children over the intervention of the state. Moreover, the Government has clearly signalled the intention to end the 'bias' towards inclusion (Runswick-Cole, 2011a). Consequently, we are witnessing a discursive turn from inclusive and rights-based notions of disabled childhoods to more traditional and familiar concepts of the disabled child as passive, tragic, parasitic and burdensome (see Runswick-Cole & Goodley, 2011, for more

discussion of this issue). It seems, at least to us, that there is a deep contradiction between these bio-political discourses of 'child as active participant in decisions around their lives' and 'child as tragically impaired passive object'.

Consequently, we believe the time is ripe to move back from the current discursive context to question how we as researchers and practitioners understand the disabled children with whom we work. Such a task is made even more important since we live in a culture of service user participation and consultation. We follow Titchkosky's (2008) call to watch our watchings and read our readings. We ask: What kinds of readings do we draw upon to make sense of disabled children? To what extent are our narratives only partial accounts of the complexity of 'disability' and 'childhood'? Are we in danger of empowering dangerous readings that create pathological versions of childhood? Paraphrasing Snyder and Mitchell (2001, p.381), we suggest that by moving disabled children into a social and political context and away from their historical mooring as medical and supernatural oddities, the stories we tell of those children have the potential to 'transform understandings of physical and cognitive difference from that of malfunction within particular bodies to the scenario of a cultural production, writ large'.

### **Researching with Rosie**

This paper draws on a number of accounts of disabled children and their parents, collected as part of a project funded by the Economic and Social Research Council (RES-062-23-1138) (see project website: <http://post-blair.posterous.com/>) 'Does every child matter, Post-Blair: Interconnections of disabled childhoods'. Our overarching aim was to ask what life is like for disabled children and young people and their families in the aftermath of the changes for children's policy and practice since 1997, set in motion by the New Labour government in Britain. The research was carried out in England over

a period of 32 months from September, 2008 to May, 2011.

Overall, our participants included disabled children, their parents/carers and professionals who work with disabled children, including teachers, third sector workers, health workers and social workers. Children had been given a range of impairment labels including autism, cerebral palsy, developmental disability, Down's syndrome, achondroplasia, profound and multiple learning disability and epilepsy. The researcher (Katherine) acted as research fellow to the project and was involved on a day-to-day basis with the design and implementation of the empirical work (as well as the analysis), accessing families via parent support groups and other community contacts. Our sampling also had an element of snowballing, as potential families were informed by word of mouth, emails and via websites about our research. The ethnography involved the researcher attending children's birthday parties, bowling and going shopping with families and was also invited to impairment-specific leisure activities, including an autism specific social club, parent groups, and user consultation meetings set up by local authorities, services and professionals to access the views of families. A few of the families involved in the interviews were also involved in the ethnography, but the latter was extended to include different children and their families.

We interviewed five children from the 4 to 11 and six from the 12 to 16 age brackets. The children were interviewed at least three times. In our work with children we adopted the following principles: To treat children as experts and agents in their own lives; to use multi-methods in recognition of the different 'voices' or languages of children; and to seek to establish a climate of listening (Morris, 2003). We were aware of the need to adapt the research tools to suit each child or young person (Goodley & Runswick-Cole, 2012). With this in mind we drew on a range of approaches, using photography, mapping, drawing and film

amongst other methods (see Clark & Moss, 2001; Goodley & Runswick-Cole, 2012; Runswick-Cole, 2011b). In this paper we focus on research encounters with 11-year-old Rosie (a pseudonym).

The researcher met Rosie in her home four times over the course of about eight weeks. Consent was sought and gained from Rosie's parents, but we also sought Rosie's 'assent' (Cocks, 2006), checking that she understood what was asked of her and was happy to participate, throughout the time spent with her. The meetings were conducted at a time and place that suited Rosie; she was given clear choices about whether or not she wished to take part each time she met the researcher. Rosie was able to end the meeting at the time of her choosing. In the course of the four meetings, data collected included voice recordings, photographs taken by Rosie or under her direction and the researcher's notes.

With Rosie's 'data' spread out before us we were left with some interesting questions about how we made sense of its personal and cultural significance. Our first task was to write the story presented below. We acknowledge that there is no such thing as a neutral story and when we turn from data to text we are already in the process of infecting the narrative with our own subjectivities (see Goodley et al., 2004). Perhaps more significantly, as we reviewed the story we played around with a number of readings, identified a number of possible practitioner, activist and researcher audiences and asked how Rosie would come out from our readings of her 'data'. We deliberately and self-consciously read our readings of Rosie. We wanted to consider what distinct epistemological narratives would tell about her. This led us to four contrasting readings that we develop below, but introduce here.

The first account attends to the teachings of what we describe below as *the autism canon*; the second is located in an orthodox *social model of disability* interpretation; the third seeks to utilise a *Nordic relational model of disability*; and the fourth is filtered through a

contemporary *socio-cultural lens* of the contemporary child in a digital age. We acknowledge that our analyses might be seen as contributing further to the bio-political machinations around disabled children. After all, our research identifies objects of study (disabled children); it seeks to access their self-perceptions as disabled child subjects and we, in some way, are scaffolding further interpretations around their lives. However, our defence is that we are aiming to explicate different understandings of 'disability' and 'child' that do get used by practitioners, researchers and policy-makers to make sense of children like Rosie and to warn against the dominance of those readings that threaten to pathologise, other and separate Rosie from her peers, her family and the wider community. The readings that we develop are written in the style of case notes, practitioner-like diagnoses and analytical case studies that draw on our knowledge of Rosie and her family. The analyses are deliberately selective, less interested in the *truth* of Rosie and more focused on telling *particular tales* with specific characters, plot and destinations in mind. We aim to provoke and to unsettle. But before we do this, let us view the 'story' on which we will base our readings. The story we present below attempts to give some background to Rosie and her life. We do not present it here as if it were some theory-free or analytically untainted extract from the data. We accept that the way we present Rosie reflects our commitment to think imaginatively and thoughtfully about her experiences and ambitions. With subjective ambitions in mind we seek to introduce Rosie to the reader in a way that gives some insight into her life, contaminated as it is by our preoccupations as researchers and writers of this article.

### **Rosie's story**

Rosie is 11-years-old. When the researcher met her for the first time, Rosie had just left her mainstream primary school to attend secondary school, a special school for children with 'learning disabilities'. Rosie

lives in a small terraced house in a town in the north-west of England with a mixed population and high levels of social deprivation. The streets next to Rosie's have row upon row of boarded-up houses, peppered with graffiti.

Rosie lives with her mother and father and she has an older brother who has recently left home to study at university. The researcher visited Rosie's parents, Don and Angela, at home before she met Rosie. Don is a teacher and Angela works part-time in an office job; she has recently reduced her hours to be back in time for Rosie when she comes home from school. Rosie's parents told us that Rosie was given a diagnosis of autism and learning difficulties when she was 3-years-old. Don and Angela felt Rosie had been all right at her primary school, but they felt that for secondary school she needed more specialist provision. The family is a member of a local support group for families of children with autism. Angela regularly attends the parents meetings and is on the organising committee. Don, Angela and Rosie attend organised trips together, going to a variety of activities including a children's farm, the cinema and bowling with other families with a child with autism. Don, Angela and Rosie enjoy these days out. Rosie talked enthusiastically about her photographs of the farm trip and Don and Angela talked about how much they enjoyed going out with other families 'like theirs', where other people 'understood' if Rosie behaved a bit differently. Rosie does not have many friends round to play at home; she does not usually enjoy the business of other children in the house.

Katherine always met Rosie in Rosie's front room. The front room had books spilling out of the bookcases onto the floor. Picture books of Greek myths sit alongside vegetarian and 'authentic' Indian cookery books between a long line of reference books. There are neatly organised DVDs behind the television, including *The Tweenies*, *The Goodies* and *Monty Python*. A hamster scuttles about in one corner of the room and

Rosie's flute and music stand occupies another corner.

When Katherine and Rosie first met, Rosie particularly wanted to show the researcher her photographs of school, holidays, outings and birthday parties, so the researcher took a couple of disposable cameras (one for to use with Rosie, and one for Rosie to take away and use later – or so we thought) for Rosie. Rosie had never taken photos before but she immediately took to the disposable camera. Rosie had just bought a new toy – Kitty, a small soft toy bought with vouchers saved from a cereal packet. The researcher showed Rosie how to use the camera and asked her to take photos of 'things she liked'. Rosie immediately asked her mum, then her dad, to pose for a photo with Kitty. She then asked the researcher to pose for a photo with Kitty and instructed her dad to take a photo of herself and Kitty. Rosie proceeded systematically to place Kitty next to her favourite things and took photos of: Kitty and the hamster, Kitty and *The Tweenies* DVD, Kitty and the ballet programme, Kitty and the Sylvanians catalogue, Kitty and the Disney's *Cinderella* DVD, Kitty and the television, Kitty and the 'old kettle', until the camera was full. The researcher gave her the second camera (the one for later!) and Rosie continued to take photos until the camera was 'finished', at which point Rosie turned on the television and the photography session was over. Two weeks later, Katherine went back to visit Rosie to give her the photos she had taken and was greeted with more photos taken by Rosie of an outing with the support group.

### Reading Rosie

We now provide four readings. We acknowledge that our interpretations are partial yet, through offering a multiplicity of readings, we seek to challenge grand, overarching, totalising narratives that speak of certainty, deficit and lack.

Our first reading mirrors this attention to lack and is straight from the autism canon. In this reading, one that we find problematic

to say the least, autism is a biological deficit: 'a devastating developmental disorder' (Happé, 1999) resulting from a 'neurological abnormality' (Frith, 2003, p.1), 'due to a physical dysfunction of the brain' (National Autistic Society, 1998, p.26). In this view autism is not a new condition. Indeed, some suggest that it has been around since Biblical times (Mathew & Pandian, 2010), but autism was not formally recorded until the 1940s by two psychiatrists working independently of one another – Kanner (1943) in the US and Hans Asperger (1944) in Austria – the fathers of autism (McGuire, 2011). In 1985, Baron-Cohen et al. first posited the view that autistic people do not have a 'theory of mind', the view that they have 'mind blindness' and are unable to read the thoughts of others or even to recognise that the thoughts of another person might be different from their own. In 1991, Wing put forward the view of autism as a 'triad of impairments' (Wing, 1991): Difficulty with social communication, social interaction and social imagination. A reading from the autism canon suggests that 'autistics' are commonly thought to share a number of characteristics including: a love of routines; sensory sensitivity difficulties; obsessive interests; a lack of empathy; difficulty making friends; pedantic speech; and poor non-verbal communication (Burgoine & Wing, 1983). Autism is almost universally recognised as a medical condition that is real and biologically based, co-morbid with other conditions such as dyspraxia and epilepsy, and diagnosis has been considered to be hugely important and 'liberating' for sufferers and affected families (Shakespeare, 2006, p.71).

The second reading looks through the lens of the social model of disability. As such it offers a direct challenge to the view of Rosie constructed from within the autism canon – a position that rests on medical and individual constructions of disability. A social model orthodoxy challenges traditional approaches to disability that have been framed by individual and medical models (Oliver, 1990). Traditionally, both medical

sociology and the sociology of health and illness literatures were premised on an understanding of disability as an individual, medical deficit. As a result, disabled people have been characterised as deviant and in lack and, therefore, in need of professional support. The social model, on the other hand, rejects individualised and medicalised understandings of disability. Social oppression theories of disability recognise disability not as an individual, medical problem, but as the product of a disabling society that 'is geared to, built for and by, and controlled by non-disabled people' (Swain et al., 2003, p.2). The social model has become central to political activism and academic inquiry in Britain (Thomas, 1999) and, as a result, it has been described as the Disabled People's Movement's 'big idea' (Hasler, 1993). In 1976, The Union of the Physically Impaired Against Segregation (UPIAS) published the *Fundamental Principles of Disability*. The UPIAS definition makes a crucial distinction between impairment and disability:

*...we define impairment as lacking part of or all or of a limb, organ or having a defective limb, organ or mechanism of the body; and disability as the disadvantage or restriction of activity caused by a contemporary social organisation which takes no or little account of people who have physical impairments and thus excludes them from the mainstream of social activities. Physical disability is, therefore, a particular form of oppression.*  
(UPIAS, 1976 cited in Oliver 1996, p.25)

Research framed by social oppression understandings of disability and childhood has repeatedly shown that disabled children are more likely to suffer structural and material disadvantage than other children (McLaughlin et al., 2008). Recently, the campaign group, Every Disabled Child Matters (EDCM, 2007), carried out a survey of 1800 families with disabled children and found that only six per cent reported themselves to be 'comfortably off', with 93 per cent reporting themselves as being in 'financial difficulty'. EDCM identified two specific challenges in terms of poverty and disabled

children. The first was the considerable extra and on-going costs of caring for a disabled child, and the second was the difficulty parents and carers had in entering and sustaining employment, resulting in a significant income penalty for the family. In this sense, then, we can argue that families who boast a disabled child are disabled families, privy to structural inequalities and marginalisation (McLaughlin et al., 2008).

The third reading that we develop in our reading of Rosie attends to a Nordic relational model of disability (see Goodley, 2011, for overview). As Tøssebro, (2004, p.3) explains, in Nordic countries disability has been defined as '*a mismatch between the person's capabilities and the functional demands of the environment*' (emphasis in the original). This suggests that there is a gap between individual functioning and the demands of the society or environment that, in turn, produces 'disability'. In this sense, disability is 'a relationship, and it is relative to the environment' (Tøssebro, 2004, p.3). Tøssebro (ibid.) gives an example of the relational nature of disability: 'A blind person is not disabled when speaking on the telephone and is exceptionally able when the lights have gone out'. By defining disability as the result of a relationship *between* the person *and* the environment, Nordic relational models differ from social model accounts (that firmly locate disability within the environment) and functionalist accounts associated with the autism canon (that place the problems of disability within the person). Moreover, 'normalisation' principles are a key element of the Nordic approach. Normalisation principles suggest that, through 'empowerment', it is possible to make patterns of everyday living for disabled people that are as close as possible to the regular circumstances of life in the wider society (Traustadóttir, 2004).

Our final reading attends to the photographs from the perspective of what we term a socio-cultural stance. One analytical trope picked up by this perspective is the significance of digital culture in the lives of young

people. Children are great lovers and users of technology. Marsh (2005) suggests that children are best described as 'digikids'. Technology and pedagogy have become folded into one another through the growing use of technology in schools at least in Global North and rich countries. For Merchant (2006), an important aspect of digital technology lies in the ways in which it is used to demonstrate the user's relationship to popular culture. Indeed, for many children, they 'are apprenticed to digital writing through informal learning in out-of-school contexts' (Merchant, 2006, p.105). This is an important point because much of what we know about creativity and learning for 'digikids' and disabled kids alike is gathered in school contexts. Rosie, in contrast, presents us with insights into a key area of her out-of-school life, the relatively private family household. One only needs to speak to parents of young people to evidence the centrality of digital technologies in the lives of young people (perhaps at times in contrast to parents' own difficult relationships with technology!) From this perspective we approach a reading of Rosie that may, at times, lose the signifiers of disability. We now 'read' Rosie with these distinct perspectives in mind in an attempt to excavate the ways in which particular epistemological persuasions will give rise to very different narratives of Rosie.

**(i) Rosie has autism – a reading from the autism canon.** Despite autism affecting three times as many boys as girls (NAS, n.d.), Rosie has a diagnosis of autism. Her condition was identified when she was three as a result of her parents' concern about her significant language delay and lack of social skills. Ripples of the condition are often found in families with children with autism, with non-autistic relatives often displaying autistic traits (Piven et al., 1997). It is not, therefore, surprising that Rosie's older brother is studying natural science at university. The data demonstrate that Rosie suffers from many of the characteristics typical of an

autistic child. Rosie is object-focused rather than people-focused. Rosie took a photo of her mother, father and the researcher, but the primary focus of these pictures was her new toy, Kitty, that is her latest obsession. This object focus is typical for autistic children. As she took the photos, Rosie also demonstrated an obsessive preoccupation with patterning as she organised the shots in a systematic way, demonstrating her tendency to perfectionism (Attwood, 2007).

Encouragingly for her future development, Rosie has more than one special interest. As well as obsessing about Kitty, her new toy, she also shows an obsessive interest in *Goodies* DVDs and Greek myths. Rosie has an impressive knowledge of vocabulary on the topic of Greek myths, however, this seemingly developed area of competence is a product of her fascination with mythology and should not distract from an understanding of the devastating impact of autism and learning difficulty on her life. However, it is useful to continue to channel Rosie's obsessive interests positively in terms of her education with the aim of widening her vocabulary. Rosie is educated in a special school, as she would clearly be unable to function in a normal mainstream school. Unusually, Rosie's father noted, unlike many autistic children Rosie does not enjoy *Thomas the Tank Engine* DVDs.

Typically for an autistic child, Rosie has an impressive memory (Attwood, 2007). Rosie was able to recite the plot lines of her favourite DVDs in great detail. However, she struggles with team situations (*ibid.*) and is very self-directed, following her own agenda. Once she had tired of the activity of taking photographs, it was not possible to re-engage her attention. Rosie communicates in a typically autistic monotone that varied little throughout the research encounter. As the research encounters took place in her own home, Rosie was familiar with the sensory stimuli around her, although she did struggle when the sun moved round onto her face.

Rosie's photographs offer a fascinating insight into the autistic mind and allow us to enter her world, albeit briefly.

**(ii) Rosie is disabled – a reading from social model orthodoxy.** Rosie lives in an area of social deprivation in a town in the north-west of England. Rosie's father works, but, typically for mothers of disabled children, Rosie's mother has been forced to reduce her part-time work because of difficulties in finding appropriate and affordable child-care for Rosie (EDCM, 2007). All of the research encounters took place in the home. This is not surprising. For many families living with disabled children, simply leaving the house requires the family to overcome a significant number of barriers. First, there are often access issues in terms of negotiating doorsteps, accessing public transport and finding physically accessible locations to visit. However, for Rosie's family it is attitudinal barriers that mean that they are confronted by 'tuts' and stares as Rosie behaves 'differently' outside the home (Ryan, 2005).

Disabling attitudes mean that Rosie is marginalised in her local community and subject to the processes of exclusion. Rosie attends special school, revealing the failure of schools to implement the principles of inclusive education (CSIE, n.d.). Rosie's attendance at special school also reflects an inability on the part of her parents to see that their children could be included in mainstream education (BCODP, 2005). While parents can and do act as allies to their disabled children, they are also the 'agents of disablism' (Thomas, 1999) and this is also evidenced by Rosie's parents' removing her from mainstream leisure activities and, instead, accessing segregated leisure activities for children with her particular impairment.

Rosie's story demonstrates the continued presence of the persistent material, structural and attitudinal barriers to the inclusion of disabled people and the continued pressing need for barrier removal.



**(iii) Rosie has a world around her – a Nordic relational model reading.** Rosie is autistic. Rosie's story reveals a happy, playful child interacting with her parents and the researcher in her own home. Rosie's parents and the researcher are attentive to Rosie, allowing her to take charge of the camera and set her own agenda in choosing what is to be photographed and how. Rosie is comfortable in her home environment, supported by her parents. However, when other children visit the home, the environment because busy and confusing – there is a person/environment mismatch that causes Rosie difficulty. Rosie would prefer to be in a less busy environment with people in it who support her. Rosie loves going to the theatre and watching her favourite shows and characters. This is an environment in which Rosie thrives.

Rosie enjoys school. She is encouraged to enjoy her passion for Greek myths and to enjoy the activities there, including learning to play the flute. Rosie and her parents feel the school environment meets her needs. Caring and enabling professional experts support Rosie's inclusion in the special school environment.

In terms of normalisation, the family is able to access many of the regular activities of the wider society, going to the theatre or the park, but Rosie needs support in these environments in order to ensure that they are accessible for her. 'Tuts' and stares suggest that Rosie's behaviour, status and appearance are not culturally 'normative' (Wolfensberger, 1980) as she stands out in the crowd. Furthermore, unlike many other mothers in the UK, Rosie's mother is unable to work full-time because of the lack of accessible and affordable childcare. The family is financially worse off than families without disabled children living with them with two parents working full-time. It could be argued that the family has yet to be empowered (with professional support) to lead a 'normal' life.

**(iv) Rosie has a camera – a socio-cultural reading.** Children are great lovers and users of technology. Marsh (2005) suggests that children are best described as 'digikids'. Technology and pedagogy have become folded into one another through the growing use of technology in schools, at least in Global North and rich countries. An important aspect of digital technology lies in the ways in which it is used to demonstrate the user's relationship to popular culture. Indeed, for many children, they 'are apprenticed to digital writing through informal learning in out-of-school contexts' (Merchant, 2006, p.105). This is an important point, because much of what we know about creativity and learning for 'digikids' and disabled kids alike is gathered in school contexts. Rosie, in contrast, presents us with insights into a key area of her out-of-school life: The relatively private family household.

The images provide a snapshot into the rich tapestry of family life. From a Bourdieusian (McKeever & Miller, 2004) analysis we can make some interpretations about the social and cultural capital of her family. *The Tweenies* and *The Goodies* provide a smattering of cultural artifacts littering the background and composition of the narratives. There is young and old here – interests perhaps fashioned by a father sharing his comedic choices with his offspring, contrasting with Rosie's own choice of film and theatre. The story suggests echoes of laughter by a father and daughter at the Kitten Kong. There are vegetarian cookbooks prominent, one dedicated to Indian cuisine, and whole shelves of reference books for the family to peruse.

The story captures Rosie's own passions for Greek myths and, hence, we can detect an educational background to her life that goes beyond the usual discussions of special educational need associated with disabled children. The out-of-school nature of interests and learning are alluded to through the images.

### Discussion: Reading our readings

We remain as unsettled by the readings now as we were when we wrote them. Reading Rosie, she is an object of fascination. In reading her from the autism canon, the narrative of the autistic child becomes a totalising narrative that swallows up every part of Rosie's story. Rosie *and her family* are read as autistic, with the ripples of autism being detected in her brother's love of the natural sciences. Her enthusiasm for taking photographs, and planning a series of pictures is read simultaneously as evidence of her condition; a product of impairment; and of her obsessive behaviour. In this reading, there is no space for pleasure or joy, only a reading that confirms that Rosie has 'a life-long developmental disorder'. Rosie's passions morph into obsessions and her talents are 'disordered' as her abilities are characterised as typical autistic traits. Alternative readings are closed off. The narrative is so powerful that Rosie's human value dissolves into the autistic quagmire as she becomes an example of the 'autistic mind' that allows 'us' to learn from 'them' what it is to be human.

In reading Rosie from the social model, a materialist account dominates. Rosie and her family are the victims of structural and attitudinal oppression. Staying at home is not a choice but a product of disablement. Her parents' choice of school and leisure is the consequence of their disabling attitudes and those of the wider society. But Rosie likes her new special school, and she enjoys going out with her parents and other members of the group for families with children with autism. Rosie likes to be at home with her mum and her dad. A social model account struggles to accommodate Rosie and her parents' choices without casting them as the product of inherently disabling assumptions about the nature of impairment and disablement. In this reading, Rosie's choices and those of her parents must be the result of false consciousness and of their having internalised the oppression.

A Nordic relational account confirms Rosie's status as 'autistic'. This is not in question, rather the focus is on how her autism and the environment interact. Rosie is, variously, 'disabled' and 'non-disabled', depending on the extent to which Rosie's 'autism' and the environment match one another. At home, Rosie is non-disabled as she is supported by her parents. Disability is normalised by the family: This is simply how Rosie and her family do family (Traustadóttir, 1995). Outside the home, she is sometimes disabled, when the gap between impairment and environment becomes too great. Furthermore, the family has yet to achieve 'normalisation' as Rosie's mother is unable to work full-time and Rosie's behaviour, status and appearance attract 'tuts' and stares in the street.

Reading Rosie through a socio-cultural lens, she is not defined by the autism canon, nor by social model orthodoxy or the principles of normalisation. Instead, we are asked to consider her engagements with technology: As an active 'digikid'. We are pushed, too, to consider the wider social and cultural capital to which she has access, and that provides her with hobbies, interests and passions. We get a whiff of the food that might be cooked in the house, get a sense of the sharing of cultural markers from father to daughter, and an idea of the kinds of activities that this family likes engaging in. Autism disappears. So, too, does disability. In their place is a depiction of the particularities of a household.

Reading Rosie, it is clear that she is an object of concern. From an autistic reading, there is hope that she can 'grow and develop' as her obsessions offer potential for academic learning and the promise of quantifiable achievements. However, from a social model reading, progress towards empowerment seems limited as Rosie is an isolated social actor, situated in a world of segregated education and leisure without the prospect of change. The lack of achievement of 'normalisation' – marked by the 'tuts' and stares of others in the community – positions

Rosie's family as in some way lacking and of the need for them to be 'empowered' (possibly with the help of professional intervention). Yet, reading Rosie through a socio-cultural lens, Rosie is a distributed self – intimately connected with and supported by and to her family, and not an object of 'concern' at all.

Reading Rosie: She is an object of bio-power – a body that should be measured, administrated, assessed, governed, educated and at times eradicated by bio-power (Tremain, 2005). The autistic reading of Rosie draws heavily on the promises of bio-power – of assessment, education and rehabilitation, if not cure. She is clearly identified as a target of intervention (Ball, 1990). As she 'fails' to progress typically, the family is subjected to a process of 'dividing practices' (Foucault, 1983), in which the 'normal' family is distinguished from the 'deviant' (and feckless). Porter (1997) writes:

*Viewed in itself... a disabled body seems somehow too much a body, too real, too corporeal, it is a body that, so to speak, stands in its own way. From another angle which is no less reductive, a disabled body appears to lack something essential, something that would make it identifiable and something to identify with; it seems too little a body: a body that is deficiently itself, not quite a body in the full sense of the word, not real enough.* (p.xiii; cited by McGuire 2011, p.145).

As McGuire (2011) argues, in her elegant analysis of the cultural constitution and discursive construction of autism, 'While all bodily signs must be watched for potential pathology (a medical imperative), so-called 'signs' or 'red flags' of autism must be 'watched out' for (a moral imperative)' (p.144). Hence, a reading through the lens of the autism canon blurs moral and medical imperatives. 'Normal' families can escape intervention, while 'deviant' families cannot.

On the other hand, a social model analysis insists that the environment must be changed to remove the barriers to Rosie's full participation. At the same time, a Nordic relational account suggests that both Rosie

and the environment must change (albeit in Rosie's case through 'empowerment') in order to close the gap between the person and the environment. Through a socio-cultural lens we witness the makings of subjectivity, but these appear to be less tied to the bio-political machinations often associated with disability. A socio-cultural analysis encourages us to read the richness of Rosie's family life: Rosie is simply situated in the social and cultural meaning makings of family life, laughing at *The Goodies*.

### **Conclusion: Towards a multiplicity of readings**

We see Rosie as a postmodern child, a child of which many stories can be told. Our account has only considered four. While our own politics of analysis are most readily associated with the last three readings, we do share misgivings. We struggle with the pathologising tendencies of the autism canon; feel unnerved by the structurally deterministic possibilities offered by the social model reading; wonder about the difficulties associated with normalisation so adored by the Nordic relational model; and feel confused by the 'disability-lite' nature of the socio-cultural narrative.

By failing to engage with the autistic canon, the socio-cultural reading sidelines the power of the bio-medical discourse. This can only be a good thing. And yet, although the socio-cultural reading has the potential to release the family from a totalising autistic narrative, at the same time it denies the family the potential affirmation of their biological citizenship (Hughes, 2009) and celebration of their neurodiverse identity (ASAN, n.d.). Similarly, by challenging a materialist account the socio-cultural account positions the family's experience outside a potentially empowering disability rights discourse.

In promoting a multiplicity of readings, we seek to accept uncertainty and to promote potential. By accepting uncertainty we seek to challenge the tendency of certain grand narratives to masquerade as truths as

they weave themselves in and out of children's bodies and minds with potentially dangerous effects. Indeed, some psychological knowledges threaten to essentialise and pathologise difference within children and leave untouched wider questions of cultures and societies that fail to tolerate difference. By promoting potential, we wonder to what extent viewing 'academic theorising', 'professional opinion', 'expert discourse' and 'psychological truth' as nothing more than the telling of stories – some more plausible than others, some useful in one context and not others, some in need of rewriting – might encourage more reflexive analyses on the part of researchers and practitioners working with children and young people. Such reflexivity might destabilise professional and analytical certainty, bringing with it a more politicised perspective in relation to childhood and society. In reading our readings, we are attentive to the dominance of totalising narratives that close down fluid and alternate readings of disabled children's lives. When we acknowledge that discourses of childhood are always being reproduced in institutions, by certain institutional actors, serving particular disciplinary and professional interests, this leads us to the question and the ethics and politics of such readings. In a cultural time when we are witnessing an epidemic of signification around childhood difference and diversity, then it is a political and moral imperative for us to ask whose interests are being served by these growing discourses.

Our concern is that the quirky quality, creative and personhoods of disabled children are merely understood as signs, symptoms and signifiers of pathology. This is a tragic scenario against which we must continuously refute and battle. We end the paper by asking you, the reader, about your relationship with knowledge, children and disability: How do you read disability and children? When do your readings of

disability and children stifle or enable? At what moments do we use and refuse our varied readings? When we constantly ask and re-ask these questions, perhaps then we can become as postmodern as Rosie. Our readings of Rosie reveal the complexity of childhood (and disability, for that matter), but also remind us that some readings are sticky, some indicate possibility, while others limit. We feel it important to acknowledge that, for example, the autism canon and the relational model readings are popular cultural stories through which children are characterised. While we may acknowledge the usefulness of these narratives – at times these stories provide plausible accounts that Rosie and her family might draw upon – the social model and cultural readings alert us to the politicisation and creative of Rosie's position as a disabled child. Indeed, these readings are often missing from the rich storytelling to be found in the social arenas of 'disability' and 'childhood'. Our plea, then, is to consider the ways in which the politics of disability and childhood are always being constructed and contested in a host of familial, professional, academic and cultural contexts, and to find and address those moments when we feel unnerved and confused, in wonder or emboldened by stories of disability and childhood.

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Reading group: Laurie Lee's book is rightly celebrated for its warm, fond retrospection. But it's not short of death and darkness either. Memory, as the gloriously unreliable narrator of *Cider With Rosie* probably wouldn't admit, is a strange, distorting thing. If you'd asked me two weeks ago what this book was about, I'd have confidently told you that it's a happy, nostalgic, idealistic evocation of a lost time and place. That it is full of joy and humour.

Reading Rosie: The postmodern disabled child. June 2012. Educational and Child Psychology. Daniel Goodley. Katherine Runswick-Cole. This paper reads disabled childhoods in a number of distinct ways in order to stimulate debate around the kinds of stories that researchers and practitioners tell about the children that they work with. Narratives of bio-power-discourses of the self-have expanded as knowledge from the human and social sciences grow and institutions of society become more pronounced. Nowhere is this growth of [Show full abstract] bio-power more evident than in the lives of dis... Reading Rosie: The postmodern disabled child. Article. Jun 2012. Daniel Goodley. Katherine Runswick-Cole. This paper reads disabled childhoods in a number of distinct ways in order to stimulate debate around the kinds of stories that researchers and practitioners tell about the children that they work with. Narratives of bio-power-discourses of the self-have expanded as knowledge from the human and social sciences grow and institutions of society become more pronounced. Nowhere is this growth of bio-power more evident than in the lives of disabled children. It is becoming increasingly apparent