

A Qualitative Study of the Professional Experiences of Teachers With Mobility  
Challenges and Their Self-Perceptions of Professional Success

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## **Abstract**

This qualitative investigation explored the professional experiences of 3 Ontario teachers who have mobility challenges. The study's participants (2 male and 1 female) were Ontario teachers who have permanent physical disabilities that challenge their means of mobility. Each participant has an Ontario Certified Teaching License and has either taught or is currently teaching in an Ontario school. My primary source of data collection was a semi-structured face-to-face interview with each participant. The focus of the interview was participant perspectives. Data analysis was accomplished in 3 phases. Data analysis generated 5 prominent themes of commonality among participants: (a) independence and sacrifice, (b) living with pain, (c) barriers and obstacles, (d) the importance of communication, and (e) professional benefits and personal rewards.

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It is true that as we carry on throughout our lives many events will occur beyond our control. If we are ever so fortunate, these opportunities will introduce us to one or more special people who will leave an ever lasting impression on our lives. I would like to express my most sincere gratitude and appreciation to my supervisor, Dr. Debra McLauchlan, who has not only been a mentor but a role model and guardian. Thank you for your expertise, thoroughness, and patience of which both challenged and encouraged me throughout my studies.

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## CHAPTER ONE: INTRODUCTION TO THE STUDY

In Canada, approximately one in seven people has a disability, equating to 4.4 million children and adults (Statistics Canada, 2009). For the sake of this thesis, the term “disability” covers a broad range and degree of conditions, including physical, mental, and learning deficits; mental disorders; hearing or vision impairment; epilepsy; drug and/or alcohol dependencies; and environmental sensitivities (Ontario Human Rights Commission, 2008). A disability may be present from birth, caused by an accident, or developed over time (Statistics Canada, 2009). Regardless of when a disability is acquired, Ontario education providers have a responsibility to accommodate the needs of both students and employees with disabilities (Ontario Human Rights Commission, 2008). “School boards are required to embed the principles of equity and inclusive education in all aspects of their operations, including policy development, programming, and practices related to research, curriculum resources, instruction, and assessment” (Ontario Ministry of Education, 2011, p. 16). Many studies propose how to develop more inclusive educational systems, and more than often address inclusivity for students. Little to no literature takes into account the stories of teachers, specifically teachers with mobility challenges.

The purpose of this thesis is to examine the professional experiences of teachers with mobility challenges and their self-perceptions of professional success. My interest in this topic is both personal and professional. I am a teacher education graduate and certified Ontario teacher with a severe physical disability.

For this thesis, research questions included:

1. What factors have allowed teachers with mobility challenges to achieve self-

perceptions of professional success?

2. What challenges or obstacles have these teachers experienced in their paths to success?
3. What coping strategies have teachers with mobility challenges found most helpful?

My own experiences as a teacher education student led to my curiosity about these questions. Two years before my first teaching practicum, I endured a catastrophic accident that paralyzed me from the chest down. I now rely fully on a manual wheelchair for mobility, and my stamina is lower than the average person my age. In addition to mobility issues, I also have acquired a mild speech impairment. I cannot speak loudly for long durations, and I experience “dry mouth” very quickly as a side effect of the medications I take. Overall, my physical challenges pose great difficulties, not only for me but also for the classes I teach and the schools in which I work.

### **Background of the Problem: A Personal Story**

The aim of inclusive school improvement is “to eliminate exclusionary processes from education that are a consequence of attitudes and responses to diversity in race, social class, ethnicity, religion, gender and attainment, as well as with regards to disabilities” (Ainscow, 2012, p. 2). As a teacher candidate, my initial welcome to my first practicum school was enthusiastic and heartfelt, prompting me to believe that I was entering a very inclusive environment. I was excited and nervous for my initial visit, hoping to leave a good impression. I was able to foresee several accessibility problems, but practicum jitters masked the accuracy of how difficult the weeks of teaching practice would be.



*In the fall of 2010, my mother held the door open for me as I entered a local secondary school 2 weeks before my first teaching practicum. I headed immediately to the office to announce my arrival to the secretary. I was politely greeted by the principal who was very enthusiastic to have me as a teacher candidate in her school. Right away she took me for a tour of the building, and then escorted me to the classroom where I would be working. I met my supervising teacher, who was also eager to meet me, and started going over her classes and procedures. Both the principal and teacher treated me kindly and enthusiastically as if I were no different than any other student teacher. For me, this represented a symbol of respect.*

*Every day my parents would drive me to school and open the double set of doors for me to enter the building. Electric door openers had been installed 2 weeks after my first arrival to the school. However, they were routinely disabled at night and not turned on again in the morning until after I was already in the building. It thus became a daily necessity that I needed help maneuvering through the entrance doors.*

*My practicum was conducted in a small room on the main floor of the school. Three rows of tables, with chairs, consumed most of the space. When class was in session, maneuvering down the rows in my wheelchair was an impossible task. Lack of space also hindered any use of the chalkboard located at the front of the room or the use of an overhead projector. These teaching tools were inaccessible for me. Thus I relied on other strategies, such as preparing Bristol board presentations, to teach throughout my practicum. The classroom had received a SMART board before my arrival; however, it remained in its box leaning against the chalkboard at the front of the room. The SMART board, taking up space, eventually was moved, but was not made operational until weeks*

*after my practicum. Supplies and textbooks were also on shelves or in areas of the room I could not reach. Students and staff were more than accommodating, readily accessing the supplies I needed when asked. When I was alone, however, accessing supplies was not possible. I was therefore reliant on others and sometimes frustrated by my lack of independence, which I blamed on my own physical limitations.*

*Washroom facilities also involved the co-operation of others. At the time of my arrival at the school, there were no wheelchair accessible cubicles in either the staff or student washrooms. A quick solution to this problem was for me to use the closet washroom in the principal and vice-principal's office. This was definitely not a perfect solution. My wheelchair was too large to close the washroom door. However, I was able to close the principal and vice-principal's door entrance to create privacy. This became my personal washroom for the first 2 weeks of observation before my practicum. At first it seemed to work, but quickly I realized the absurdity of the situation. Because there was no lock on the closet doors, I had to inform the secretary and both administrative leaders when I had to use the facilities. I lived in constant fear that someone would accidentally open the closet door, and anticipated the embarrassment of the situation. I also had to interrupt the day-to-day business of the administration and principal's office, such as meetings with parents, important phone calls, or student disciplinary chats, so that I could sneak into my "personal washroom." Although no one ever asked, I imagined those visiting the administration office would wonder why on earth the little blonde girl in the wheelchair just went into the closet.*

*Because there were no elevators in the building, I could not visit the cafeteria or use the computer lab, resource room, or any classrooms located on the second floor. I*

*was restricted to the main floor of the school and often felt segregated because of my situation. I believed myself to be the problem and not the physical limitations of the school. I never spoke out about my concerns, because being the “new one,” I did not want to feel like a bother, especially because of my disability.*

*A particular incident during my first practicum took place while I was working in the photocopier room prepping for future lessons. The door of the room had to be propped open because it was too heavy for me to open and maneuver. While working, I overheard a conversation between the secretaries, guidance counselor, and principal who were having coffee in the office next to me. They were talking about me, their conversation centered on my disability. They spoke of how I had acquired my disability and how I have managed my recovery, with many flaws in their version of the story. They continued their conversation without knowledge of my presence next door, and even though they spoke in a positive light about my situation, I definitely did not feel good about myself. The stress of being new to the school and learning to cope with my disability was already overwhelming. Now discovering that I was somewhat of a personal topic of gossip created additional stress and caused my professional life to feel even more challenging.*

*My first practicum generated an overwhelming surge of emotions, not only because I was a new teacher candidate, but also because I had a fairly recently acquired disability, and I often extended the limits of my body and mind. I initially assumed that my first practicum would come with problems, difficulties, and concerns, but I never imagined the alarming degree of difficulty associated with my physical disability. I presented myself as if I were made of iron and everything was just fine. However,*

*everything was not fine. I sometimes came home exhausted and in tears of frustration about my physical limitations. I was affected emotionally, physically, and mentally, but finished my practicum with great reports of success and accomplishment despite the challenges I faced. I never once questioned my ability to teach and have an educational career. I did, however, question what additional challenges my disability would pose, and whether these challenges would jeopardize my decision to stay in the educational field.*

*In my second practicum, I was working at what was labeled as an accessible school, equipped with electric door openers, an elevator, and private handicapped washrooms with locks. One day, during third period, just after lunch, my supervising teacher and I were preparing for fourth period class. We heard a knock at the door where a student was waiting to get our attention. The student had been sent from the main office to deliver a message that we would be having a fire drill near the end of the period. My supervising teacher, who also has a physical impairment, thanked the student and turned to me, saying, "We'd better get down stairs before the alarm goes off and the elevators stop working!" She began walking slowly, with a pronounced limp. Due to hip problems, she was in constant pain and always used the elevator to get between floors.*

*As we headed to the elevator, we were met by others with mobility issues who had also been warned about the impending fire drill. One was a girl on crutches with a broken foot, and the other, a boy in a wheelchair who has a developmental disorder. Accompanying him was his attendant. After we all got off the elevator at the main floor and proceeded outside before the fire alarm rang, I asked, "How would we have got downstairs in case of a real fire?" My supervising teacher looked at me and said, "You know what? I'm not sure...I know that that young boy can stand and walk a little, so I*

*believe he is able to take the stairs. But you and I, I'm not sure?" At that moment, the fire alarm sounded and interrupted our conversation. While the students came out of the building and the teachers gathered to chat, I remained dumbfounded, wondering what would happen in case of a real fire. What options did I have to get down two flights of stairs? I also knew there were students in other areas of the school who were wheelchair bound or had other forms of disabilities. I wondered where they were at this moment. I also wondered why I had not formally been notified about what happens in case of a fire. Is there a procedure for people with disabilities? And do others know about it?*

### **Purpose and Rationale of the Study**

Since the 1980s, governments across North America have adopted and legislated practices and policies to move education systems in a more inclusive and integrated direction for those with disabilities (Ainscow, 2005). The Ontario Ministry of Education (2009) calls for "each school to create and support a positive school climate that fosters and promotes equity, inclusive education, and diversity" (p. 11). Under the 2001 *Ontarians with Disabilities Act*, the Ministry of Education, along with school boards, are required to prepare, update, and make public accessibility plans that address the identification, removal, and prevention of barriers for people with disabilities. Barriers can take a variety of forms and can consist of physical, attitudinal, technological, systemic, or financial obstacles (Valeo, 2010). In my practicum, various physical, technological, and attitudinal barriers contributed to unnecessary situations of isolation, awkwardness, and embarrassment.

It is surprising that, in the year 2014, we are still facing architectural impediments that fail to meet basic accessible requirements of public buildings, including schools.

Such aids as electric door openers and handicap-accessible cubicles in washroom facilities improve a school not only for its educational purposes, but also for community hosted events, drama productions, government use (e.g., voting stations) and other occasions when people in the surrounding neighbourhood and community access the building. During my first practicum, in addition to the physical barriers I experienced, I also became aware that, due to the inaccessibility of the school, students with disabilities are forced to attend high school not located in their own neighbourhood. If all publicly funded schools and administration are to facilitate equitable access for all people and equal representation of all minorities (Goddard & Hart, 2007), does this current practice not violate equitable policy, regulations, legislation and democratic standards?

“Educators are ethically responsible for attempting to address all interests and aspirations of diverse communities” (Ornstein & Hunkins, 2009, p. 223). By marginalizing students and teachers with physical disabilities, are we not allowing historical trends of discrimination, and segregation to thrive in today’s communities?

According to Goddard and Hart (2007), avoidance strategies, such as treating everyone the same in order to minimize difference, are commonly used as an attempt to achieve equity and handle differences that policy makers are uncertain about handling. At the beginning of my practicum, I was treated equally, as any other “able” individual. As a new teacher candidate with a newly acquired physical disability and a guest at the school, I initially perceived this treatment as a sign of respect. I did not yet understand that attention to individual needs is a crucial aspect of professional success, especially for those who cannot advocate for themselves (Goddard & Hart, 2007). In my situation as a new teacher candidate, I did not know what to expect in the classroom or school

environment, and could not advocate personally for my basic needs, such as washroom facilities. Attempts to minimize my physical difference from able individuals served as an attitudinal barrier that I did not immediately recognize.

Colleagues talking about me as I worked in the room next door exacerbated my perception of attitudinal barriers. I seemed to be recognized as the new teacher candidate who carried the burden of being in a wheelchair, and more notably was part of a very small minority at that school. According to Ross and Berger (2009), it is the task of principals to develop a culture of inclusion and promote understanding of the disabilities that exist in their school. When people expressed curiosity about my disability, I believe I should have been informed and included in the discussion, perhaps to clarify misconceptions and encourage knowledge building. No such channels of communication existed in my practicum situation.

Fineman, Gabriel, and Sims (2010) proposed that technology, machines, and tools help protect us against our natural environment, help us control and profit from resources, and help make our lives easier. However, technology can become a barrier for many people very easily. For me, technology becomes a barrier when it is inaccessible due to physical factors, including where it is located and how it is made. Several examples from my practicum experience include PA systems that were too high for me to reach, photocopiers that were too tall for me to use, and computer labs located on inaccessible floors in the building. I generally cannot write on chalk boards due to height; overhead projectors and TVs are cumbersome because they take up too much room for me to maneuver in classrooms, and I have yet to work in a classroom that is equipped with a functioning SMART board.

Developing inclusive practices in schools “involves social learning processes within a given workplace that influence people’s actions and, indeed, the thinking that informs these actions” (Ainscow & Sandill, 2010, p.403). Illustrated in my personal narrative are several concerns that I, as a teacher candidate, had never considered before. Both I, a teacher candidate with a severe physical disability, and my school colleague, who also suffers from a physical disability, did not know the correct safety procedures for evacuating those with disabilities out of an “accessible” school in case of a fire emergency. This to me is both alarming and discomfoting.

The fire alarm incident also brings to account the concept of an act of moral purpose (see Fineman et al., 2010, pp. 179-195; Goddard & Hart, 2007; Valeo, 2010). Valeo (2010) defined moral purpose as “acting with the intention of making a positive difference in the lives of employees, customers, and society as a whole” (p. 8). Moral purpose is the heart and centre of effective inclusionary practice and, when modeled, benefits entire organizations toward the betterment of all. The notion of moral purpose closely guided and informed the exploration I undertook in this thesis.

### **Scope and Limitations of the Study**

This study was a qualitative investigation of the professional experiences of teachers with mobility challenges and their self-perceptions of professional success. This study in no way represents every aspect of disability. Rather, “Disability is a vast category that includes an infinite number of possible experiences and realities that may or may not be visible to others” (Castañeda, Hopkins, & Peters, 2013, p. 461). The focus of this study is a very specific population of teachers with mobility challenges. To gain insight, I interviewed three teachers with mobility challenges and sought their personal stories. The findings of this study are limited to the experiences presented and cannot be



applied to all teachers with mobility challenges, nor to all teachers with disabilities. The results of this study provide a preliminary understanding of teachers with mobility challenges and their perceptions of professional success. The stories of these three teachers stand as testimonies of Ontario's commitment, or lack thereof, to successfully practice inclusion that enhances the academic, social, and emotional inclusion of those with disabilities.

### **Organization of the Thesis**

This thesis contains five chapters. Chapter 1 establishes the purpose and rationale for this study, and introduces three research questions on which it is based. Chapter 2 begins with a review of literature on conceptions of disability and the current big picture of disability in Canada. Chapter 2 next addresses career experiences of those with disabilities and lastly focuses on teachers with disabilities. Chapter 3 outlines the methodology used to conduct this study and chapter 4 introduces findings of the study. Chapter 5 concludes this study by providing a summary, discussion of the findings, and implications for both practice in schools and future research.

## **CHAPTER TWO: LITERATURE REVIEW**

This literature review is presented in four sections. The first section introduces theoretical and historical shifts of perceptions about disability in North America. The second section investigates the big picture of disability in Canada and explores the Canadian Government's 2009 statistical report on the experiences of Canadians with disabilities in five areas: supports and services, education and training, employment, income, and health and well-being. The third section addresses international career experiences of people with disabilities, and the fourth section specifically targets teachers with disabilities.

### **Theoretical and Historical Shifts in Perceptions of Disability**

Disability is a socially constructed concept, historically used as a category to differentiate between those who can and cannot work (Hall, 1999). In North America after World War II, this work-focused distinction became evident as the industrial age rapidly grew. Factory employment enforced assembly lines, speed, and time-keeping production, making employment nearly impossible for both people with congenital disabilities and disabled war veterans (Hall, 1999). Workplace distinctions between disabled and non-disabled people remained in place until the 1960s. People with disabilities were viewed as individuals who have “damaged” bodies, a perception focusing on deficiencies, ailments, or inabilities compared to “normal people” (Mackenzie, Hurst, & Crompton, 2009). This notion that disability resides within the individual is known as “the medical model of disability” (Gleeson, 1999; Hall, 1999; Mackenzie et al., 2009). According to this model, concepts of normality or “everyone normal fits the same mould” shaped social and educational practices. Those who fell

outside the “measures” of normality were considered abnormal or deemed “impaired, defective, faulty, damaged, deficient, incapacitated, or broken” (Fraser & Shields, 2010, p. 7).

During the 1960s, the “medical model” of disability began to change as a new approach to thinking about disability developed (Mackenzie et al., 2009). Both social and political factors, such as the civil rights movements in the United States, encouraged the growth of disability studies as a distinct area of focus. Alongside various civil rights campaigns of the era (including women’s rights, the rights of war veterans, and the rights of gays), many government and non-government organizations worked not only to achieve political recognition and rights for those with disabilities, but also to promote positive images and attitudes (Neilson, 2005). The concept of the medical model was theoretically replaced by the idea that disability is “experienced” by persons with (an) impairment(s) who encounter barriers to their participation in society as a consequence of “disabled environments” (Gleeson, 1999, p. 16). This new concept of disability, known as the “social model,” flourished throughout the 1980s and 1990s.

In 1996, Wendell (1996) proposed that “disability activists and some scholars of disability have been asserting for at least two decades that disability is socially constructed” (p. 57). In Wendell’s opinion

disability [is] socially constructed in ways ranging from social conditions that straightforwardly create illness, injuries, and poor physical functioning, to subtle cultural factors that determine standards of normality and exclude those who do not meet them from full participation in their societies. (p. 58)

According to the social model, people with disabilities encounter daily task-related barriers that are not caused by their impairments, but rather by environments and

socially constructed barriers that do not take their impairments into account, for example, in the design of buildings, modes of transport and communication, and discriminatory attitudes (Barnes & Mercer, 1997). The social model had a strong impact on Western nations, urging them to improve policy issues surrounding employment, physical access, benefit rights, and de-institutionalization of people with disabilities (Gleeson, 1999, p. 18). In Canada, changing conceptualizations of disability were reflected in the government-mandated development of disability policies as outlined in the next section of this literature review.

Despite the advances of recent decades, the medical model of disability continues to exist as a persistent and common attitude toward people with disabilities, coupled with an embedded aim “to “cure” the disability, get rid of the deformity, [or] fix the body” (Castañeda et al., 2013, p. 462). This attitude is also labeled the “deficit mentality”; thus, people with disabilities continue to experience perceptions that those who are “different from dominant norms are deemed less valuable and worthwhile ... [and] the notion of equity is still conflated with one-size fits-all or standardization” (Portelli, 2011, pp. 8-9). People with disabilities continue to be perceived as having “deficiencies that require medical treatment and repair,” not the environment surrounding them (Castañeda et al., 2013, p. 462). The next section of this literature review touches upon efforts of the Canadian government to bring to public attention the accommodation needs of people with various disabilities.

### **The Big Picture of Disability in Canada**

According to Sanderson (2006), access to all facets of society for persons with disabilities has been a matter of discussion in North America since the 1970s (p. 1). The

traditional societal perception of “disability” underwent a fundamental paradigm shift during this time, stemming from efforts of both civil rights and Independent Living movements activists (Gleeson, 1999). The notion that disability resided within the individual (the medical model) was replaced by the idea that disability was “experienced” by persons with disabilities encountering barriers to their participation as a consequence of “disabling environments” (Gleeson, 1999). This circumstance led most Western nations to adopt legislation and codes calling for both the removal of environmental barriers and facilitate better access to job markets, education, and transport for persons with disabilities (Gleeson, 1999; Van Campen & Iedema, 2007). In 1982, the Canadian Charter of Rights and Freedoms secured the equality right for persons with disabilities (Federation of Canadian Municipalities, 1994).

In 1999, the Canadian government started taking strict measures and creating reports to address the rights and issues of people with disabilities (Government of Canada, 2009). In 2002, the first report on *Advancing the Inclusion of People with Disabilities* was released. In March 2007, Canada signed the United Nations Convention on the Rights of Persons with Disabilities to further signal Canadian participation in reducing barriers that prevent full participation of persons with disabilities. In 2008, the Government of Canada invested billions of dollars toward grants and bonds, including the Registered Disability Saving Plan (RDSP) and new financial assistance measures to help students with disabilities and their families better manage the cost of postsecondary education. In 2009, the Canadian Government released the latest federal disability report, *Advancing the Inclusion of People with Disabilities 2009*, providing invaluable

information about designing and planning services that enable people with disabilities to participate fully in society.

People with disabilities are at a disadvantage compared to people without disabilities in all areas of society due to various barriers (Van Campen & Iedema, 2007). Moreover, similar types of barriers challenge accessibility in a variety of different settings (Sanderson, 2006, pp. 8-9). Following the federal government lead, some Canadian provinces have enacted human rights or accessibility planning legislation to help remove these barriers, and carry out some form of accessibility planning using planning instruments (or other tools) to improve accessibility for persons with disabilities.

In 2001, the province of Ontario enacted the Ontarians with Disabilities Act 2001 (ODA), the first and only legislation of its type in Canada (Sanderson, 2006, p. 2). The ODA required municipalities (populations 10,000+) and other public sector organizations to undertake a planning process to identify, remove, and prevent physical and other barriers to the participation of persons with disabilities (Ontario Ministry of Community and Social Services, 2006). In 2005, Ontario passed a second piece of legislation, the Accessibility for Ontarians with Disabilities Act 2005 (AODA), in order to achieve accessibility for Ontarians with Disabilities with respect to goods, services, facilities, accommodation, employment, building, structures and premises, on or before January 1, 2025 (Ontario Ministry of Citizenship, 2005).

Outside of Ontario, “Vancouver enjoys the reputation of being one of the most accessible cities in the world” (Atkinson, 2003, p. 39), largely due to 25 years of advocacy by many Vancouverites with disabilities. Thus, Vancouver boasts accessible

transportation, progressive building codes, accessible leisure and recreation opportunities, and innovative housing. Changes architecturally have been matched in public attitude.

In 2005, the city of Calgary, Alberta, initiated a program called ImagineCalgary. ImagineCalgary is a citizen-directed project developed by the input of 18,000 Calgary citizens who expressed what they believe Calgary should be like in 100 years. The ImagineCalgary program represents the long-range vision and goals that reflect the diversity and interests of the Calgary community. The 100-year vision includes targets and strategies that will enable Calgary to achieve sustainability and inclusion for all. One of the central issues being addressed is the improvement of public transportation for people with disabilities (Lord & Hutchison, 2011).

Despite Calgary and Vancouver's progressive attitudes toward disabilities, however, other areas of the country are not so advanced. Furthermore, "while workplaces and schools have legal responsibility to make accommodations for all people with disabilities, stigma and lack of understanding can make asking for them very difficult" (Wooley, 2012, p. 22).

Highlighting the need for accessibility reform across the country, in 2009 the Canadian government released a comprehensive report on disabilities, *Advancing the Inclusion of People with Disabilities 2009* (Statistics Canada, 2009). The remainder of this section of the literature review summarizes pertinent findings from the report.

In the 2001 census, approximately one out of every seven Canadians over the age of 15 years (3.4 million people) reported having some level of disability (Statistics Canada, 2009). In 2006, approximately 4.4 million children and adults were living with one or more disabilities. Data collected between the 2001 and 2006 census surveys

demonstrated that the number of Canadians with disabilities has increased, largely due to an aging population and an increase of reported disabilities. Of working age Canadians (ages 15-64), approximately 11.5% currently suffers from a disability. Of 10 disability types investigated in census surveys (agility/dexterity, communication, developmental, emotional, hearing, learning, memory, mobility, pain, and seeing), mobility is the largest sector, followed by agility/dexterity; these combined sectors account for almost 20% of the total instance of disability in the country (Statistics Canada, 2009). Statistical comparison of Canadian survey responses in the first decade of the 21<sup>st</sup> century examined disability issues using 29 indicators of progress in four main outcome areas: supports and services, education and training, employment and income, health and well-being (Statistics Canada, 2009).

### **Supports and Services**

In terms of disability supports and services, over 2.6 million Canadian adults and 87,000 Canadian children currently require physical mobility aids and/or assistive devices (Statistics Canada, 2009). Aside from personal mobility equipment, home modifications often include grab bars, automatic doors, and widened doorways and hallways (p. 13). Six out of 10 persons with disabilities currently have their assistive devices needs fully met. This is an improvement from 2001 when only 38.3% of Canadians had these needs fully met (p. 10). Overall, persons with disabilities of working age (15 to 64 years) have increasingly had their needs fully met between 2001 and 2006 (24.3% increasing to 55.9%). However, this percentage is still only half of this large population. Moreover, people with more severe disabilities are more likely to have unmet needs than people with less severe disabilities.



In 2006, 40.7% of people aged five and over with severe to very severe disabilities had unmet needs for mobility aids and devices (p. 12). The most common reason for these unmet needs is financial cost. Other reasons include being on a waitlist, and lack of approval from health professionals to receive such supports and services.

The greatest support network for people with disabilities has proven to be family members. A total of 2,440,570 adults with disabilities (aged 15 and over) receive help with everyday activities, and eight out of 10 (82.4%) rely on family members for this support. The severity of one's disability is a strong predictor of the amount of caregiving needed (Statistics Canada, 2009, p. 18). Of adults (aged 15 and over) with severe to very severe disabilities, 85.6% require caregiving assistance, while 49.3% adults with mild to moderate disabilities require assistance. The level of all caregiving needs met between 2001 and 2006 has decreased from 62.3% to 53.1%. The most common reason for this decrease is the financial cost of caregiving assistance, as well as other barriers such as delays in obtaining assistance and the difficulty of finding qualified help.

Most Canadians use some form of transportation to accomplish daily activities, such as going to work, running errands, participating in leisure activities, or being otherwise involved in the community. In 2006, 86.3% of adults with disabilities (aged 15 and over) used various modes of transportation, including cars, buses, or taxis (p. 19). Unfortunately, of the many adults with disabilities in 2006, approximately 460,000 experienced travel-related difficulty. The main problem is largely the issue of boarding the available modes of transportation, causing aggravation to existing conditions or health problems. Of the total population of adults with disabilities, 4.1% (approximately 170,000 adults) consider themselves to be housebound due to travel-related obstacles.

## **Education and Training**

Children and adults with disabilities experience various barriers, both visible and non-visible, when it comes to education and formal training. These barriers take physical, attitudinal, and financial forms, as well as others. Despite these barriers, however, school-based inclusion and educational attainment of people with disabilities increased from 2001 to 2006 (Statistics Canada, 2009, p. 23). In 2006, 30.0% of young adults with disabilities (aged 20-24) attended school. Due to their disabilities, 29.8% attended school part time, taking fewer courses and lengthening the completion of educational requirements. A total of 16.1% discontinued their education altogether because of their disabilities (Statistics Canada, 2009, p. 25.)

The education portion of *Advancing the Inclusion of People with Disabilities 2009* report defines working age adults with disabilities as between the ages 25 and 64. This range of ages is used to capture most accurately the rate of postsecondary education attainment (Statistics Canada, 2009, p. 27). According to the 2001 and 2006 census reports, people with disabilities are less likely to complete high school or receive any certificate for school completion than those without disabilities. Adults with disabilities are also less likely than adults without disabilities to have bachelor's degrees (8.3% versus 15.3%). Between 2001 and 2006, there was a 13% improvement in the number of adults with disabilities who received a certificate of school completion of any sort (p. 27).

In addition to barriers in formal education, adults with disabilities also faced barriers in workplace training and related courses. Of adults who wanted to take workplace training, 10.5% were prevented from doing so directly because of their condition (p. 29). Barriers such as cost, scheduling problems, and locations not being

physically accessible were all major factors preventing those with disabilities from attending workplace training (p. 29).

### **Employment**

The employment section of *Advancing the Inclusion of People with Disabilities 2009* defines working-age adults with disabilities as those aged 15 to 64 (Statistics Canada, 2009, p. 31.) Between 2001 and 2006, the labour force attachment and employment rate for people with disabilities increased from 49.3% to 53.5%. An increase for year-round full-time employment, particularly for women with disabilities, also was apparent. Despite this increase, women with disabilities continue to have a slightly lower employment rate (52.1%) than men with disabilities (55.5%) (p. 32). Unfortunately, people without disabilities continue to have a stronger labour force attachment than both men and women with disabilities (p. 31).

Among working-age adults with disabilities who are employed, just over half (54.7%) are employed full-time year-round. Three out of 10 (28.0%) are employed full-time for part of the year and one out of 10 (10.2%) is employed part-time year-round. Employed working-age adults with more severe disabilities are less likely to work full-time year-round (p. 33).

In order of reporting frequency, barriers and obstacles that have caused adults with disabilities to be underrepresented in the labour force are (a) individuals physically unable to work due to their condition, (b) individuals leaving the labour force after facing problems with inaccessible workplaces, and (c) individuals feeling unable to succeed in unsupportive work environments.

Inadequate supports in the workplace create barriers to employment for people

with disabilities. Lack of necessary supports can cause people to completely withdraw from the labour force, struggle with unemployment, or work in jobs that do not match their interests, skill sets and abilities. (Statistics Canada, 2009, p. 34)

As defined by the *Advancing the Inclusion of People with Disabilities 2009* report (Statistics Canada, 2009), workplace accommodation modifications fall into two categories: resource-specific and physical/structural. Resource-specific workplace modifications involve redesigning jobs, modifying work schedules, and using computer program aids. Physical/structural workplace modifications include the installment of such aids as handrails, modified workstations, accessible washrooms, et cetera (Statistics Canada, 2009, p. 34).

In 2006, 70.2% of employed working-age adults with disabilities had all of their resource-specific needs met. This is a marked decrease from 2001 when 79.9% of employed working-age adults with disabilities had all of their resource-specific needs met. Physical/structural workplace modifications also had a significant decline from 76.1% in 2001 of working-age adults with disabilities having all their physical/structural workplace needs met to slightly less than half (49.1%) in 2006 (Statistics Canada, 2009, p. 34).

People with severe to very severe disabilities are more likely to require physical/structural changes to the workplace (40.3%) than resource-specific modifications (24.5%). Unfortunately, people with severe to very severe disabilities are also more likely to have no physical/structural workplace modification needs met (48.3%) than those with more mild to moderate disabilities (31.0%) (Statistics Canada, 2009, p. 34).

## **Income**

For Canadians with disabilities, sources of income include employment income, investments, government transfers, pensions, and private insurance (Statistics Canada, 2009, p. 41). The largest source of income for adults with disabilities (aged 15-64) is from employment earnings (p. 41). In 2001, the average salary for employed working-age adults with disabilities was \$30,490, remaining almost the same in 2006. The average salary for employed working-age adults without disabilities increased over the same time period from \$35,670 to \$38,150. Working-age adults with disabilities who had employment collective agreements and union contracts had significantly better wages, averaging \$42,191, compared to an average of \$29,235 for those without union support (p. 38).

Gender differences emerged in income of men and women with disabilities. Women with disabilities continuously received lower incomes than men between 2001 and 2006, and working-age women with disabilities were more likely to rely on government transfers than men with disabilities (p. 41).

## **Health and Well-Being**

The World Health Organization (WHO) defines health as a “state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (as cited in Statistics Canada, 2009, p. 43). Factors that influence a strong health rating include physical activity, social relationships, income, education, and employment (p. 43).

In 2006, 54.0% of adults with disabilities rated their health as good, very good or excellent, while 24.8% rated their health as fair and 12.9% rated their health as poor. The severity of one’s disability had a significant impact on one’s self-rated health status.

Seven out of ten adults with mild to moderate disabilities rate their health as good, very good or excellent, whereas only three out of ten adults with severe to very severe disabilities report one of those rating. In addition, 26.2% of adults with severe or very severe disabilities rate their health as poor, in comparison to 4.1% of adults with mild to moderate disabilities. (p. 45)

The impact of stress has negative effects on the health of people with disabilities. The largest source of stress for people with severe to very severe disabilities is the status of their health. The most common source of stress for people with mild to moderate conditions of disability and working-age adults (aged 15-64) with disabilities has been work (p. 46).

In summary, this report, *Advancing the Inclusion of People with Disabilities 2009*, suggests areas of improvement as well as continued need for development in categories such as assistive devices, community support, transportation, and other accommodation needs. The next section of this literature review outlines studies of work-related experiences of people with various disabilities.

### **Career Experiences of People with Disabilities**

To date, little international research attention has been given to the professional experiences of people with disabilities, and more specifically on their career development (Gallor, Hensler-McGinnis, Fassinger, Wang, & Goodman, 2004, p. 68). According to a 2002 study conducted in Winnipeg, Manitoba, “little attention has been given to the study of the passages to employment exploited by individuals with disabilities who became successfully employed” (Freeze, Kueneman, Frankel, Mahon, & Nielsen, 2002, p. 3).

Existing literature has revealed that, most typically, people with disabilities have exposure to a very narrow range of career options (Gallor et al., 2004).

Studies from the past 30 years reveal that physical activity, social relationships, good income, education, and employment are all influential factors in promoting a sense of well-being for people with disabilities (Crompton, 2008). For example, a 1985 investigation of 100 persons aged 40 to 73 with spinal cord injuries found that high levels of well-being were reported when participants had high levels of social support, were satisfied with their social contacts, and believed they had high levels of perceived control over their experiences (Schulz & Decker, 1985).

In 2007, the British Columbia Paraplegic Association conducted a survey of 357 participants with spinal cord injuries living in British Columbia (Backman, Forwell, Carpenter, & Jongbloed, 2007). The study identified three priorities in need of improvement: better home support services, equitable income policies, and the need to educate employers of people with disabilities. The study found that those who received support from and were able to contribute to their communities in various forms of employment perceived themselves to be better adapted to living with their disability and had a perceived better quality of life than those who lacked employment opportunities.

In a qualitative study of 17 highly achieving women with physical and/or sensory disabilities, Gallor et al. (2004) discovered that people with disabilities have an overall greater life satisfaction and sense of well-being when participating and being able to succeed in their communities. Gallor et al. interviewed prominent women, with various disabilities, from nine occupational fields: education, business, science, law/politics, arts/entertainment, social sciences, journalism/media, social services, and activism.

Interview topics focused on nine areas: career path; background influences and educational experiences; disability influences; stress and coping; attitudes and beliefs about work, success, and failure; interpersonal influences; personality characteristics; role models and mentors; and evaluation of vocational decisions and behaviors. Findings revealed numerous barriers to career development, but also uncovered several supports that helped working women with disabilities flourish as professionals.

According to Gallor et al. (2004), women with disabilities battle many barriers that prevent the entry and achievement of employment and career development. These barriers can exacerbate one's disability and sometimes decrease one's realization of career goals. The barriers found in Gallor et al.'s study took the forms of environmental barriers (e.g., non-accommodating workplaces), interpersonal impediments (e.g., "ableist" attitudes), and internal obstacles (e.g., low self-esteem). According to Lalvani and Broderick (2013), "Ableism refers to negative assumptions about the nature of living with a disability and uncritical beliefs about superiority of the able-bodies existence" (p.471). "Ableism or disability oppression is a term used to describe the all-encompassing system of discrimination and exclusion of people living with disabilities" (Castañeda et al., 2013, p. 461).

In Gallor et al.'s (2004) study, in addition to ableism, a lack of role models, socioeconomic disadvantage, educational and workplace discrimination, and low outcome expectation all further contributed to the challenges for people with disabilities of becoming successful in a career. To overcome diverse challenges, various strategies and supports aided women with disabilities along their journeys toward successful careers. Deliberate modifications in personality characteristics (e.g., actively adopting



optimistic attitudes); increased belief in self; positive educational experiences; social influences, including different forms of support from families, disabled and nondisabled communities; and role models/mentors were all highly emphasized as important factors throughout these women's careers.

In a second study of working age women with disabilities, Crompton (2008) quantitatively examined responses of 4,100 Canadian women (ages 25 to 54) with varying disabilities about their level of satisfaction in the quality of their lives. The study used a quantitative 2006 Participation and Activity Limitation Survey (PALS), and identified three areas that correlate specifically to life satisfaction and overall sense of well-being: (a) ability to accomplish various daily activities, (b) quality of relationships with family and friends, and (b) health. The study revealed that the overall effects of a disability, as well as the severity of a disability, had the largest influence on overall life satisfaction. An increase in severity of a disability reflected an increase in dissatisfaction with the quality of lives and overall well-being. Regardless of disability severity, however, social contact, positive relationships, and having paid employment were the three major factors related to high life satisfaction scores.

From the social model perspective on disability (Oliver, 2009, p. 41), Wilton's (2008) interviews of 59 male and female workers with disabilities from various service sector occupations focused more on the workplace itself than on the individuals employed there. Wilton addressed the common misconception that individuals' impairments produce functional limitations, and that disability limits opportunities to participate in social life. From the perspective of the social model, Wilton emphasized the extent to which social environments might accommodate difference and allow people

with impairments to participate in social and professional life to the extent of their abilities (p. 361).

According to Wilton (2008), “Workstations, personal computers, production lines, types of office space, permitted work breaks, all determine what the body can do, where it can do it and for how long” (p. 363). Many workplaces and environments continue to be organized around “ableist” norms, which can cause conflict when making workplaces seemingly more accessible. Wilton’s study further recognized that non-accommodating workplaces eventually force workers with disabilities to experience heightened anxiety and extra emotional work in the interest of fitting in and downplaying their impairments and needs.

Focusing directly on mobility issues, a study conducted at Sweden University Hospital (Bergmark, Westgren, & Asaba, 2011) interviewed eight participants of both genders, all of working age (20-34 years), who had suffered traumatic spinal cord injuries. The study revealed high expectations of work ability, but, at the same time, difficulties in planning to return to work and lack of support in the transition process. Bergmark et al. (2011) discovered that people with disabilities prepare themselves for a day of work by trying to follow a “normal” work schedule in daily life, learning to sit for longer time periods in a wheelchair, increasing physical strength and mental energy, and acquiring techniques to manage activities similar to work tasks in an able-bodied world. The most common challenge reported by people with traumatic spinal cord injury was maintaining regularity of work routines and a full-time schedule. Participants in the study were convinced that they could manage work for a fairly short period, but were uncertain

whether they could maintain it for a longer period, considering the daily challenges they experienced (p. 2555).

Bergmark et al.'s (2011) study stressed that education is a necessity and a main avenue for future employment of people with disabilities. For example, several participants with low levels of education actively chose manual labour as employment and expressed regret at not being able to work in an area of their interest and competence. Those who had to return to school and/or formal training institutions displayed less confidence in completing their education due to their disabilities. Heightened anxiety was expressed about “anticipated injury-related medical consequences such as pain, sleeping problems, pressure sores or recurrent urinary tract infections” (Bergmark et al., 2011, p. 2556).

All participants in Bergmark et al.'s (2011) study identified expectations of paid work as a part of a desired future. Participants believed that “work meant participation, regularity and a way to express creativity, as well as being good at something” (p. 2556). Challenges to entering the workforce included a lack of realistic expectations of finding a work-related solution, either within oneself or with the help from others; in developing an employment plan; finding valued work; and becoming productive in a profession. As one participant expressed:

There's a possible solution to everything, it's all about finding an employer that is willing to find the solution with me. As easy as that ... maybe not that easy, but it is as simple as that according to me anyway. (p. 2557)

This section of chapter 2 introduced findings from the limited research that has been conducted internationally on the career experiences of adults with disabilities. The

next section focuses on the even less investigated topic of professional experiences of teachers with disabilities.

### **Teachers With Disabilities**

The final section of this literature review focuses specifically on the professional experiences of teachers with disabilities. It begins with a general statement about inclusive school environments.

With an emphasis on “processes of social learning within particular contexts” (Ainscow & Sandill, 2010, p. 411), the topic of inclusivity in schools has been the focus of the Centre for Equity in Education, University of Manchester, under the leadership of Mel Ainscow (2005, 2012). In a paper for the Spanish journal *Revista de Educación Inclusiva*, Ainscow (2012) drew on international research literature in order to make suggestions on how schools can be made more inclusive. The aim of inclusive school improvement “is to eliminate exclusionary processes from education that are a consequence of attitudes and responses to diversity in race, social class, ethnicity, religion, gender and attainment, as well as with regards to disabilities” (p. 2). From Ainscow’s perspective, inclusion is a process and should be viewed as a never-ending search for better ways of responding to diversity. Ainscow’s recommendations include the identification and removal of barriers; restructuring cultures, policies, and practices in schools to respond to the diversity of the locality; and the presence, participation and achievement of all people vulnerable to exclusionary pressures.

Inclusivity in schools must refer to both students and teachers alike. According to Rolheiser, Evans, and Gambhir (2011):

Although the student population is diversifying in Canada, the teaching workforce

does not adequately reflect this change. As in pluralistic countries such as Australia, England, India, and the United States, there is a divide between teachers' identities and those of their students. (p. 6)

In a qualitative study, Vogel and Sharoni (2011) interviewed 12 Israeli teachers with learning disabilities to discover their perceptions of the impact of their disabilities on their careers. Employment of teachers with learning disabilities has been a long-debated issue in Israel, and the study found similar findings to studies conducted in England and the USA. Findings included, but were not limited to, participants' perspectives on difficulties encountered as teachers, compensatory strategies used by the teachers, and teachers' self-perceptions of self-efficacy (pp. 487-488). The participants viewed themselves as successful teachers, and perceived their disabilities as having a positive impact on their professional work. The study proposed that schools providing a supportive and accepting atmosphere for teachers with disabilities would truly be a model of an inclusive society.

Looking at workplaces in the academic field, Horton and Tucker (2014) examined 75 employees with disabilities and their experiences of having an academic career. Their study revealed that academic workplaces/careers continue to reproduce "challenging, unpleasant and anxiety-inducing" experiences for employees with disabilities (Horton & Tucker, 2014, p. 76). Participants with physical impairments experienced feelings of anger or "bolshiness" that in turn, sparked activist dispositions. Experiences and negotiations of "reasonable adjustments" in academic and institutional workspaces continue to reflect ableist norms, resulting in limited accommodations in the participants' disciplines.

Specifically focusing on mobility issues, Campbell's (2009) autoethnography study examined how disabled teachers' bodies contribute to the frame of "other." Campbell writes as a disabled teacher in a university setting, describing points of difference between the way normative teachers' bodies and the disabled teaching body are perceived by others in processes of subjectification, and identifying points of convergence that can benefit understanding. Campbell explained the importance of identity formation, minority representation, and dialogue created by the disabled teaching body in forcing people to consider the multiple realities of living with impairment within an ableist society.

Another autoethnography by Whitman (2007) examined his experiences as a philosophy teacher in a wheelchair for more than fifteen years. Whitman's article stressed the need for and lack of physical accommodations, moral accommodations, and "value-added" opportunities in educational institutions. According to Whitman, "disability in the classroom can and should be viewed not as a burden but more as an opportunity for teaching enrichment" (p. 345). Whitman contended that the presence of himself and other people (both teachers and students) with physical disabilities brings a depth of experience and insight to the classroom that other students and teachers can sometimes barely imagine. Whitman contended that people with disabilities have faced struggles and challenges that provide them with insights into "the real nature of human frailty and the contingency of human existence" (p. 351).

Specifically related to teaching physical education, Green, Kimbrough, and White (2008) conducted a study at a Texas university involving 190 volunteer college students enrolled in a health and fitness class. The study investigated whether stereotypes about,

and attitudes toward, individuals in a wheelchair would influence the perceived effectiveness of a physical fitness lesson. Findings showed no significant difference in knowledge between students who learned material from a person in a wheelchair and those who did not. However, in a follow-up questionnaire, the study revealed that, despite no difference in the teaching effectiveness between physical educators who were wheelchair users or not, the educators in wheelchairs received negative comments on their ability to teach a physical education lesson. Green et al.'s study supports a common perception that "the culture of sport values physical abilities, and individuals with a visibly apparent physical disability ... unable to perform some movements physically ... [are perceived as] unable to teach others, or be experts in the field of physical fitness" (p. 8).

In a final account of teachers with disabilities, Wills (2011) chronicled the stories of four K-12 educators who have conducted classes despite having physical disabilities. Although immediately disadvantaged to prospective employers, these teachers have proven themselves as influential role models who are no less capable or competent than able-bodied teachers. The first teacher highlighted in Wills's article was Gary LeGate, an influential retired high school educator who is blind. Mr. LeGate's experiences attest that teachers with disabilities can manage classrooms of teenagers. Despite his professional success, Mr. LeGate proposed that schools are no more open to hiring blind teachers today than they were in the 1970s when he originally obtained his job in Maryland.

The second teacher in Wills's (2011) article, Amanda Trei, an elementary school special education teacher, described how her physical disability as a result of a car accident left her paralyzed and dependent on a wheelchair. Planning on becoming a nurse, she changed her career path and became a teacher, where she believed fulfilling

and rewarding opportunities waited. Viewing her disability as an asset in the classroom, Trei has been able to both reach youngsters who have disabilities of their own and teach lessons about diversity, inclusion, and acceptance to all students. Her presence in the school has not only allowed students with disabilities to feel accepted, but also demonstrated to others that those with disabilities are not excluded from becoming professionals or intellectuals.

The third teacher interviewed was Tricia Downing, an internship coordinator for Denver's CEC Middle College. Downing was a competitive cyclist who endured a catastrophic accident when hit by car and paralyzed from the chest down. Despite these circumstances, she continued to pursue cycling as a paraplegic, returning to work, and teaching teenagers about overcoming challenges that occur in life.

The final teacher interviewed in Wills's (2011) article was Wendy Shugol, a special education teacher who relies on a wheelchair and a service dog in her classroom at Falls Church High School in Fairfax County, Virginia. Shugol became a strong advocate to other teachers about not judging students with disabilities based on physical appearance, and successfully brought more demanding courses to her school's physical disabilities department. She, among the other teachers mentioned in this article, clearly expressed the challenges and advantages of being an educator with a disability, and revealed how students and the community benefit from her presence in the school.

### **Summary of Chapter Two**

In the 1970s, the long-standing theoretical perspective of disability, known as the medical model, was replaced in the literature by a more enlightened perspective called the social model. Since 1982, the Canadian government has created reports to address the



right and issues of people with disabilities. In 2009, the Canadian Government released the latest federal disability report, *Advancing the Inclusion of People with Disabilities 2009*. This report provided information for designing and planning services that enable people with disabilities to participate fully in society.

In Canada, approximately 4.4 million children and adults are currently living with one or more disabilities. Between 2001 and 2006, census surveys demonstrated that the number of Canadians with disabilities has increased most predominantly in the mobility sector followed by agility/dexterity. Examined disability issues indicated four main outcome areas: disability supports and services, education and training, employment and income, and health and well-being.

To date, little international research attention has been given to the professional experiences of people with disabilities, and more specifically, to the professional experiences of teachers with disabilities. Across studies, positive employment experiences have promoted a sense of well-being for people with disabilities. Studies have revealed the extent to which social environments are designed to accommodate difference and allow all people with impairments to participate in a professional life.

### **Outline of Remainder of Thesis**

Chapter 3 of this thesis outlines the methodology used to conduct a study that investigated both personal and professional experiences of teachers with mobility challenges and their self-perceptions of professional success. Chapter 4 introduces findings of the study. Chapter 5 summarizes the study, discusses the findings, and suggests implications for schools and for future research.

### **CHAPTER THREE: METHODOLOGY AND PROCEDURES**

This study was a qualitative investigation of both personal and professional experiences of teachers with mobility challenges and their self-perceptions of professional success. A qualitative investigation explores and develops a detailed understanding of a central phenomenon of interest (Creswell, 2012). The lens of moral purpose (see Fineman et al., 2010, pp. 179-195; Goddard & Hart, 2007; Valeo, 2010) closely guided and informed the approach I undertook in this thesis. As a researcher, I explored the personal accounts of participants who represented an understudied population. “Studies of little known phenomena or evocative contexts are intrinsically interesting (Tracy, 2010, p. 841). My primary source of collecting data was through one face-to-face interview with each participant.

#### **Research Methodology and Design**

This study reflected “an interest in understanding social phenomena from the actors’ own perspectives and describing the world as experienced by the subjects, with the assumption that the important reality is what people perceive it to be” (Kvale & Brinkmann, 2009, p. 26).

In this study, I explored personal accounts of specifically chosen teachers who represent an understudied population. Qualitative approaches are particularly appropriate when investigating understudied populations because of the need to augment existing information and theory (Gallor et al., 2004). Qualitative approaches are also appropriate when exploring “breaks with dominant norms” (Bergeron, Vincent, & Boucher, 2012, p. 251). Because little literature exists on the phenomenon of interest in this study, I conducted this research in order to understand and learn from the experiences of teachers

with mobility challenges. I solicited detailed views and experiences that contribute further understanding of the phenomenon from their point of view. Such an interest in participants' accounts seeks "to understand the way participants make meaning of the events that shape the way in which they have lived their lives" (Hammond & Wellington, 2013, p. 110).

My conceptual framework borrows from the goals of grounded theory (Strauss & Corbin, 1997). Grounded theory is a methodology originally developed by Glazer and Strauss "for the purpose of building theory from data" (Corbin & Strauss, 2008, p. 1). Grounded theory development is a qualitative procedure that examines individuals with similar experiences in order to create a general understanding of their shared situation. "Grounded" in the views of the participants, this understanding explains the phenomenon of a process, action, or interaction among people (Creswell, 2012, p. 21). A grounded theory approach is "grounded in that the job of classifying and interpreting data begins with data, and not a handed-down conceptual framework (Hammond & Wellington, 2013, p. 82).

"The purpose of grounded theory is not to test existing theory, but to develop theory inductively" (Kvale & Brinkmann, 2009, p. 202). Corbin and Strauss (2008) used the term grounded theory in a generic sense "to denote theoretical constructs derived from qualitative analysis of data" (p. 1). Although Strauss and Corbin (1998) advised that at least ten interviews or observations with detailed coding are necessary for building a grounded theory (p. 281), they included in their 1997 text, *Grounded Theory in Practice*, an example of a grounded theory study on Alzheimer caregivers with only five participants (Orona, 1997, pp. 171-196). According to Strauss and Corbin (1997), this

study of Alzheimer caregivers is “virtually a textbook exemplification of the appropriate use of grounded theory procedures, as well as showing an accurate understanding and deep appreciation of the basic methodology itself” (p. 172).

I conducted my thesis research in the spirit of a modified grounded theory approach. The goal of my study was to use participants’ accounts to determine factors that contribute to the achievement of self-perceived professional success of teachers with mobility challenges, and thus to help future teachers in this understudied population. The lens of moral purpose (Fineman et al., 2010, pp. 179-195; Goddard & Hart, 2007; Valeo, 2010) closely guided and informed my approach.

### **Researcher Perspective**

The relationship between researcher and participant is essential and ever-present in qualitative research (Buckle & Dwyer, 2009, p. 55). Qualitative researchers are firmly involved in, and essential to, all aspects of the research process, playing a direct and intimate role in both data collection and analysis. The term “positionality” refers to the steps taken by researchers to explain their “position” in relation to a study and acknowledge how the study may be affected by their own particular backgrounds (Hammond & Wellington, 2013, p. 118). A researcher’s “position” may allow him or her to have an “insider” or “outsider” perspective (Buckle & Dwyer, 2009, p. 55). From an “insider” perspective, the researcher is “someone whose biography (gender, race, class, sexual orientation, and so on) gives them [*sic*] a lived familiarity with the group being researched”; an “outsider” is “a researcher who does not have intimate knowledge of the group being researched, prior to entry into the group” (Mercer, 2007, p. 3). As a certified

Ontario teacher with mobility challenges, I undertook this research from the insider perspective.

The “insider” perspective can have many advantages (Buckle & Dwyer, 2009). First, the insider role might not only provide access into groups that might otherwise be closed to “outsiders,” but also encourage participants to be more willing to share their experiences (p. 58). Secondly, the commonality between researcher and participant offers an immediate starting point of trust and legitimacy. Participants are typically more immediately open with “insider” researchers, therefore allowing for a greater depth and breadth of understanding of the researched population that may not be as accessible to other researchers (p. 57).

In effect, because the wider social structure classifies the researcher and informants in a similar or identical fashion, this creates greater confidence between the parties. ... One of the results of this trust and exposure to the most intimate of details is that the insider researcher is able to appreciate the full complexity of the social world at hand. The result is a potentially accurate portrayal, rather than a simplistic caricature. (Mercer, 2007, p. 7)

For “insider” researchers, personal and professional identities can enhance the research process, and through the research process, “insider” researchers might learn more than through personal and professional experience alone (Sidebotham, 2003).

Despite its advantages, however, the insider perspective also holds challenges for the researcher. For example, insider researchers must be “sensitive to, and critical of, [their] roles in shaping ... interpretations” (DeLyser, 2001, p. 451). In the case of shared physical characteristics (e.g., the presence of a wheelchair), “through [their] ... presence,

and through [their] role as part of the community,” insider researchers must be careful to avoid unwittingly creating and perpetuating “the mythology” surrounding participants being studied (p. 451).

“Morally responsible research behavior ... involves the moral integrity of the research” (Kvale & Brinkman, 2009, p. 74). In insider research, rigorous attention must be paid to minimize the effects of researcher-bias on findings. One means of accomplishing this task is to solicit information through neutrally worded prompts (McLauchlan, 2010, p. 139). Thus, from the insider perspective, I purposely attempted to avoid influencing participant accounts through the careful wording of interview questions.

### **Participant Selection**

This study recruited a homogenous sample of three participants. Homogenous sampling is the process of selecting a small group of individuals with specific similar characteristics (Cohen & Crabtree, 2006). This type of selection allowed for an in-depth understanding and examination of the particular group I sought to study. Participants were all Ontario teachers who have (a) permanent physical disabilities that challenge their means of mobility. They use aids and assistive devices, such as wheelchairs, to support their mobility both in and outside the classroom. Each participant has obtained an Ontario Certified Teaching License and currently teaches or has taught in an Ontario school.

The decision to interview exactly three participants was deliberate. Collecting data from one participant would have been too narrow a focus while several participants would have generated overwhelming data. According to Kvale and Brinkmann (2009), many current interview studies would benefit from fewer interviews and more in-depth

analysis of a small pool (p. 113). Participants of this study were recruited by invitation through my personal network of contacts; first contact was initiated by me via telephone. Following each telephone conversation, the potential participant received by email a formal letter of invitation, consent form, and the interview guide.

### **Participants**

Participant identifiers used in this study are participant-selected pseudonyms. The first participant was Jimmy, a 39-year-old male. At the time of this study, Jimmy resided with his wife in a detached house a few kilometers from a small town. Jimmy and his wife have no children but live with several pets including three cats and two dogs. Jimmy acquired a spinal cord injury after a roofing accident when he was 23 years old. At the time of his accident he was not yet married. He is now classified a C4 incomplete quadriplegic and has been paralyzed for 16 years. Jimmy has regained significant movement in his upper torso and some sensory feeling throughout his body. Jimmy relies on a manual wheelchair for mobility, despite some impairment in his hands and arms. He also owns an electric wheelchair for particular uses. Jimmy has worked 3 years full-time as an elementary school French teacher and, before that, approximately 2 years as a supply teacher.

The second participant of this study was a 47-year-old female named Anastasia. Anastasia is currently married with one daughter age 23 who no longer lives at home. Anastasia sustained a spinal cord injury following a parachute accident at the age of 16, in which she fell 3,000 feet. Classified a T4-5 complete paraplegic Anastasia has no feeling or movement below the level of injury (approximately chest level), but has the full use of her arms and hands. She has lived with her paralysis for 31 years and relies on

a manual wheelchair. Anastasia worked as a French Immersion Junior/ Intermediate school teacher for a total of 10 years, followed by work in the Professional Relations Services for Ontario Teachers Federation (OTF) for a total of 6 years. During her career Anastasia resided and worked in an urban setting.

The third participant of this study was Mike. Mike is a 36-year-old male who acquired a spinal cord injury in a bicycle accident when he was 23 years old. Never married, Mike currently lives in an apartment attached to his parents' urban home minutes from his school of employment. Mike sustained a C4 incomplete spinal cord injury that classifies him a quadriplegic with little sensory feeling throughout his body and very limited movement. Mike has severe impairment to his arms and hands, and fully relies on an electric wheelchair for mobility. Mike has lived with his paralysis for approximately 13 years and has taught and coached at the secondary school level for approximately 12 years.

### **Data Collection and Recording**

Semi-structured one-on-one interviews were the primary data source for this study. In qualitative research, face-to-face interviews have become the most common method used to obtain and explore people's lived experiences in context (Horrack & King, 2010, p. 182). Interviews are a key method of eliciting narratives, so that researchers can attempt to understand the world from participants' point of view (Kvale & Brinkman, 2009, p. 1). Interviews are particularly well suited for studying people's understanding of the meanings in their lived world, describing their experiences and self-understanding, and clarifying and elaborating their own perspectives (Horrack & King, 2010, p. 182).



The interviews in this study were open-ended and followed a semi-structured interview guide. “Open-ended interviews are likely the most popular form of interviewing utilized in research studies because of the nature of open-ended questions, allowing participants to fully express their view points and experiences” (Turner, 2010, p. 756). Interviews using a semi-structured approach are beneficial because they explore how people interpret their own experiences (Horrack & King, 2010, p. 182). A semi-structured interview seeks

to obtain descriptions of the life world of the interviewee with respect to interpreting the meaning of the described phenomena; it will have a sequence of themes to be covered, as well as some suggested questions. Yet at the same time there is an openness to change of sequence and forms of questions in order to follow up specific answers given and the stories told by the subjects. (Kvale & Brinkman, 2009, p. 124)

In small understudied populations, “interviews allow the researcher to closely question and obtain concrete examples supporting the claims while questionnaires do not follow up on participants’ statements” (Kvale & Brinkmann, 2009, p. 115). For the purpose of this particular study, surveys and other questionnaire approaches would have posed limitations when probing meaning and causality (Hollway & Jefferson, 2000, p. 10).

While conducting interviews, I applied principles underlying successful interviewing techniques, such as active listening, rephrasing, and not suggesting answers. Participants selected the interview sites, both for the sake of their convenience and to encourage participant comfort. Two participants were interviewed at their home while one was interviewed at his current place of employment.

In addition to interviews, I recorded field notes in order to contextualize the data and describe what was not included on the audiotapes. Kvale and Brinkman (2009) suggested that the interviewer “set aside 10 minutes or more of quiet time after each interview to reflect on what has been learned from the particular interview” (p. 129). Immediately after each interview, I recorded my reflections and details of my surroundings, as well as questions that I may want to follow up with the interviewee. Adhering to a guide developed by Chiseri-Strater and Sunstein (1997), I organized my field notes under the following headings: date, time, location, description of participant, description of location, sensory impressions, researcher’s personal response, comments that stood out, and future follow-up questions.

### **Constructing the Interview Guide**

“Creating effective research questions for the interview process is one of the most crucial components to interview design” (Turner, 2010, p. 757). The interviews conducted in this study were each approximately two hours in length and followed a 13 question semi-structured interview guide (see Appendix A). According to Kvale and Brinkman (2009), “a good interview question should contribute thematically to knowledge production and dynamically to promoting a good interview interaction” (p. 131).

According to McNamara (2009), effective research questions should be open-ended, neutral, and clearly worded. The 13 questions in this study were clearly and neutrally worded and provided to each participant prior to his or her interview in order to elicit beneficial descriptive accounts of his or her particular professional situations and perspectives.

The 13 interview questions guided participants' attention toward areas of self-perception and mobility challenges. In the first few questions, I asked participants to describe when and how they became mobility challenged, and to explain the effects of their mobility challenges on daily activities. When necessary, I sought clarification on how participants perform particular tasks, and requested elaboration on obstacles encountered.

### **Transcription Procedures**

Interview transcription is a powerful act of representation; although transcribing is often viewed as a “behind-the-scenes task,” transcription of interviews can “powerfully affect the way participants are understood, the information they share, and the conclusions drawn” (Mason, Oliver, & Serovich, 2005, p. 1273). The structure of transcribed interviews captures a naturalized view of conversation and reflects a verbatim depiction of speech between the interviewer and the participant (Mason et al., 2005).

“There is one basic rule in transcription — state explicitly in the report how the transcriptions were made” (Kvale & Brinkman, 2009, p. 180). In this study, all participant interviews were transcribed in full by me, the researcher, using naturalized transcription. Naturalized transcription is a verbatim text representation of the interview capturing as much detail as possible including pauses, repetitions, tone of voice and response/ non-response tokens—such as *yeah*, *uh huh*, *mm*, et cetera (Mason et al., 2005, pp. 1275-1276). According to Mason et al. (2005), such signals can set the tone of a conversation and/or offer insight into the participant's affect (p. 1276).

Using myself as the sole transcriber was a deliberate choice. “In the academic world, hiring individuals other than the researcher to transcribe research tapes are

common practice” (Tilley, 2003, pp. 750- 751). However, transcription facilitates the close attention and interpretive thinking that is needed to make sense of data (Tilley, 2003). The transcriber can influence the analysis and therefore trustworthiness and reliability of data as they are translated from tape into text. Being the sole transcriber also eliminated possible misinterpretation of certain details such as inconsequential pauses, stuttering, etc. that “could have no bearing on the content of the interview at all, and obfuscate the participants’ meaning, misleading the analyst...question[ing] validity and representation” (Mason et al., 2005, p. 1276). Each transcribed interview was analyzed according to sound qualitative procedures of coding, identifying themes, and interpreting (Creswell, 2012, pp. 243-274) with respect to the research questions proposed by the study.

### **Use of Arts-Based Participant Representation**

Following member checking of transcripts, I sent participants an email requesting permission to create works of art that would represent each one of them. The email informed participants that each work of art would be my abstract representation of them with no literal identification (i.e., portraits or accident related acknowledgment) that would specifically reveal participants’ identity. The email did request participants to respond to the question: “Are there any particular materials, symbols, animals, textures etc. that you feel represent you or capture the essence of you or a time during your life? They can be as abstract as materials (wood, clay, sand, gravel, etc.), symbols (birds, flowers, patterns, etc.) or artifacts (tools, a page from a textbook, etc.).” All participants agreed to the creation of artwork that would represent them, and provided suggestions for their individual art pieces.

My reasons for creating an art piece that represents each participant are threefold:

(a) As a visual artist, I have the capacity to create abstract representations of individuals,

(b) I did not want my interviewed participants to lose the complexity of their identities by focusing solely on their shared characteristics of having a career in the teaching field and being mobility challenged, and (c) Several prominent theorists of arts-based research recognize the value of using art to communicate information. For example: Creswell (2012) described art as a unique “alternative” (as cited in Fournier, 2014, p. 24) form of qualitative representation. Saldaña (2011) discussed drama, dance, visual art, and music as artistic processes that express meaning beyond the scientific language of typical research findings. Barone and Eisner (2012) acknowledge arts-based methods in both “inquiry and represent[ation]” (p. 13) as uniquely addressing aesthetic qualities that make content accessible through variations of form.

The art pieces I generated convey abstract representations that, I feel, capture the complexity and essence of each individual participant based on the time I spent interviewing, listening to their stories, and acknowledging the suggestions they sent me via email.

### **Data Analysis Procedures**

Data analysis for this study was accomplished in three phases. In Phase 1, I treated each transcript individually, reading it carefully from beginning to end in order to become familiarized with the data. This provided the “first step in any analysis ... to get a feel for what it is all about” (Corbin & Strauss, 2008, p. 163). Corbin and Strauss (2008) explained that “the idea behind the first reading is to enter vicariously into the life of participants, feel what they are experiencing and listen to what they are telling us” (p.

163). Phase 1 also included writing reflective analytic memos and questions in the transcription margins, highlighting interesting facts and noting surprising information. Saldaña (2009) labelled this process pre-coding or preliminary jotting, wherein the researcher makes note of “significant participant quotes or passages” (p. 16).

Phase 2 began by again treating each transcript individually. As I read the transcript, I applied initial coding to each transcript using a deductive structural coding method. Structural coding “applies a content-based or conceptual phrase representing a topic of inquiry to a segment of data that relates to a specific research question used to frame the interview” (Saldaña, 2009, p. 66). “Particular research questions and concerns generate certain [coding] categories” (Bogdan & Biklen, 1998, p. 171). Initial structural coding thus took a question by question approach in each transcript. An example of a structural code used in this study was *Effects of being Mobility Challenged on Every Day Activities*. Therefore, any information pertaining to how participants’ mobility limitations have caused them to modify how they accomplish tasks would fall under this structural code. Within each transcript, I identified all information pertaining to each structural code. Appendix B contains a list of 22 deductive structural codes used in this study.

In addition, I embedded In Vivo coding into the structural coding process. In Vivo coding refers to a word or short phrase from the participant's own language found in the qualitative data record (Saldaña, 2009, p. 74). When categorizing information into structural codes, I placed quotation marks around each In Vivo word or phrase so that it would be recognized as the participant’s own voice.

Next, following Bogdan and Biklen’s (1998, p. 186) recommendation, I physically cut with scissors each transcript into its structural codes and combined

information from each transcript into envelopes with the appropriate structural code label attached to each one. As a form of identifying participants, each transcript was assigned a particular colour. Coloured tabs similarly marked information of interest that appeared only once and/ or did not fit into existing codes.

Phase 2 also included analytic memo writing as a method of documenting and reflecting on the “coding process and code choices; how the process of inquiry is taking shape; and the emergent patterns, categories and subcategories” (Saldaña, 2009, p. 32). “Analytic memos can be prompts or triggers for further written reflection on a deeper meaning and thus sites of conversation with ourselves as researchers about our data” (Saldaña, 2009, p. 32). I used analytic memos to record possible follow-up questions for participants, document and/or question my own interpretative coding decisions, and note any questions for my advisor. At this time, I then contacted by participants via email with any follow-up questions.

In Phase 3, I used focused coding (Saldaña, 2009, p. 155) to search for frequent and significant word or statement patterns and to group codes into meaningful inductive categories. Induction is the process by which “we draw general conclusion from individual instances or observations thus a bottom-up approach concern with identifying patterns within data” (Hammond & Wellington, 2013, p. 87). After examining the data and creating 12 structural code envelopes, I searched for connections and commonalities (Saldaña, 2009). Using this process, I collapsed the codes into five major finding categories or themes, as presented in chapter 4.

### **Methodological Assumptions**

Throughout the process of planning and implementing this study, I made several

assumptions related to the research methods I embraced. First, I assumed that I would be able to find appropriate participants for this study and that their mobility challenges would affect their professional experiences. I also assumed that three participants could generate and present rich and meaningful information related to my research questions. I believed that a combination of one in-depth interview and my researcher field notes was a sufficient means of collecting data from each participant. I assumed that the questions I chose as an interview guide could be answered in two hours and were both broad and narrow enough to collect sufficient and relevant data.

When interviewing participants, I assumed that participants would be able to recall past experiences and situations in depth. I was confident that I would be able to keep interviewees focused on the guiding questions. I assumed that allowing participants to select the location and time of the interview would create a sense of comfort and allow each one to focus and recall his or her experiences without distraction.

When interviewing participants, I assumed that I was prepared to ask valuable and useful probing questions. I was confident that I would be able to separate myself as an “insider” researcher from my participants and remain open-minded, with a neutral standpoint, despite my experiences as a teacher candidate with mobility challenges. I was aware that participants might use terms and language related to disability that would be familiar to themselves and myself as an “insider” researcher, and would require explanation to a non-disabled group of readers. I was also aware that, because I have a visible mobility challenge in that I use a wheelchair, participants may omit information because they assume it is shared knowledge between us. Thus I was prepared to seek expansion and clarification of answers.



After interviewing each participant, I assumed that I had the stamina to transcribe each interview and be the sole transcriber. I also assumed that I could contact participants in case of clarification or if more information was needed, and that the participants would be willing to contribute more to the study if necessary.

### **Limitations**

The purpose of this study was to investigate disability-specific information from the perspectives of specifically chosen participants. This study is limited to the experiences presented solely by three teacher participants with mobility challenges. The findings of this study cannot be applied to all teachers with mobility challenges nor be applicable to all teachers with disabilities. The results of this study provide a preliminary understanding of teachers with mobility challenges and their perceptions of professional success.

The second limitation of this study is that it investigates participants' self-perceptions of professional success. Therefore, only participants who viewed themselves as successful while also being mobility challenged were involved in the study. Much research remains to be done on teachers with mobility challenges who do not view themselves as vocationally successful. Also, others' views and opinions of these participants as teachers with mobility challenges (e.g., students, colleagues, school administrators) were not investigated.

Lastly, when conducting interviews, distractions may have been a limitation. I interviewed two of the participants in their homes. One owned several indoor pets that were a continuous disturbance, interrupting the participant's train of thought. During the

second interview, interruptions occurred as people entered the house. As a result, I had to repeat questions and encourage participants to regain their thoughts.

### **Establishing Credibility**

“Credibility refers to the trustworthiness, verisimilitude and plausibility of the research findings” (Tracy, 2010, p. 842). I established the authenticity of the data collected primarily through the use of member checking. Member checking is the process of which each participant receives a copy of his or her transcribed interview to confirm the accuracy of interview dialogue and to add or clarify any points appropriate (Creswell, 2012).

To further ensure trustworthiness and reliability of data, each interview was solely transcribed by me, the researcher. When transcribing interviews from recorded tapes into text, “analysis and deeper understanding of data occur during the act of transcribing” (Tilley, 2003, p. 770). As stated by Tilley (2003), it is strongly encouraged that researchers transcribe research tapes themselves to increase better transcription decisions and avoid influences other transcribers-can have on the research data.

In vivo coding added another aspect of credibility to the study. When interpreting the data I used direct quotations from transcripts as much as possible so that participants’ voices were not only heard but also engaged in the form of representation (Saldaña, 2009).

### **Ethical Considerations**

Before beginning my research, I submitted an Application for Ethical Review of Research Involving Human Participants to the Brock University Research Ethics Board (REB) and was subsequently granted permission to proceed with my research (File #12-117).

Once potential participants were identified, I corresponded with them either by email or by phone. I explained the purpose of the study in detail and sent them a letter of invitation, a consent form, and the interview question guide via email. I wanted to ensure that the participants fully understood the purpose of my research, had the opportunity to ask any questions for clarity, and felt comfortable with the entire process. I then arranged each individual face-to-face interview at a time and location of each participant's convenience.

Before each interview, I reviewed with each participant the highlights of the letter of invitation explaining the research process, how the interview would be conducted, potential benefits and risks, confidentiality, voluntary participation and publication of results. I confirmed that participants had read and understood the consent form and that they had the right to withdraw from the study at any time if they so wished. Participants also had the right to refuse to answer any question at any time during the interview without having to withdraw from the study. Participants signed and dated the consent form after reviewing it with me.

During the transcription and analysis of data (including transcription and analysis results), participants were identified by pseudonym only and locations of their work places were not revealed. Completed interviews were kept in a folder in a locked desk drawer in my bedroom at home and strictly confidential to myself as the researcher.

### **Summary of Chapter Three**

Chapter 3 outlined the methodology used to conduct this study. This chapter described the qualitative research approach used and explained how this study borrowed from the concept of grounded theory. The subsequent sections described the

“positionality” of the researcher, followed by the process of selecting participants. The following sections described the procedures used for data collection and data analysis, and identified methodological assumptions and limitations. This chapter then described the establishment of credibility and, lastly, highlighted ethical considerations of the study. Chapter 4 identifies and discusses the five finding categories or themes generated in this study.

## CHAPTER FOUR: FINDINGS

This study was a qualitative investigation of both personal and professional experiences of teachers with mobility challenges and their self-perceptions of professional success. Three research questions guided the study:

1. What factors have allowed teachers with mobility challenges to achieve self-perceptions of professional success?
2. What challenges or obstacles have these teachers experienced in their paths to success?
3. What coping strategies have teachers with mobility challenges found most helpful?

The three participants in this study (Anastasia, Mike, and Jimmy) differ in injury levels, teaching experiences, and geographical locations. All three are unique individuals who share a common characteristic of being a teacher with a mobility challenge. Despite this common thread, I open this chapter presenting each participant through the use of visual art accompanied by an artist statement.

### **Artist Statement: Anastasia—Storybook**

With a grin on her face and her hands clasped together, a young girl sits on top of a thick weathered storybook. Staring at the viewer politely, she sits attentively ready to present what waits inside. Underneath her, many pages – many stories. The pages are tattered and worn but remain bound tightly symbolic of the numerous stories and experiences that have woven and shaped this participant. (See Figure 1)

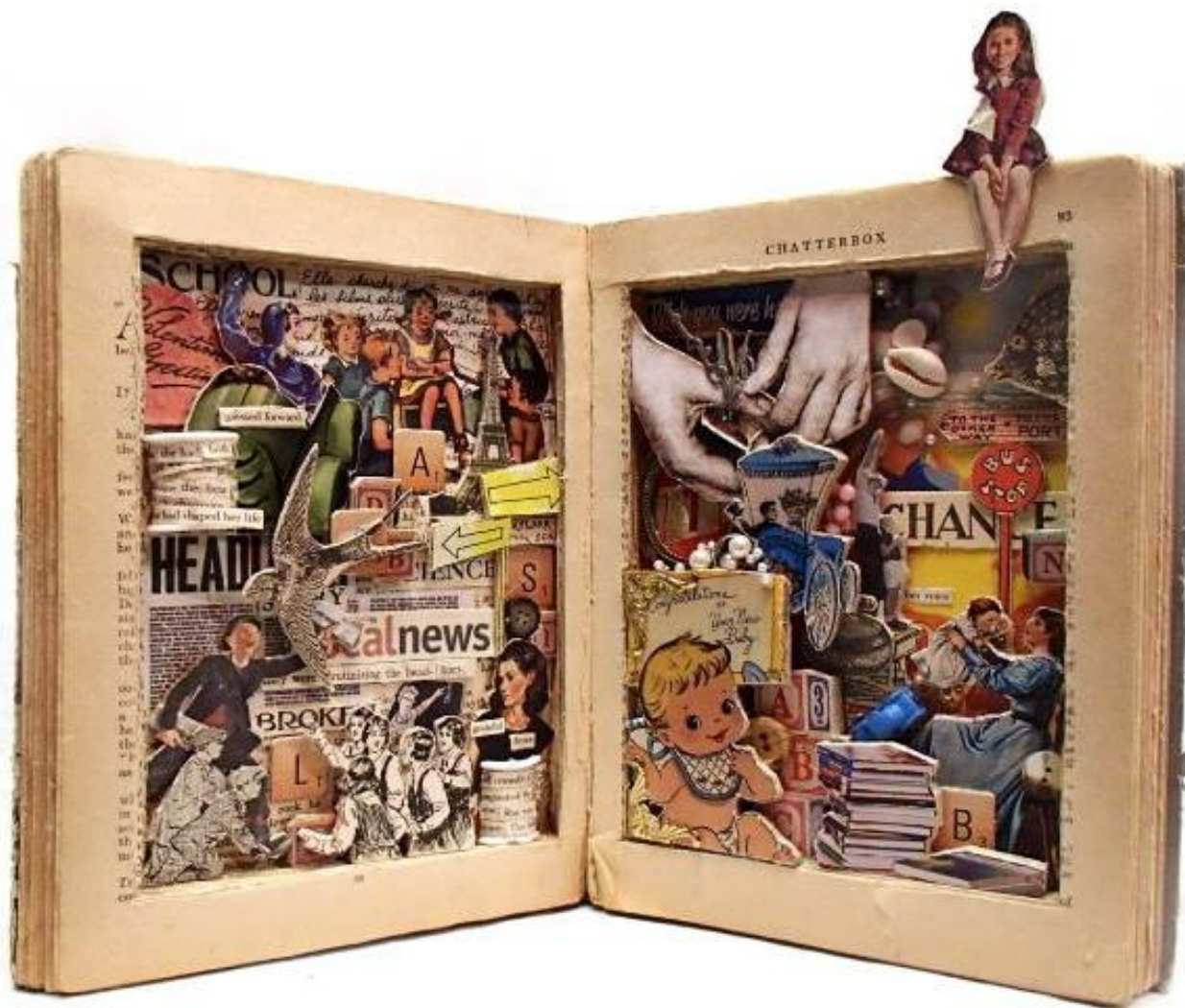


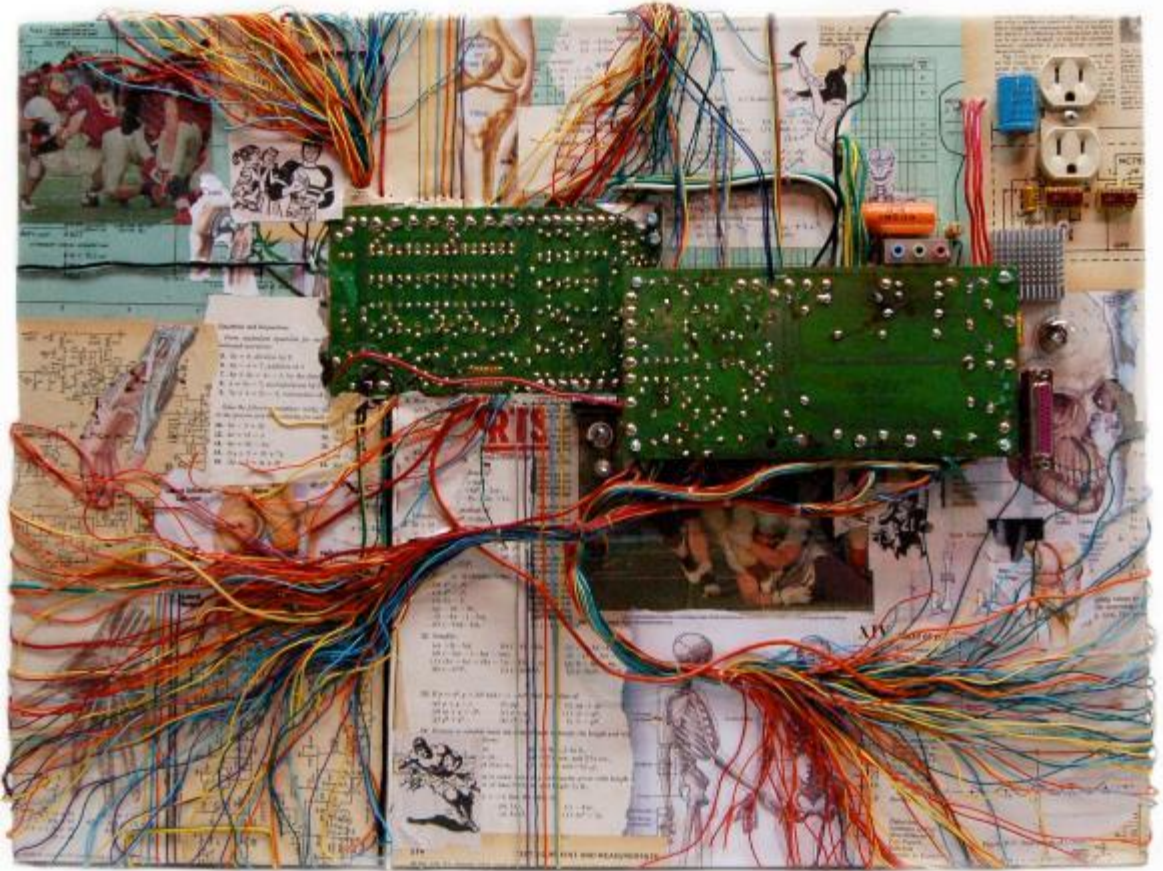
Figure 1. Anastasia—Storybook

Inside the storybook, an assemblage of found images and objects are re-contextualized to depict Anastasia's told stories and important milestones. Her childhood, career, marriage, and motherhood are represented as an abstract visual story. Images of a mother holding her baby and a teacher surrounded by attentive students can be found amongst signs of misleading arrows and people pointing at news headlines. Spools of printed text begin to unravel partial sentences and words giving only abstract thoughts of Anastasia's character. Now, currently in her second career as a travel agent, she does much travelling. Seashells and classic vacation postcards read "Wish you were here," and an image of a swallow, a bird that is stubborn and very difficult to drive away, conveys her energy and drive resembling her continuous pursuit to live life to the fullest.

A traditional storybook symbolizes characteristics of Anastasia and how she conducted herself throughout the interview. She answered questions formally through the use of various stories, describing her life in chapters. She showed attributes of modesty and tradition, eager to share her wealth of knowledge and life experiences. The storybook reflects her independence. The young eager spirited girl sitting upon the art piece emulates Anastasia as she calmly waits to share her stories: sophisticated, confident, and proud.

#### **Artist Statement: Mike—Wired Canvas**

An electrical circuit only works if all the components are active and a closed loop provides an undisturbed path for the electrical current to flow. Similar to the human body, blood flow requires a closed circuit of arteries and veins to reach all organs and return to the heart. In a world where technology is continuously advancing, it has been able to extend the human body beyond its limitations. One can either embrace it or become isolated by it. (See Figure 2)



*Figure 2. Mike—Wired canvas.*



Mike's openness is captured and portrayed through a more explicit multimedia art piece. Represented through images and newspaper clipping, his most profound passion for football is scattered and covered by vein-like wires throughout the piece. Once a college football player, his memories and love for sports fuel his energy to instruct, coach, and be a sports advocate. Mike quickly proclaims his love for football just as much as his other passions: science, kinesiology, and mathematics. His emphatic love and devotion for teaching these topics are symbolized by math equations and human body diagrams found on the surface of the canvas. These passions build upon each other like the collage built on the canvas. However Mike cannot express his passion or teach others through traditional teaching methods. Mike relies on the advances of technology.

The circuit board and associated wiring runs over and throughout this piece is emblematic of several things. Mike heavily relies on the advances of technology to express and teach his passions. As if extensions of his own body, technology does not only enhance his ability to communicate and convey his passions but is essential for his daily living and mobility. Secondly, this network symbolizes how interconnected his passions are, not only to each other, but to his physical body. His energy and health is fueled by his passions and without teaching he falls subject to a loss of "identity."

#### **Artist Statement: Jimmy—Painted Tire**

The worn tread of a single tire indicates the many places it has gone. Though one cannot make out the exact details of where it has been, the condition of the tire can say a lot about it. A tire has no direct path and encounters many bumps in the road. It is sometimes pushed hard but is resilient, continuously moving. When flat, it can be pumped back up, patched, or given a new tube that only stalls it for a short while.



*Figure 3. Jimmy—Painted tire.*

Painted upon the exposed surface of the tire are hobbies, memories, and important moments that stand out for the participant Jimmy (See Figure 3). The tire is emblematic of Jimmy's love of exploring the outdoors, his childhood growing up in the country followed by his adventures travelling across Canada. Jimmy is no stranger to manual labour with a passion for automobiles and mechanics. Having a knack for more hands-on approaches, Jimmy explains his hard work ethic was handed down by his father. Jimmy's more compassionate side is represented by wedding bands and images of animals symbolic of his love for his wife and many pets, all of which brings him much happiness. Jimmy's most exuberant quality is his ability to entertain. Often hosting lively family gatherings and poker nights, Jimmy enjoys his time with others telling stories, engaging in conversation, and expressing opinions on issues. His love of playing chess also reveals the other side of Jimmy, his competitiveness, patience, and admiration of strategy and intellect.

Visibly noticeable on the tire is the gash and nail punctures representing difficult times that Jimmy has encountered. However, despite these ordeals, my time spent interviewing Jimmy revealed that these experiences has not tarnished his enthusiastic spirit and love for telling stories and has only encouraged his political views and opinions. As represented inside the rim, words and phrases such as "family," "activist," "remember to vote," "community," and "plan" symbolize Jimmy's more inner deep thoughts and concerns. Though sometimes getting off track, Jimmy continuously has something to say emulating a tire that is constantly moving forward.

Despite participants' differences, however, their interviews generated five prominent themes or categories of commonality related to their personal and professional

experience of teaching with mobility challenges: (a) independence and sacrifice, (b) living with pain, (c) barriers and obstacles, (d) the importance of communication, and (e) professional benefits and personal rewards.

### **Independence and Sacrifice**

The three participants in this study all strive for as much independence as possible, even if independence means personal sacrifice or physical discomfort. “The independence piece [is] very important for me to be able to manage, you know, and do things on my own” (Anastasia). This desire for independence was highly prominent in all participants’ self-perceptions and aspirations.

“I was just happy to be working” (Jimmy). All participants agreed that being able to work and provide an income significantly contributed to their independence and self-worth, even if employment meant making sacrifices in other areas of their lives. Sacrifice mostly came in the form of refusing special treatment and dealing with discomfort. For example: “I’m certainly up [sitting in a wheelchair] a lot longer than they [physicians] would recommend being up, definitely up longer than I should be” (Anastasia).

Participants recalled times when they did not want to be seen as different or needing special treatment. Mike’s experiences are particularly enlightening. When Mike first entered his teacher education program: “I didn’t eat my lunch ’cause I’m like, is someone going to feel comfortable handling my food? Do I want someone taking my sandwich out of my back pack and putting it on my chair?” On the first day of class, Mike also battled the entrance doors: “I hit the power door on the first day and it wasn’t working.” He had to have someone open the door each day for three weeks and “could no longer handle it” (Mike). This seemingly small problem caused Mike such grief that he

“couldn’t sleep, [developed] paranoia, [and wanted to] drop out of school” (Mike). Being a newly injured paraplegic, Mike explained that “I didn’t know what I was going to need to [be successful at school]; I was naïve to that and nobody approached me [to help prepare].” The beginning of his teacher education program was an “eye opener [and the] first realization that things are no longer the way they used to be” (Mike).

At schools where participants worked, they “didn’t want to ask for a lot” and “could have asked for a lot more” (Jimmy). When it came to accommodations, especially as a new teacher, Anastasia stated that “my standards were lower and I would just make do with how things were.” However, as she matured as a teacher and grew older:

My expectations in terms of washrooms are a lot higher. Now I need to have a grab bar, etc. I want to have as many things in place from a safety perspective. Whereas before, I wouldn't think twice, [I would think,] “Oh well, there’s no grab bar.”  
(Anastasia)

Jimmy explained that, despite being in a wheelchair, as an elementary French teacher he did not have his own classroom and had to “push a cart from classroom to classroom.” “I kinda didn’t want to be the whole ‘I’m a poor disabled person and I need all the help I can get’” (Jimmy). However, this attitude caused Jimmy to overlook the physical exertion needed to carry out this task as well as teach and also look after his personal needs throughout the school day. “[I was] constantly working out all day” (Jimmy).

Mike described his unmet need for accommodations due to his wheelchair and limited mobility. For something as commonly used by teachers as a computer, Mike does not “have a computer [he] can easily access”; over his 12 years of teaching he still

“hasn’t pressed for it.” He prefers to “make-do with what [he] has or kind of improvise or roll with the punches” (Mike).

When applying for jobs, Anastasia claimed that it was easier “not putting in my name if it [the physical layout] looked like it was going to be challenging. ... I didn’t want to worry about all kinds of modifications being done.” This choice not only immediately narrowed the number of schools she could apply for, but also did not encourage schools to address accessibility issues and become more physically inclusive.

The demands of working full time caused participants to sacrifice aspects of looking after their bodies and health. “Let’s face it; it’s tiring at the end of the day and I don’t always have the time to do proper exercising I should be doing” (Jimmy). “You can’t stay up on all the physio that you could possibly do to stay in elite shape ... sacrifices have to be made” (Mike). Other pursuits, such as active social lives and hobbies outside of the work environment, were also easily neglected. “I feel guilty sometimes, I’d like to go and see my nephew’s [baseball] games more, but I know if I go, I’m going to be miserable the next day ... so [my job] takes away from going out in the evenings” (Mike).

Related to the desire for independence, all participants in this study rely solely on their own means of transportation. “Transportation issues are probably the thing that has affected my professional life the most” (Jimmy). All three participants stated that if they “had to rely on public transportation, [getting to work] would be ridiculously harder” (Mike) and “really tricky” (Anastasia). Public transportation for teachers with mobility challenges is “not a reliable means of transportation and ... really problematic” in terms of getting to work on time (Anastasia). “You can’t be arriving late or leaving early

because of your ride ... I always had a car for teaching and drove myself to and from work” (Anastasia).

All participants have always travelled to work on their own: Jimmy and Anastasia drove themselves back and forth between home and their place of employment, while Mike lives close enough to his school to get there on his electric wheelchair. “There’s no way I’m working fulltime if I had to rely on public transportation ... I am very fortunate; once I’m ready to go to work, I’m at work in less than five minutes” (Mike). Being able to rely on oneself to get to and from work was viewed by all participants as the best transportation solution. As Jimmy described, “Transportation wasn’t always ... easy”. The difficulties of using public transportation led participants to think, “I’m not able-bodied, I can’t do things quote unquote ‘normal.’ I’m different now, [and] things [have] to be done differently” (Mike).

### **Living With Pain**

All participants endured physical pain while working as teachers. “Dealing with pain... is the biggest hindrance to quality of life” (Mike). However pain, aggravated by the demands of their teaching employment, did not prevent participants from continuing to do their jobs. “It [a mobility challenge] does take more energy... [I am] expending more energy than someone else” (Anastasia). The physical demand “exhausts me, aggravates my injuries ... and it's uncomfortable” (Jimmy). Mike best encapsulated the participants’ common attitude toward pain: “[Pain] makes it difficult to do the job ... [but] it's not incapacitating and it doesn't completely stop me from coming in” (Mike).

Despite efforts of managing pain, “the majority of my energy reserve is dedicated to what I do here [at school] during the day ... I invest so much time here” (Mike).

“Obviously the more time [I] spend in the chair...the sorer my back will become. My back is always very, very sore ... like a constant pressure going through one point” (Anastasia). “There are a lot of things you are responsible for ... so with those physical challenges it can be stressful” (Jimmy). Pain experienced by all the participants is “distracting...and [makes it] tough to focus on the job” (Mike).

“It’s physically demanding and physically difficult to do this job” (Jimmy). Such a task as “getting ready is challenging and takes you longer ... and can become more tiring than for somebody else” (Anastasia). When “[I] drop something ... or something falls out of reach” (Anastasia), it is often difficult to retrieve, requiring time and energy. “The key thing is that things take a lot longer” (Anastasia). Task demands contribute to stress, pain, and lowered energy levels. “They kind of all play on each other and aggravate each other” (Jimmy).

Due to pain, participants found it “difficult to keep a fulltime schedule at work” (Jimmy).

My energy reserves are pretty much taken up during the day...you can't have the active social life, work full time, run around get the grocery shopping done, cook dinner, worry about personal care that adds to three additional hours to a morning routine...some things gotta [sic] give. (Mike)

### **Barriers and Obstacles**

All participants in this study have experienced barriers and obstacles in their professional lives. These problems include attitudinal barriers, physical barriers, and task-related barriers.



### **Attitudinal Barriers**

All participants have encountered attitudinal barriers both during their teacher education programs and throughout their teaching careers. “I was told flat out in teacher’s college ... ‘You know no one is going to hire you as a physical education teacher, right?’”(Mike). All participants either sensed others’ concerns or received negative remarks toward the idea of becoming a teacher with a disability. Participants believed that these concerns and remarks linked perceptions of their disabilities to their capabilities as teachers. “I think some people assume I’m not going to be a good teacher because I’m limited physically” (Jimmy). Throughout the teacher education program, “[my] teachers themselves were concerned” and questioned “how I would be received by the students...[or] if [my condition] would be problematic” (Anastasia).

When Mike applied to the teacher education program, he was accepted into the intermediate/senior program. He arrived on the first day to find that his program had been changed without his knowledge because there was another teacher candidate with a physical disability in the primary/junior program. University administration “thought they’d simply put us together: this wasn’t what I wanted ... [and] I convinced them I could do intermediate/senior” (Mike). Mike’s request to enter the intermediate/ senior program was then granted.

After she began teaching, Anastasia recalled that “the office, the principal or vice-principal would often be more concerned that I might be more at risk or [that students] were gonna [sic] challenge me because I have a disability” (Anastasia). “It was a perceived issue ... by other people in the school system [that] the students might feel they can take advantage or have the upper hand” (Anastasia) especially around issues of

classroom management and discipline. “It was something other people worried about...How can you manage? ... How are you gonna [sic] deal with discipline?”

(Anastasia).

All participants reported that students in their classrooms were initially curious about their disabilities. “If I was an able-bodied student [and] I rolled in, I’d be saying, ‘What the hell? How is this going to work?’” (Mike). However, once students “know what they need to know ... from that point onwards they just see you as they see any other teacher” (Anastasia). A major part of teaching “is the respect factor...if [students] don’t respect me...it’s not [because of] the disability” (Mike).

“I found that it’s more the adults with problems than the students” (Anastasia). “Historically, people with spinal cord injuries didn’t have the survival rate that they do today ... and especially get out and return to work” (Jimmy). No matter what, “some people are uncomfortable around people with disabilities” (Mike). Interestingly, these people are usually adults, and their perceptions of teachers with disabilities are “completely ridiculous” (Jimmy). “I’ve had parents who were upset and think I’m not qualified to teach ‘cause I have mobility issues ... or maybe I’m a safety hazard in the school” (Jimmy), or have colleagues in the lunch room state, “Oh, you’re really lucky that you got hired...cause you’re in a wheelchair” (Jimmy).

Mike recalled working with adults, specifically administrators, who “expressed concern in regards [sic] to safety concerns ... [of me] being in the classroom” (Mike). Administrators were particularly reluctant to give Mike health and physical education classes to teach due to physical limitations that they believed could hinder his “ability to deliver first aid right away” (Mike). Mike, a sports enthusiast, was very passionate about

coaching extracurricular sports at his school, and had coached for many years prior to his accident. However, once wheelchair-bound, Mike was told that “referees weren’t going to referee games that I was at because I was a safety hazard on the sideline” (Mike). “The concern expressed was that my wheelchair itself posed a risk to myself and players that were playing the game” (Mike).

Mike was the only participant in this study to mention any form of modified work schedule as an accommodation for his disability:

I’ll talk to administration about what schedule works best for me. I can’t teach period one, it takes me 3 hours to get ready in the morning. I’m allowed one period where I don’t have to be in the building, so period one is technically my lunch, I teach 2 and 3, I need period 4 off for a break, then I’m good for period 5. ... Exams, if my exams for 8:30 a.m., I can’t be in the building for 8:30, I can push for 9:30 so administration will pull somebody off hall duty and ask them to sit for the exam for me until I’ll arrive. (Mike)

Mike’s need for a colleague to begin his exam for him has been met with intolerance: “Has somebody rolled their eyes maybe at one point like, “Why do I have to do this?” Sure it’s happened, but the administration has always accommodated me” (Mike).

Similarly, Jimmy and Anastasia described colleagues being “upset” or “resentful” because teachers in wheelchairs did not have to perform outdoor yard duty. “It can be a big deal because a lot of teachers don’t want outdoor duty ... so yard duty schedules are very contentious” (Anastasia). Most school grounds have areas that are “not all that practical to access ... especially where the children are playing” (Anastasia). Because of

playground inaccessibility, all participants in this study were delegated “indoor duties”, and “some of the teachers ... thought maybe it was unfair” (Jimmy).

### **Physical Barriers**

All participants in this study have encountered various physical barriers in their teaching profession. “My options were very limited in terms of schools I could apply to” (Anastasia). “My main concerns were always parking, bathrooms, and physical access of the building” (Anastasia). “[Having a physical disability] greatly reduces your chances of finding employment” (Jimmy). Jimmy works for a school board of nearly 70 schools, but can only teach at ten of them “because they are the ones that are one floor and ... have a wheelchair accessible bathroom” (Jimmy).

Physically accessing schools was a major barrier to the professional success of the participants. “Parking was a big, big issue. Getting from the parking lot and into the school could be your biggest challenge of the day” (Anastasia). Due to weather and physical exertion, participants required a parking spot close to an accessible entrance. Often there are “times when you have a number of things you are bringing in ... you can’t always take [them] in one trip” (Anastasia). In the snowy winter season, “there has to be a shoveled path from the area I park to the door of the school” (Jimmy). Sometimes this pathway is not cleared. Participants recalled struggles and, on occasion, situations where they “couldn’t physically get to the class because of the amount of the snow” (Anastasia).

Mike, who does not drive to school but uses his electric wheelchair, commented that the front doors of his school are the only entrance equipped with electric door openers. After school hours, all doors, including the main entrance electric doors, are locked. “If I’m coming back to watch a basketball game or something ... it’s not easy”

(Mike). In addition, the designated accessible parking area in the school parking lot is located at the side of the building with no accessible door. “Nor [is there] a sign telling you where the accessible door is” (Mike). Both students and people with disabilities visiting the school therefore also have difficulty entering the building.

### **Task-Related Barriers**

Inside the school building, various task-related obstacles challenge participants during a regular teaching day. “There are many, many, many, many things that I have to get other people to do for me” (Mike). “Accessing the photocopy machine is an issue ... I will have a colleague or the secretary [do it for me]” (Mike). “There’s a good elevator in the school [that] works well; however, you need to put a key in and turn it, in order to get the elevator door open. I can’t do that [so I’ve] got to get someone to do that for me” (Mike). In addition, Mike does not have access to the stage in the gymnasium. There was a “lift installed when the school was built [for the stage]; however, it ended up being substandard ... [and] doesn’t work” (Mike). “I tried using it a couple of times in trying to participate in a couple of assemblies and it didn’t work” (Mike).

Class trips are also “more difficult” (Jimmy). “Buses that are rented are not wheelchair accessible” (Jimmy) and if accessible vehicles can be rented, they are “specialized small vans, which becomes expensive” (Jimmy). Mike requires “someone around to help with the bathroom” when accompanying students on class trips (Mike). Mike acquired the perspective that class trips are “something I can’t do that an able bodied teacher can.”

Overall, physical and task-related barriers demand the greatest amount of time and additional effort for participants. The “biggest limitations [of my job] are the

slowdowns ... essentially you need more time to do everything” (Anastasia). “Paper work is a challenge ... [it] takes me three times as long to do the paper work that somebody else does” (Mike). “Report card time is always a crunch for me getting my marks tabulated, comments picked, and reports in” (Mike). Mike also commented that, because of short time between classes, it’s “easier to have all [of his] classes in the same room” (Mike) However, “[I] never see different people in different wings ... [like] the math wing [because] the time crunch [of] 3 minutes to get from downstairs, up the elevator, and to the other room” (Mike).

### **Importance of Communication**

All participants stressed the importance of communication when working as a teacher with mobility challenges. Participants offered various communication strategies related to their professional success. These included: explaining their disability, communicating their needs and accommodations, and communicating respectfully.

#### **Explain Your Disability**

When teaching with a disability, participants stated that explaining their disability to students right away was the best technique for “break[ing] down the barrier” and “remove[ing] any questions [about their disability]” (Mike).

One thing I do the very first day of every class, I take the whole period to explain my disability. I address my disability, how it happened, what I can and cannot do, what my limitations are...and then you will see after a month [students] start getting comfortable around it. (Mike)

Anastasia similarly addresses questions about her disability on the first day of school. “First day, teaching new classes, students always ask all kinds of questions [about

my disability]. ... What I found was [that if] you answer their questions, give the information that they are looking for and that's it, they're okay" (Anastasia). If teachers with disabilities answer questions "openly and honestly, [students] are receptive and helpful" (Anastasia).

However, it was not always easy at first for participants, especially Mike, to describe certain aspects of his disability. "For years I was nervous about [answering questions on how I go to the bathroom] but I'm not anymore. It is what it is, and they [students] have got to learn if they want to know. So I'm open to [their questions] that way" (Mike).

### **Communicate Your Needs**

Participants found it "proactive" to explain their disabilities and communicate their needs to principals and administration in order to be better accommodated when teaching (Anastasia). "You can't expect them [administration] to understand what your limitations are [or] why you need certain things [as a teacher with a disability]" (Mike). "People don't know a lot about issues that people with spinal cord injuries deal with ... what I need might be very different than what someone else needs" (Jimmy).

Anastasia believed that "the onus is on the teacher with a disability to be proactive and adaptable...taking responsibility to communicate to whomever what your needs are." The "key person you usually work with is the principal or vice principal of the school" (Anastasia). Anastasia found it beneficial to be "upfront from the beginning ... and let [principals] know what you need" (Anastasia). It is also best when the teacher with a physical disability "offers a solution to [administration] on how to resolve a problem"

that he or she may be encountering. Administration should not “presume to know what the solution is” (Anastasia).

All participants advised going to their school-based administrators (principals and vice-principals) first and foremost, to address any issues or concerns and “communicate as a team” (Mike). If the principal cannot resolve the problem directly, then he or she is still usually the most knowledgeable person to suggest “who is the most appropriate person to help deal with the specific issue” (Anastasia). “If someone at that level is not responding to your needs, that’s when you might involve the superintendent of the school ... [however] generally you try to resolve things ... [and] try to not take [problems] outside the school” (Anastasia).

If a problem remains unresolved, “then there’s always the union route” (Mike). The teachers’ union “is there to represent any teacher looking for support in an area of differing opinion with administration ... [and protect] your rights as a disabled individual” (Mike). Jimmy also explained that there is a

Health and Disability officer with the board [who] is dedicated for just that task [representing your rights as a disabled individual]. If I have any problems with health and disability, I go and speak to [the Health and Disability officer] and they [*sic*] work with me and my principal to come up with a solution for whatever problem I am experiencing.

### **Communicate Respectfully**

All participants in the study viewed themselves as teachers who need more accommodations than more able-bodied teachers. All participants stated that in order to be understood and accommodated they had to be more “vocal” in a positive way (Mike).



Although “by law there is an obligation [by school boards] to give [teachers with disabilities] what [they] need [to teach with a disability], I wouldn’t demand [accommodations]” (Mike). Anastasia recommended that, as a teacher with a disability, one should be proactive in a “positive way, not a negative way”. “[You] don’t want to come across as pushy ... You will alienate yourself really quickly and people [administration and other teachers] will think, ‘Oh I don’t want them [sic] in my school’” (Anastasia).

Despite participants’ decisions not to demand their rights for accommodations, all participants did realize that they needed accommodations nonetheless. Mike learned that it is best “not to do things on your own.” “Get people to help you. I learned this through experience; you can’t do [tasks] the way you used to do it...there has [sic] to be accommodations made” (Mike).

If I was an introvert, I would not be able to survive. I wouldn’t be able to teach if it wasn’t for building relationships that people are comfortable with students, with teachers, [and] with colleagues. There’s no way I’d be able to do my job if it wasn’t for that. (Mike)

### **Professional Benefits and Personal Rewards**

Participants in this study viewed their role as a teacher with mobility challenges to have many professional benefits and personal rewards. Professional benefits were viewed as increased exposure and communication between students and people with disabilities. Students also became more independent and responsible in class and teachers with disabilities were able to use their personal experiences as instruments of instruction.

Teachers with mobility challenges gained professional self-enhancement, increased social relations, and gratifying positive memories.

### **Student Exposure to People With Disabilities**

“A key part of the curriculum is teaching about being inclusive...whether this be [about different] cultures, people, sexuality etc.” and “we need to reflect diversity by having diversity in the profession” (Anastasia). Participants of this study strongly perceived their role as teachers with a disability as an asset to the educational system and a positive influence on those around them.

“[For] students to see me in the position [of a teacher], they [see] that I have a spinal cord injury, working full time, getting myself to school, preparing for classes, teaching lessons, correcting homework, providing extra-curricular activities ... all while I have a disability” (Anastasia). When Anastasia acquired her disability at the age of 16, “I had never met someone with a spinal cord injury, let alone one that was working”. Participants believed that it was beneficial for students to see them working because “when [students] go out into society and run into other people with disabilities, they will see them as someone [*sic*] who can do things and won’t immediately assume that they can’t” (Anastasia).

The greatest “spin-off” of having a teacher with a disability in the classroom is having students become “comfortable around individuals with disabilities...taking interest and wanting to learn [about their disabilities]” (Mike). All participants in the study found that their disability allowed for “learning that doesn’t associate with the curriculum ... valuable life lessons” (Mike). “It [my disability] opens up an entirely new dialogue,” and “opens [students’] eyes to think in a different way” (Mike).

“Whenever I had a new class, the students would *always* ask all kinds of questions [about my disability]. They wanted to know, How you get to school? How do you drive? They want to see your car ... [T]hey want to know about your wheelchair, they want to know all these kinds of things” (Anastasia). Jimmy had a similar experience when he “brought in a spare [wheel]chair on the school grounds...[and] all the kids wanted to be in the wheelchair and get pushed around in the wheelchair” (Jimmy).

### **Increased Student Independence**

Participants explained that their students acquired more independent responsibilities and opportunities to become actively involved in their classes than in other teachers’ classes. “Often, depending on what you were teaching, if you had notes that you wanted transcribed on a blackboard, students were delighted to put things up and go to the board” (Anastasia). Anastasia explained that, instead of having herself at the front of the class, “often [students] would offer to do things before [she] would say, ‘Okay, well I need the following done.’” “[Students] loved having their teacher in a wheelchair ... [and] it worked out really well” (Anastasia).

Mike also delegated student responsibilities on a regular basis in order to conduct his classes. “I’ve always relied on students ...Without the physical help of my students I could not do my job ... [and] it is an interesting dynamic in the class that [students] won’t experience in any other class” (Mike). For example, Mike regularly assigned a student “who, as soon as I roll into class, will connect my tablet for me [to the SMART board]” (Mike). Giving students responsibilities “establishes [a positive] routine which is operative for anybody” (Mike). “It brings structure and order to the class ... [and is] advantageous in terms of classroom management” (Mike). In Mike’s physical education

class, he delegates duties such as having a student “who locks the change room,” a student who “opens up the equipment room,” and a group of students known as the “equipment crew” who set up equipment for the day (Mike).

### **Using Personal Experience When Teaching**

“I’ve used my disability in teaching moments; I use it to make [students] laugh, to get their attention” (Jimmy). Participants felt able to contribute to students’ learning through their knowledge and experiences of physical disability. For instance, Jimmy recalled a time when a student used the word “cripple” and another student replied saying, “You can’t use that word...It’s a bad word.” “I grabbed the dictionary and I used [this moment] as a teaching opportunity, and read the definition of cripple” (Jimmy). Jimmy then asked the students, “Why can’t I use that word? Is it a negative word?” (Jimmy). Anastasia believed that students would eventually bring to class negative words or slang expressions about their disability. “[T]erminology keeps evolving and changing in regards to [*sic*] disability” (Anastasia). Jimmy believed that it is his responsibility to educate students about politically correct uses of words surrounding disability. “I think, unfortunately, there is [*sic*] not a lot of us [teachers with disabilities] around, and I think it’s up to us to educate [about disabilities]” (Jimmy).

Participants have used their disabilities “to teach anatomy ... why my arms and legs don’t work the same as they used to ... and why I have to use a wheelchair” (Jimmy). Mike has used his injury “to make connections when talking about playing with injuries in [exercise science] class” (Mike). Although Mike lacks the ability to refer to a traditional skeleton model that hangs in the classroom, he uses an anatomy program on his tablet that allows him to “manipulate, remove things, flip it, highlight certain

ligaments, and look at things from different angles" (Mike). "The kids love it...I don't think an able bodied teacher can [teach anatomy] any better than this" (Mike).

Participants believe that their experience of enduring a spinal cord injury goes further than teaching about how their bodies have changed physically. "I would like to think ... my situation shows [that] if something bad happens to you, it doesn't mean you give up; life goes on" (Jimmy). Mike teaches a transition course that prepares students for general life such as "putting work into perspective, family life, goals, suffering, etc." (Mike). "There is no course I fit more" (Mike). Mike brings his personal life experience to both this class and a conflict resolution course that he feels he is "able to relate to through experience" (Mike).

### **Self-Enhancement**

Participants explained that becoming a teacher enhanced both their self-worth and sense of belonging. Jimmy viewed the teaching profession as especially gratifying. "While I was at school, I realized that I love to teach kids ... [and] could really have a great effect on them [as a teacher]" (Jimmy). "Teaching is an amazing profession [and] it's more of a calling" (Jimmy). Jimmy stated that it was very important to him to be able to "make a difference in my community and my society, [and] I believe that teaching kids is one of the best ways you can do that" (Jimmy). "For my soul [teaching is] beneficial ... I'm a much better person [and] I like myself more [because of it]" (Jimmy). For Jimmy, community involves his school, surrounding neighbourhood, the geographical location, and everyone living in it, both able-bodied and disabled.

Jimmy explained that his teaching career has helped him become a "much more personal person [and] not so self-centered ... I appreciate things a little bit more than

others.” Mike recognized the value of being a teacher during a particular situation when he was not able to attend work due to illness. “I was sick for a month and a half [and] I could think of nothing else but getting back [to teaching]...I love doing it” (Mike). “I identify myself as being a teacher [and as] a sociable person; this [the teaching profession] provides an avenue for [my self-identity]” (Mike).

### **Increased Social Relationships**

Participants also unexpectedly became good friends with professional acquaintances after their injury. “You never know who you will end up relying on” (Jimmy). Mike stated:

I am not a tech guy! [But] I’ve got a friend who is totally tech savvy and we went through teachers college together and he helped me out immensely... he was an acquaintance in high school, [but is now] a really good friend. He’s kind of my scout for technology ... [and] every time I have learned something it has added to my ability to teach.

Mike also commented on the relationships created between teachers and students. “The big thing is bumping into students that you taught and had a relationship with, catching up and seeing where they’re at” (Mike). These social relationships “bring back old memories [and] it’s immensely rewarding” (Mike). “The challenge of getting through and being able to reach different students is an opportunity I don’t take for granted” (Mike). “What motivates me...is [sic] the relationships, [the] colleagues I get along with, the sociable setting, the intellectual challenge...and the classroom management issues” (Mike).

### **Positive Memories**

Participants shared various moments and elements of their profession that

reflected their love of teaching. According to Anastasia:

the highlights for me were always the first day of school. [I] can never sleep the night before... the excitement surrounding meeting your students for the first time, [the] open exchange of information; they're asking questions and you're doing the same, getting to know another, the feeling of a new and fresh start [and] feeling of optimism about a new year with new energy.

Mike mentioned a time when he taught

L level math for students with lots of special needs and intellectual disabilities... [it is] usually a small group. I identify them as physically disabled although most of them don't have physical disabilities. But you get to know the kids really well [and] I find it really rewarding. In fact I've requested to get back into that.

“As a teacher you can impact students' lives...and the rewards are long term”

(Anastasia). “At the end of the day, watching students leave feeling motivated, energized, and eager to come back [is] a motivator, and that's very rewarding” (Anastasia).

### **Summary of Findings**

Three research questions guided this study:

1. What factors have allowed teachers with mobility challenges to achieve self-perceptions of professional success?
2. What challenges or obstacles have these teachers experienced in their paths to success?
3. What coping strategies have teachers with mobility challenges found most helpful?

This study yielded five predominant themes underlying the three participants' experiences as teachers with mobility challenges and their self-perceptions of professional success:

1. All participants of this study described independence as one of the most important factors in achieving self-perceived professional success, despite personal sacrifices or physical discomfort caused by the demands of their job.
2. All participants have endured physical pain while working as teachers with mobility challenges.
3. All participants experienced obstacles while working in the teaching profession, including attitudinal barriers, physical barriers, and task-related barriers.
4. All participants shared strategies to help advocate for themselves as both teachers and individuals with mobility challenges.
5. All participants identified self-perceived long term benefits and rewards for students, school communities, and themselves by working as teachers with mobility issues.

The next section highlights findings related to each of the guiding research questions.

### **Findings Related to Research Question 1**

Participants identified independence as one of the most important factors in achieving self-perceived professional success. The ability to maintain gainful employment and earn an income was a strong influential factor in participants' self-perceived independence and self-worth.

However, participants revealed that full-time employment meant making sacrifices in other areas of their lives. Sacrifices came in the form of refusing special treatment and



dealing with chronic physical discomfort due to the demands of their jobs. Participants, despite being mobility challenged, did not want to be viewed differently and were willing to “make do” without having all of their physical needs met, also perceived as special treatment, that would have made their jobs easier.

Participants neglected aspects of looking after their bodies and overall health in order to accomplish the physical demands of their jobs. For example, they neglected proper and regular exercising, and gave up active social lives or hobbies outside of the school environment that contribute to a well-rounded, healthy lifestyle.

Despite their sacrifices, participants described long-term benefits and rewards that contributed to their perceived professional success. Participants viewed their role as teachers with disabilities as an asset to the educational system, representing inclusion of those with mobility challenges, and providing increased exposure to both students and the school community as a whole.

In addition, participants believed that their students gained increased independence due to their physical limitations. Having a teacher with a physical disability caused students to assume more responsibilities and opportunities to become actively involved in their class. Participants also strongly believed that when they incorporated personal life experiences into their teaching, their students received gainful knowledge, different perspectives, and life lessons that went beyond the prescribed curriculum.

The study also revealed that the teaching profession enhanced participants’ self-worth and sense of belonging. Factors such as positively influencing students’ lives and giving back to the school and broader community contributed to participants’ self-perceived professional success.

## **Findings Related to Research Question 2**

All participants in this study experienced attitudinal barriers, physical barriers, task-related barriers, and chronic physical discomfort, both during their teacher education programs and throughout their teaching careers.

In the participants' teacher education programs, attitudinal barriers began as negative remarks and concerns toward the possibility of becoming a teacher with a disability. These comments and concerns from adults included their professors and fellow education students. During participants' careers, principals and parents questioned their ability to teach due to their limitations and expressed concerns that they were possible safety hazards within the classroom. Principals and colleagues also expressed preconceived notions that participants would be more at risk of being challenged or taken advantage of by students, specifically around issues of classroom management and discipline.

Participants encountered physical barriers largely in three areas: parking, bathrooms, and physical access to school buildings. Due to these physical barriers, teachers with mobility challenges are limited in the schools they can apply to, resulting in reduced opportunities of employment. Seasonal weather, especially in winter, has caused participants to experience increased physical exertion, time, and dependence on others. When parking, participants required parking spots close to the school entrance as well as shoveled pathways to physically get to the building. When carrying objects, making multiple trips to their vehicles, and fighting elements of weather such as wind and snow, participants experienced increased difficulty and time demands that resulted in physical exhaustion.

Task-related barriers prevented teachers with mobility challenges from doing their jobs independently. Participants experienced non-functioning electronic door openers, preventing them from accessing school buildings before and after school hours. Participants could not participate in class trips due to non-wheelchair accessible buses; nor could they participate in assemblies due to broken or substandard stage lifts. Participants also had to rely on others when having to use equipment such as photocopy machines or elevator keys.

Lastly, all participants endured physical pain while working as teachers. Participants described the demands of their jobs physically difficult, aggravating their injuries. Often tasks, such as paper work or preparing for class, took participants much longer to accomplish than able-bodied teachers resulting in prolonged time sitting in their wheelchairs, exacerbating both pain and fatigue. Task demands not only contributed to participants' stress, pain, and lowered energy levels, but also made it difficult to exercise properly and have an active social life outside of school.

### **Findings Related to Research Question 3**

This study revealed that participants shared similar coping strategies throughout their teaching careers. Before entering the classroom, all participants felt limited in terms of what schools they could apply to due to inaccessibility. Participants therefore examined a school's physical layout and accessibility features before applying for a teaching position. Participants perceived that when they applied to accessible schools, already accommodating people with physical disabilities, they required fewer new accommodations and felt less alienated by the need to request major accommodations.

When participants did require accommodations, the key person to communicate their needs to was the principal or vice principal. Despite having rights to be fully accommodated as individuals with disabilities, all participants strongly insisted that when they had to ask for an accommodation, they would not make demands for fear of alienating themselves and receiving negative backlash from administration and colleagues. When approaching administration with a problem, participants believed that having a solution in mind ahead of time was advantageous in resolving the issue as opposed to expecting administration to understand why participants needed particular accommodations.

Participants shared similar strategies when attempting to break down barriers between themselves as teachers with mobility challenges and others. Participants stated that explaining their disability to both students and administration right away was most beneficial in eliminating questions and uneasiness about their disabilities. In addition, being open about their disability also helped in establishing relationships and generating comfortable interpersonal environments in regard to their disability.

A particular strategy, used by all participants on the first day of school, was to dedicate the entire class period to talking about themselves. This included explaining their disability in detail and telling the story of how they became injured. Participants stated that once students became more knowledgeable about their situation, students viewed them as they would any other teacher. Participants believed themselves capable of establishing comfortable learning environments and creating a rapport with students that, they felt, surpassed other teachers' classroom relationships.

Another strategy used by all participants was to have students and other able-bodied persons help complete physical tasks. Participants recognized that they needed help with particular physical tasks regardless of accommodations made. Being able to communicate and establish routines, such as students setting up projectors at the beginning of class or having secretaries make photocopies of handouts, saved time and effort. Participants also noted that students liked having a sense of responsibility, or duty, when it came to participants' classes and often did not have to be asked to help with a physical task. Participants found this strategy was time effective and increased classroom management. It also continued to help build student/teacher relationships and create an interesting classroom dynamic of benefit to both participants and students.

### **Chapter Summary**

Chapter 4 addressed three research questions that guided this study. From the participants' interviews, five prominent themes or categories of commonality related to their personal and professional experience of teaching with mobility challenges. The first theme was independence and sacrifice; the second theme was living with pain; the third theme was barriers and obstacles, including attitudinal, physical, and task-related barriers; the fourth theme highlighted the importance of communication and stated the benefits of explaining one's disability, communicating one's needs, and communicating these needs respectfully; the fifth theme was professional benefits and personal rewards, which emphasized the benefits of student exposure to those with disabilities and described increased student independence, benefits of the participants bringing personal experience to the classroom, achieved self-enhancement of the participants, and the generation of social relationships.

Finally, chapter 4 highlighted findings related to each of the guiding research questions. Chapter 5 concludes this study by providing a summary, discussion of the findings, and implications for both in schools and future research.

## **CHAPTER FIVE: SUMMARY, DISCUSSION, AND IMPLICATIONS**

This study was a qualitative investigation of the professional experiences of teachers with mobility challenges and their self-perceptions of professional success. Limited research has been conducted internationally on the career experiences of adults with disabilities, and even less on the career experiences of teachers with disabilities. The purpose of this study was to explore the personal accounts of three specifically chosen participants who represent an understudied population—that is, teachers with mobility challenges. Research questions included:

1. What factors have allowed teachers with mobility challenges to achieve self-perceptions of professional success?
2. What challenges or obstacles have these teachers experienced in their paths to success?
3. What coping strategies have teachers with mobility challenges found most helpful?

This chapter summarizes the study, discusses the findings, and suggests implications for both practice in schools and future research.

### **Summary of Background to the Study**

The historical notion that disability resides within the individual, known as “the medical model of disability” focuses on individuals in terms of deficiencies, ailments, or inabilities compared to “normal people” (Gleeson, 1999; Hall, 1999; Mackenzie et al., 2009). Despite the advances of recent decades in replacing the “medical model” with the “social model” (Gleeson, 1999; Hall, 1999; Mackenzie et al., 2009), the medical model of disability continues to exist as a persistent and common attitude toward disabilities.

Today, “while workplaces and schools have legal responsibility to make accommodations for all people with disabilities, stigma and lack of understanding can make asking for them very difficult” (Wooley, 2012, p. 22).

Statistics Canada’s (2009) *Advancing the Inclusion of People with Disabilities 2009* study reported that employed working-age adults with more severe disabilities are less likely to work full-time year-round than both able-bodied adults and those with mild to moderate disabilities. Barriers to employment for Canadians with disabilities include (a) individuals physically unable to work due to their condition, (b) individuals leaving the labour force after facing barriers such as inaccessible workplaces, and (c) individuals being unable to succeed in unsupportive work environments. Of the many Canadian adults with disabilities, approximately 460,000 also experience travel-related difficulty (Statistics Canada, 2009).

Adults with severe mobility challenges often require workplace accommodations, both resource-specific and physical/structural. Resource-specific workplace accommodations involve redesigning jobs, modifying work schedules, and using computer program aids. Physical/structural workplace modifications include the installment of such aids as handrails, modified workstations, accessible washrooms, etc. (Statistics Canada, 2009, p. 34). In 2006, 70.2% of Canadian employed adults with disabilities had all of their resource-specific needs met. Despite this fact, the most common source of stress for working-age adults (aged 15-64) with disabilities continues to be work-related (Statistics Canada, 2009, p. 46).

Many workplaces and environments continue to be organized around “ableist” norms that can cause conflict when making workplaces seemingly more accessible



(Gallor et al., 2004; Wilton, 2008). Non-accommodating workplaces can eventually force workers with disabilities to experience heightened anxiety and extra emotional work in the interest of fitting in and downplaying their impairments and needs (Wilton, 2008).

Focusing specifically on schools, the aim of inclusive improvement is “to eliminate exclusionary processes from education that are a consequence of attitudes and responses to diversity in race, social class, ethnicity, religion, gender and attainment, as well as with regards to disabilities” (Ainscow, 2012, p. 2). In Ontario, the Ontario Ministry of Education (2009) called for “each school to create and support a positive school climate that fosters and promotes equity, inclusive education, and diversity” (p. 11). Under the 2001 *Ontarians with Disabilities Act* (Ontario Ministry of Community and Social Services, 2006), school boards are required to prepare, update, and make public accessibility plans that address the identification, removal and prevention of barriers for people with disabilities. Barriers most often consist of physical, attitudinal, technological, systemic, or financial obstacles (Valeo, 2010). As my own story of being a practice student teacher with mobility challenges attests, various school-based obstacles contributed to my experience of physical, attitudinal, and technological barriers, creating situations of isolation, awkwardness, and embarrassment. The stories of those I interviewed chronicles evidence of similar barriers in the teaching work place.

### **Summary of the Study**

I conducted this research in order to understand and learn from the personal and professional experiences of three Ontario teachers who have mobility challenges. The study’s participants (two male and one female) were Ontario teachers who have permanent physical disabilities that challenge their means of mobility. Each participant

has an Ontario Certified Teaching License and has either taught or is currently teaching in an Ontario school.

Each participant (Jimmy, Anastasia, and Mike) varied in terms of level of disability, teaching position, and geographical location. Jimmy is a C4 incomplete quadriplegic who has worked 3 years full-time as an elementary school French teacher and, before that, approximately 2 years as a supply teacher. Anastasia is a T4-5 complete paraplegic who first worked as a French Immersion Junior/ Intermediate teacher for a total of 10 years, followed by employment in the Professional Relations Services for Ontario Teachers Federation (OTF) for a total of 6 years. The third participant, Mike, has a C4 incomplete spinal cord injury that classifies him as a quadriplegic. Mike has worked and coached at the secondary school level for approximately 12 years, with qualifications in mathematics and health and physical education.

My primary source of data collection was one semi-structured face-to-face interview with each participant. I interviewed Jimmy, Anastasia, and Mike individually, for approximately 2 hours each, at a location of their choice. The interviews followed a semi-structured approach using a 12-question interview guide. The questions were deliberately open-ended to encourage participants to express themselves freely, enable in-depth exploration of their experiences and consider different perspectives. Each interview was audio-recorded. Immediately following each interview, I completed field notes.

Each interview was transcribed verbatim solely by myself. Data analysis was accomplished in three phases. Data analysis allowed me to generate five prominent themes of commonality among participants: (a) independence and sacrifice, (b) living

with pain, (c) barriers and obstacles, (d) the importance of communication, and (e) professional benefits and personal rewards.

### **Discussion of Findings**

The experiences of the three participants in this study (Jimmy, Anastasia, and Mike) provided rich insight into the experiences of teachers with mobility challenges in the school workplace.

#### **The Persistence of the Medical Model**

In the workplace “professionals and others tend to focus on people’s limitations” (Lord & Hutchison, 2011, p. 263). People with physical disabilities continue to face repercussions of the medical model, known as the “deficit mentality,” in the workplace (Bergmark et al., 2011; Freeze et al., 2002; Gallor et al., 2004; Portelli, 2011; Wilton, 2008; Wooley, 2012) and experience an “enormous personal and professional toll of coping with struggles for accommodation” (Chouinard, 2011, p. 162). In this study, the medical model continued to exist through attitudinal, physical, technological, and systemic barriers in both participants’ teacher education programs and their teaching careers. Despite schools’ legal responsibility to accommodate all people with disabilities (Wooley, 2012), all participants in this study were limited in terms of potential employment sites because of their disability, not because of their teaching qualifications. Many school workplaces were not accessible and in need of modifications to accommodate participants, especially regarding access to the building, parking, and washroom facilities.

At times, participants in this study did not ask for accommodations because stigma and lack of understanding by school personnel made it difficult to do so (Wooley,

2012). Participants often held back from asking to have their needs met for fear of alienation and repercussion from administration and colleagues, supporting Gleeson's (1999) notion that people with disabilities continue to enter and work in "disabling environments" that cause participants to sacrifice their own rights.

"Ableism refers to negative assumptions about the nature of living with a disability and uncritical beliefs about superiority of the able-bodied existence" (Lalvani & Broderick, 2013, p. 471). "From a dominant discourse perspective, connotations of the opposite of normal tend to be derogative and include terms such as impaired, defective, faulty, damaged, deficient, incapacitated, or broken" (Fraser & Shields, 2010, p. 7). Participants of this study continued to feel the repercussions of an ableist belief system and viewed themselves as defective in their ability to participate fully in society.

### **Theme 1: Independence and Sacrifice**

"Independence has been a commonly used word in the field of disability" (Lord & Hutchison, 2011, p. 145). Independence, viewed through the deficit perspective, is equated with "being able to do things yourself." Lord and Hutchison (2011) explained that this view of independence reinforces the notion that "if you cannot do it yourself, you cannot be independent, and therefore having a disability...is a burden" (p. 145). Lord and Hutchison proposed a "strengths approach," which "re-frames independence as a process of having choice, freedom, and control over personal experiences" (p. 145).

In this study, participants identified independence as one of the most important factors in achieving self-perceived professional success:

Independence is...highly valued in American society; it is considered as essential building block in constructing and maintaining a democracy. Freedom, to an

extent, is reliant upon its citizens having the independence to build better lives for themselves and in the process of accomplishing their dreams. (Bryan, 2013, p. 472)

Maintaining gainful employment and earning an income were strong influential factors in participants' self-perceived independence and self-worth (Backman et al., 2007; Bergmark et al., 2011; Crompton, 2008; Freeze et al., 2002; Gallor et al., 2004).

Full-time employment, however, meant making sacrifices in other areas of the participants' lives. Sacrifices came in the form of refusing special treatment and dealing with chronic physical discomfort due to the demands of their jobs (Bergmark et al., 2011; Wooley, 2012). Despite being mobility challenged, participants did not want to be viewed differently from teachers without mobility challenges and were willing to "make do" without having all of their physical needs met. They perceived having their needs met as special treatment that could make their jobs easier, but label them dependent rather than independent.

Thus, participants neglected aspects of looking after their bodies and overall health in order to accomplish the physical demands of their jobs. For example, they neglected proper and regular exercising, and gave up active social lives or hobbies outside of the school environment that contribute to a well-rounded, healthy lifestyle.

## **Theme 2: Living With Pain**

All participants endured physical pain while working as teachers. Participants described the demands of their jobs as physically difficult, aggravating their injuries. Tasks, such as paper work or preparing for class, took participants much longer to accomplish than able-bodied teachers, resulting in prolonged time sitting in their wheelchairs, exacerbating both pain and fatigue. Other investigations have demonstrated

that people with disabilities often prepare themselves for work by trying to follow a “normal” work schedule in daily life, sitting for longer time periods in a wheelchair, taxing physical strength and mental energy, and attempting to manage activities similar to work tasks in an ableist world (Bergmark et al., 2011). Adding to their stress load, people with disabilities display weakened confidence and heightened anxiety about possible injury-related medical concerns (Bergmark et al., 2011).

### **Theme 3: Barriers and Obstacles**

All participants in this study experienced attitudinal barriers, physical barriers, and task-related barriers, both during their teacher education programs and throughout their teaching careers. In the participants’ teacher education programs, attitudinal barriers began as negative remarks and concerns toward the idea of becoming a teacher with a disability. Reflecting ableist attitudes (Gallor et al., 2004), these comments and concerns came primarily from adults, including professors and fellow students. During participants’ careers, other adults (i.e., principals and parents) questioned their abilities to teach due to their physical limitations, and expressed concerns that they were possible safety hazards in the workplace (Bryan, 2013, p. 469). Principals and colleagues also expressed preconceived ableist notions of “functional limitations” (Wilton, 2008), suggesting that participants would be more at risk of being challenged or taken advantage of by students, specifically around issues of classroom management and discipline.

As defined by the *Advancing the Inclusion of People with Disabilities 2009* report (Statistics Canada, 2009), workplace accommodation modifications fall into two categories: resource-specific and physical/structural. Resource-specific workplace modifications involve redesigning jobs, modifying work schedules, and using computer

program aids. Physical/structural workplace modifications include the installment of such aids as handrails, modified workstations, accessible washrooms, et cetera (Statistics Canada, 2009).

In my study Mike was the only participant to mention resource-specific modifications (scheduling needs) and experienced negative backlash from colleagues who were asked to start his examinations. Jimmy and Anastasia spoke only about basic physical workplace accommodations. This finding suggests that participants themselves expressed very basic notions of accessibility.

Participants encountered basic physical barriers largely in three areas: parking, bathroom facilities, and physical access to school buildings. Due to these physical barriers, teachers with mobility challenges were limited in the schools to which they could apply, resulting in reduced opportunities of employment. Seasonal weather, especially in winter snow, caused participants to experience increased physical exertion, time, and dependence on others. When parking, participants required parking spots close to the school entrance as well as shoveled pathways to access the building. When carrying objects, making multiple trips to their vehicles while fighting elements of weather caused participants to experience increased difficulty and time demands that resulted in physical exhaustion.

Task-related barriers prevented teachers with mobility challenges from carrying out their duties independently. Participants experienced non-functioning electronic door openers, preventing them from accessing school buildings before and after school hours. They could not participate in class trips due to non-wheelchair accessible buses; nor could they participate in assemblies due to broken or substandard stage lifts. Participants

had to rely on others when using such equipment as photocopy machines or elevator keys resulting in additional time and effort to complete these tasks.

#### **Theme 4: Importance of Communication**

Participants stressed the importance of communication when working as a teacher with mobility challenges. The ability to explain their disabilities and communicate their needs was critical for professional success.

When breaking down barriers between teachers with mobility challenges and able-bodied persons, participants were most successful through direct communication. Participants stated that explaining their disability to both students and administration right away was most beneficial in eliminating questions and uneasiness about their disabilities (Wills, 2011). This included explaining their disability in detail and telling the story of how they became injured. Participants stated that, once students became more knowledgeable of their situation, students viewed them professionally as they would any other teacher (Wills, 2011).

Despite accommodations made, participants recognized that they still needed help with particular physical tasks. To complete these tasks, participants communicated their specific needs to students and able-bodied persons who then could help. Participants found it most beneficial to establish routines, such as having students set up projectors and secretaries printing off handouts, et cetera, so that particular repetitive tasks did not require explanations every time. This saved participants time and effort, contributing to their professional success.

By relying on students and giving them individual duties, teachers with mobility challenges invited their pupils to gain a sense of responsibility. Participants found



students to be more actively engaged in their classes when given responsibilities, creating interesting classroom dynamics that benefited both participants and students.

Student–teacher relationships became less about authority and reflected a rapport that, participants felt, surpassed other teachers’ relationships with students. Participants believed that they achieved great success at establishing comfortable learning environments that proudly displayed their professional success.

### **Theme 5: Professional Benefits and Personal Rewards**

“Work is so much a central part of most [North] Americans’ lives that it, in part, defines who we are” (Bryan, 2013, p. 473). Participants described long term benefits and rewards of their occupation that contributed to their perceived professional success.

Participants viewed their role as teachers with disabilities as an asset to the educational system, representing inclusion of those with mobility challenges, and providing increased exposure to both students and the school community as a whole (Vogel & Sharoni, 2011; Wills, 2011).

In addition, participants believed that their students gained increased independence due to their teachers’ physical limitations. Having a teacher with a physical disability caused students to assume more responsibilities and opportunities to become actively involved in their class. Participants also strongly believed that when they incorporated personal life experiences into their teaching, students received gainful knowledge, different perspectives, and life lessons that went beyond the prescribed curriculum (Whitman, 2007).

The study also revealed that the teaching profession enhanced participants’ self-worth and sense of belonging (Crompton, 2008; Gallor et al., 2004). Factors such as

positively influencing students' lives and giving back to the community contributed to participants' self-perceived professional success.

### **Implications for Practice in Schools**

The findings of this study emphasize the necessity for workplace conditions to be more supportive of the individual needs of each employee and for employees to become more knowledgeable about disability issues. “Academic workplaces are part and parcel of the broader regulatory, political, legislative and discursive (re)production of disability” (Horton & Tucker, 2014, p. 77). Therefore it is crucial that schools “shift from ‘trying to continue as before’ (or ‘as normal’) to ‘rethinking how things are done’” (Horton & Tucker, 2014, p. 81).

The present study suggests four major implications for practice in schools: (a) ensuring that policies regarding inclusion are strictly enacted, (b) increasing awareness and understanding of disability issues, (c) creating workplace conditions to be more supportive of individual needs, and (d) establishing clear administrator roles and responsibilities.

### **Ensuring Legislation, Policy, and Practice**

Under the 2001 *Ontarians with Disabilities Act* (Ontario Ministry of Community and Social Services, 2006), the Ministry of Education, in conjunction with school boards, is required to prepare, update, and make public accessibility plans that address the identification, removal, and prevention of barriers of people with disabilities. Findings in this study revealed that, because current schools fail to meet basic accessibility requirements, teachers with mobility challenges experience negative consequences related to their professional opportunities. One participant commented:

Every school needs to be accessible. The *Ontarians with Disabilities Act*, school boards, and school administrations are not making sure all their schools are wheelchair accessible. The board I teach in has nearly 70 grade schools. I'm on the [supply teacher] list of 10 of them [because they are accessible]...and they have wheelchair accessible bathrooms. So [schools] greatly reduce [their] chances of hiring a great teacher by not having wheelchair accessible schools, and you're forcing children who have mobility issues to go to a different school. (Jimmy)

The implementation of mandatory accessibility standards progressed slowly in Canada and is “still a long way from meeting disability policy commitments” (Prince, 2004, p. 61). The most evident implication suggested by this study is that all Ontario schools need to meet basic accessibility requirements, such as accessible parking spaces, access to school buildings (i.e., ramps), electric door openers, and handicap-accessible cubicles in washroom facilities. As explained by Horton and Tucker (2013), these modifications are considered basic accessibility requirements or “reasonable adjustments” (p. 77). In the workplace, “reasonable adjustments” are alterations that enable people with disabilities to carry out their duties without being at a disadvantage compared to others. Aspects of the workplace that may require “reasonable adjustments” are buildings, equipment, signage, workloads, training, and supervision arrangements (p. 77).

### **Increasing Awareness and Understanding of Disability Issues**

Many current practices, in both educational and workplace settings, continue to reflect taken-for-granted ableist assumptions, attitudes, and beliefs that view inclusion as an intervention of normalizing those with differences as much as possible (Fraser & Shields, 2010, p. 10). According to Hehir (2013), “Ableist assumptions and practices are

deeply embedded in schooling” (p. 514). However, as Ainscow (2005) stated, inclusion is a process that should be viewed as a never-ending search for better ways of responding to diversity. In this study, a primary recommendation is for schools to reflect diversity within the teaching profession. “As more adults with disabilities take on more powerful roles in society and seek to influence schooling, the attention to these issues will hopefully increase” (Hehir, 2013, p. 514). Participants believed that their presence as teachers with physical disabilities allowed students to become more comfortable around people with disabilities. Eventually, students viewed participants as primarily teachers, rather than as people with handicaps. Exposure “to minorities as professionals benefit dominant-group students by helping them to modify any stereotypes and negative beliefs they may have about minorities” (Soloman, 1997, p. 397). School boards should be encouraged to hire minority teachers, such as those with physical disabilities, as they “serve as symbols of success who ideally...enrich the curriculum with cultural and cognitive strategies that [lead] to greater success in schools” (Soloman, 1997, p. 397).

All educators are increasingly expected to teach students to have an appreciation for all diversity that exists in our society. However, when the topic of disability is addressed in schools, it is often in the form of isolated Disability Awareness Days that involve disability simulation exercises (Lalvani & Broderick, 2013). Unfortunately, such attempts not only fail to accurately simulate the lived experiences of being disabled, but also focus on the ways in which people with disabilities are different from the norm (Valle & Connor, 2011). Implications of this study suggest that, in order to achieve systemic changes in understanding disability issues, students need to experience more intensive interactions and programming structures that allow them to become

knowledgeable as well as comfortable around people with disabilities. Objects such as wheelchairs are associated with medical deficits. As recommended by a participant of this study, allowing students to interact with wheelchairs as everyday objects in the classroom or at recess helps to remove negative stigma associated with wheelchair users.

According to Ryan (2006), especially in diverse settings, administrators, teachers, students and parents generally know too little about each other and about inclusive issues. In order to face the challenges associated with inclusion, new knowledge, understanding and attitudes need to be established. This is best achieved when “all members of the school community have to assume the role of both teacher and learner” (p. 10).

### **Supportive Workplace Environments**

“School systems have the responsibility of providing a supportive and accepting atmosphere for teachers [with disabilities]” (Volgel & Sharoni, 2011, p. 493). The most prominent opportunity for creating supportive workplaces, generated from participants’ stories, is to establish open dialogue with administration, staff, and students in addressing one’s disability and individual needs.

Participants in this study took a considerable amount of time at the beginning of each school year to talk about themselves and explain their disabilities to their students. However, participants never mentioned doing the same or having opportunities to facilitate similar knowledge building with staff and colleagues. This finding suggests that teachers with disabilities would benefit from opportunities for colleagues to learn more about them as individuals with specific disabilities. This dialogue might be accomplished at staff meetings where attendance is mandatory. Presenters may include teachers with disabilities themselves and/or other knowledgeable community members. Topics would

include these specific disabilities of teachers in the school. Creating this channel of communication not only enhances an understanding of teachers' individual challenges and needs, but also generates awareness about disability issues in general. Through open dialogue and disclosure, teachers with disabilities can help eliminate misconceptions and assumptions among the teaching body, creating a greater sense of acceptance and establishing a more positive work environment. However, in terms of disabilities, "the cultural habit of regarding the condition of the person, not the built environment or the social organization of activities, as the source of the problem, runs deep" (Wendell, 1996, p. 63). Thus administrators and others in positions of power have a responsibility to address deep seated stereotypes and prejudices.

### **Administrator Roles**

While all educational personnel are responsible for meeting the needs of those with disabilities, much appears to rest on the capabilities of school administrators and their actions (Ross & Berger, 2009). "Leaders have a central role in working with their colleagues to foster an inclusive culture within their schools" (Ainscow, 2012, p. 18). Administrators' roles in leadership, mediation, and collaboration crucially influence the success of inclusive school organizations (Goddard & Hart, 2007; Irvine, Lupart, Loreman, & McGhie-Richmond, 2010; Ross & Berger, 2009; Valeo, 2010). "School leaders need to attend to three broad types of tasks: fostering new meanings about diversity; promoting inclusive practices within schools: and building connections between schools and communities" (Ainscow & Sandill, 2010, p. 409).

Valeo (2010) discovered that the more experience and knowledge school leaders have about disability issues, the more informative and involved they become in

supporting safe and inclusive environments. Administrators have the responsibility to understand legislations and regulations around disability issues and must supervise all accessibility aspects of the school, including building, budget, and personnel concerns (Goddard & Hart, 2007; Ontario Human Rights Commission, 2008; Reynolds, 2008; Valeo, 2010). Administrators are responsible for implementing procedures surrounding disability concerns and ensuring that others, including staff and students, are aware of such procedures. The role of administrators also consists of modeling correct practices and finding/providing quality resources, both material and personnel, in helping promote disability awareness, safety procedures, and other concerns (Valeo, 2010). These procedures and practices should remain an on-going process of monitoring and adjusting as well as firmly entrenched in day-to-day activities (Ryan, 2006, p. 10).

Results of this thesis identified school-based administrators (i.e., principals and vice-principals) as key avenues of communication when seeking support and addressing individual needs. Administrators therefore play a vital role in the professional success of teachers with mobility challenges. For example, findings of this study show that principals who strongly attended to the individual needs of teachers with physical disabilities directly enhanced their self-perceptions of professional success. “Although principals are busy people, it is important that they take time to get to know ... teachers in their school and establish working relationships with them” (Carver, 2003, p. 37-38).

According to one participant in this study:

It is very helpful and really nice when the principal sits down with you and says, “Can you let me know if there’s anything that we can be doing to help? If there are some things that we can be putting in place for you.” (Anastasia)

Principals should be “welcoming new teachers to the site, maintaining an open-door policy, being available for individual conferences, and attending to new teachers’ real and perceived needs” (Carver, 2003, p 38). This study demonstrates that principals’ gestures of care and concern for their teachers and needs reflected in participants’ self-perceptions of success.

“Administrator leadership ... influences or mediates the climate for inclusion within classrooms, schools, and communities” (Di Petta et al., 2010, p. 131). Principals who build and sustain a supportive school culture benefit all teachers as they are “the primary source from which teachers take their educational direction” (Young, 2010, p. 60). Principals must continuously put forth efforts in role modeling inclusive practices, “fostering shared vision, creating collaborative structures, encouraging teacher-centered professional development ... and understanding policies” (Hoppey & McLeskey, 2013, p. 245).

Findings in this study revealed that participants relied on administrators, to a certain extent, in the “formation of allies” (Peters, Castañeda, Hopkins, & McCants, 2013, p. 532). “An ally is typically a member of advantaged social groups who uses their [*sic*] social power to take a stand against social justice directed at targeted groups” (Peters et al., 2013, p. 532). In my thesis, participants identified their students, some co-workers, and administrators as powerful allies in accommodating their professional needs. It is important that school administrators receive the professional development necessary to create a body of allies for inclusionary practices in schools.

Thus, at the district-level, school districts should provide meaningful professional development opportunities for administrators and teachers on the topic of disabilities. In



addition, a designated portfolio on inclusion issues at the district level would help enforce school accountability and commitment to policies (and the understanding of these policies) in order to create safe, supportive workplace environments. Although “there are no formulaic solutions, no short term fixes, and no easy shortcuts to the development of an inclusive school” (MacMillan & Edmunds, 2010, p. 5), leaders need to treat inclusion as a cornerstone of school ethics (Hargreaves & Fink, 2006).

Irvine et al. (2010) proposed that, when issues such as disability are viewed in a positive pro-active light, authentic inclusion is much more successful. When schools extend themselves beyond the classroom to meet the needs of diverse students and teachers, thereby setting the appropriate ethical direction, educational change can be positively established. In this thesis, I have used the lens of moral purpose to guide my investigation. I view moral purpose as enacting preventative strategies, taking charge of disability concerns, and monitoring mandated practices and procedures.

While striving for inclusionary improvements, according to Irvine et al. (2010), school leaders have reported increased stress in response to their “expanded responsibilities, increased demands ... and heightened accountability” (p. 72). Valeo (2010) similarly noted that inclusion, a social movement affecting educational systems since the mid-1970s, has generated considerable pressure from parent groups, educators, and communities. Reynolds (2008) recognized that school districts have failed to provide effective ... training for general education teachers and administration [which] has fallen short in the need to address this compelling area. The absence of this education sets the stage for feelings of defensiveness, reluctance, and apprehension. (p. 18)

Despite how or why schools are falling short of creating inclusive and safe school environments, Reynolds (2008) recommends four major strategies: (a) Get educated— inquire and understand disabilities and the unique challenges they create; (b) Apply training—develop an action plan, grow faculty support, promote parent acceptance, and promote understanding by students in the general classroom; (c) Gather resources— actively seek assistance from local school districts, special education, and federal government in order to continuously generate more knowledge; and (d) Keep the moral message clear—truly welcome suggestions and relationships that will communicate the change in vision for the school. The aim of sharing of knowledge among all levels of school is to promote a culture of ethical standards and equity through appropriate accessibility strategies.

Rendering a solution to this significant issue requires education reform that will minimally include overhauling educational processes and organization structures, and stressing effective teacher preparation and professional development in multicultural education. (Castañeda et al., 2013, p. 464)

According to Ornstein and Hunkins (2009), the “lifeworld of a school refers to the culture of the school with its attendant meanings that hold significance to the key players in that lifeworld—the teachers and the students” (p. 226). Implementing meaningful change to that lifeworld “actually requires the shaping of the school culture, that is, shaping the norms and behaviours extant in the school or school district” (p. 227).

Schools all over the world are committed to the inclusion of pupils with special needs. The insights, knowledge, attitudes, and commitment of teachers with ... disabilities can make a significant contribution to the successful inclusion of these

pupils. These teachers can play an important role in enhancing academic, social and emotional outcomes for these youngsters. ... School systems have the responsibility of providing a supportive and accepting atmosphere for these teachers. This will contribute not only to the well-being of youngsters in the school, but will be a model for creating truly inclusive societies. (Vogel & Sharoni, 2011, p.493)

### **Implications for Further Research**

This study outlined the challenges, both personal and professional, that teachers with mobility challenges face. However, there is a need for further investigation in this area given the limitations of this study.

First, future research should consider larger sample sizes. This study is limited to the experiences of three teacher participants with mobility challenges. The results of this study provide a preliminary understanding of teachers with mobility challenges and their perceptions of professional success. A larger sample size might increase “transferability” (Patton, 2002); that is, the “potential to be valuable across a variety of contexts or situations” (Tracy, 2010, p. 845). In addition, this sample only represents teachers with mobility challenges in Ontario. Future studies are needed to explore the experiences of teachers with mobility challenges across Canada.

Secondly, this study collected the self-perceptions of teachers with mobility challenges about their experiences with professional success. However, future research should provide detailed descriptions from teachers with mobility challenges who do not view themselves as vocationally successful.

Thirdly, the data collected in this study do not include the perspectives of colleagues, administrators, and other stakeholders such as students and parents. This information would provide alternate perspectives about teachers with mobility challenges and their influences in the school.

### **Reflections and Final Thoughts**

As Hinett (2002) aptly observes, “Reflection helps raise our awareness of ourselves as learners and to see that we can direct and change our learning” (p. 2). As a teacher education graduate and certified Ontario teacher with a severe physical disability, my interest in this topic was both personal and professional. The process of collecting data and reflecting on the experiences of my participants has shaped my learning, understanding, and appreciation of other teachers with mobility challenges. I have gained invaluable knowledge of the challenges and rewards that other teachers with mobility challenges have encountered, and learned what I can possibly expect as I progress in the education field.

Initially, as an “insider” researcher, I was truly shocked by the lack of literature and research on my topic of interest, and furthermore, on the lack of potential guidance for myself as a new teacher with a physical disability. These realities fueled my desire and interest in pursuing this investigation and contributing to further understanding of such an understudied phenomenon.

When reflecting on one’s own research, Biggs (1999) stated: “A reflection in a mirror is an exact replica of what is in front of it. Reflection in professional practice, however, gives back not what it is, but what might be, an improvement on the original” (p. 6). As a researcher, in the beginning stages of my study, I had not realized how small

a population teachers with mobility challenges were. It was extremely difficult to find and locate participants. Participants for my study were eventually located through the use of my personal network. I feel that if I had not been an insider researcher with a tacit rapport with other individuals with mobility challenges, appropriate participants would have been nearly impossible to find within a timely manner or without the use of extreme measures.

As an insider researcher with a severe mobility challenge, I had not anticipated my own difficulties, such as fatigue. For long road trips, meeting and interviewing participants, I chose to have my parents drive me to the participants' chosen locations. During the interview process, it was sometimes difficult to keep participants focused strictly on the interview guide, due to the wealth of information they volunteered. However, with particular questions, it was equally difficult to have participants open up and provide examples or explanations. Common habits among participants were (a) recalling recent and not past experiences from their teaching careers and (b) focusing on negative experiences.

As a learner, many participant suggestions (such as presenting oneself and explaining one's disability to reduce misconceptions) allowed me to reflect on obstacles I had encountered during my teaching practice. I realize that certain negative situations could have been eliminated if such strategies had been available to me.

The participants I interviewed strongly supported the need for this research and were happy that their experiences and stories were being heard. As pilgrims in the preliminary stages of such an understudied phenomenon, I hope the stories shared in this study shed some light for other teachers with mobility challenges, and provide schools

with implications for practice. Lastly, this study was intended to open the eyes of people without mobility challenges and to promote further research.

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## Appendix A

### Semi-Structural Interview Guide

1. How would you describe yourself?
2. Explain how and when you became mobility-challenged.
3. What were the effects of your mobility issues in your daily activities?
4. Can you describe barriers or challenges (if any) that you have faced during your professional career?
5. Describe how you get/got back and forth to work each day. How have transportation issues affected your professional life?
6. Describe some memorable moments working as a teacher. Describe some moments that were challenging working as a teacher.
7. As a person with mobility-challenges, what sort of supports, services, and/or resources do you have available or offered for you to use? At home? At school?
8. If you experience a problem in regard to your disability at work, who would address this issue? What steps might be taken to assist you?
9. How does your professional life affect your overall well-being or quality of life?
10. Do you have any suggestions for people who have mobility challenges and becoming teachers?
11. Do you have any suggestions for schools or school board administrators for teachers who have mobility challenges?
12. Is there any additional information that would be helpful for me to understand your experiences? Please explain.
13. Do you have any final comments or questions?

## **Appendix B**

### **Deductive Structural Codes**

Self-Perception

Mobility History

Influence of Public Eye

Role within School

Impact on Daily Activities

Education

Employment History

Role within School

Barriers

Challenges to Teaching

Attitudinal Experiences

Transportation Issues

Supports, Services, Resources

Emergency Evacuation

Advice to Teachers

Suggestions

Strategies to Teaching

Strategies in Class

Staying Healthy

Memorable Moments

Benefits of Profession on Well Being

Future Goals