

Social Construction of "Learning Disability" – School as a Medicalization Agent of Primary School Kids in Mainstream Schools in Hong Kong

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Abstract

This paper is an investigation of the incentives of Hong Kong primary schools to carry out medicalization on students with poor academic performance under the informal implementation of inclusive education policy.

Inclusive education is carried out informally in Hong Kong for three reasons. The policy only applies to local mainstream primary schools with exam-oriented systems. As most students with *learning disability* (LD) do not perform well academically, they are more likely to be allocated to low-band secondary schools. School authorities are not interested in participating in the scheme as they receive little support from the government, and the school performance in public examinations and hence the overall reputation would be affected. Special schools are regarded as inferior to the mainstream ones by parents; thus, they tend to send their kids, even with disabilities, to mainstream schools. Many schools, in this way, became involved in the scheme involuntarily.

The evaluation of LD is considered unreliable because students with LD are being identified when they do poorly in exams. To escape from the high expectation from parents and pressure from society, schools categorize students with poor academic results as having LD. In doing so, students' unsatisfactory performance is no longer the burden of the school. The policy shapes medicalization and school is an agent of it.

Keywords: Hong Kong, Inclusive education, Medicalization

Introduction

I was teaching a Primary One summer class in a mainstream primary school in Kowloon, Hong Kong, last summer – I was told that the eight students in my class were "problematic". However, I could not tell how "problematic" they were until I met with their mothers in the parents' session: the school told them their children have learning disability (LD). I do not know how they can possibly carry on their studies and also their lives as being labeled "disabled" in this competitive society. In this paper, I am going to analyze this situation through understanding the current education system in Hong Kong, identification of medicalization agents, and the consequences of this phenomenon.

Background

Inclusive Education in Hong Kong

Inclusive education is carried out in Hong Kong for almost 40 years since the 1970s (*Ming Pao*, 2009, March 31, P03). Though, a solid policy regarding inclusive education is not implemented until 1997 (*Ming Pao*, 2009, March 31, P03). And under the policy, five types of disabilities are included: vision impairment, physical disability, hearing impairment, intellectual disability, and learning disability. Students with these disabilities are encouraged to enter mainstream schools for easier transition to the society in a later stage.

However, only in recent years have students with LD started to become a problem to local teachers and schools. The drastic increase of students being identified as LD recently is the first piece of evidence. As shown by the government statistics, there were only 1,360 students has LD in SY2003/04, but 8,869 in SY2007/08 - the number of LD students increased for six times in four years (*Ming Pao*, 2009, March 27, A09). This situation also attracts my attention to look into the matter if medicalization has occurred amongst our school-aged children.

Literature Review

Medicalization is the key concept in my study. *Medicalization* is the process that non-medical problems are being defined and treated like medical problems (Conrad, 1992, p.209-210). According to Conrad, medicalization takes place in either deviant behaviours or natural life processes on three different levels: conceptual, institutional, and interactional level (1992, p.211-212). In this case, students without LD are medicalized as having LD because of their "deviant behaviours" of doing poorly in school, and this is occurred on conceptual level as the meaning of LD is being distorted. Moreover, it is then understood that medicalization is a sociocultural process and brings social control to the ones with the label.

Learning disability has been widely studied by scholars these years and there are variations in its definitions. According to Leung, Lindsay & Lo, LD as difficulties to write, to read, or to concentrate; in general, the difficulty in meeting school demands (2007, p.328). Reid & Button define LD into three main areas: 1. Difficulty in knowing when to use acquired cognitive strategies; 2. Constructive memory errors; 3. Developmental delays (1995, p.603). However, McClimens claims LD is only "a problem of language" (2007, p.258); this absolutely suits the situation of medicalization.

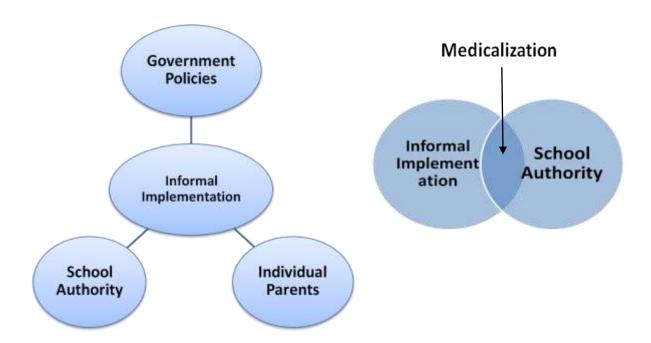
Methodology

Participant observation, interviews, and content analysis are used in the study. I had a chance to teach a Primary One summer class in a local mainstream primary school. In which, there was a parents' session that I met with their parents and got to know more about them and their family.

Moreover, content analysis on local newspapers was performed to examine the local perception. Back issues of local newspapers published 2008 and 2009 were analyzed to

understand how the concept of LD is being spread in the media as it is believed that local media reflects and spreads the ideas of local people. I also looked into a TV drama and certain articles on LD in local newspapers through searching Wisenews. And these articles are scattered across different sections, namely News, Education, Sports, and even Entertainment.

Data & Discussion



Public Perception of LD

LD is a new word in recent years; it was not at all a widely-known concept in my primary school years, and media is definitely a medium that has made it "popular" while reflecting the public's ideas. Media helps spread knowledge and ideas in the society and influences every single receiver, so I believe reporters and writers would have to be very careful about what they write. In general, most of the articles I found reported LD in a negative way or provided misleading concepts to the readers.

For examples, in the interview with Mr. Lau, a famous local writer, the reporter points out the public have LD as they do not like to read (*Sing Tao Daily*, 2008, September 19, p. E07), and another reporter mentions singer Justin Lo has LD as he has short memory (*Sing Tao Daily*, 2008, April 14, p. D03). Another example is Mr. Ng, the former local basketball athlete, who left school at Secondary Four as he engaged to basketball training since then, and he returned to school after he "retired" at 41. It is reported that Mr. Ng overcame LD after 6-month schooling as he was not in school for long (*The Sun*, 2009, June 15, p. E08). And in the local TV drama "Love Exchange", Kay has LD, so he did not finish secondary education and did not get a job. He is also seen as illiterate by his mother.

Moreover, as shown in statistics, the public has wrong concepts towards LD, just like how they would mistake LD for mental retardation, and do not agree LD students to study in mainstream schools (*Sing Tao Daily*, 2008, September 19, p. F02; *HK Headline*, 2008, September 19, p. P22). Media reports, I believe, have at least reinforced (if not misled the general public) the misunderstanding by not providing the public the facts. Lazy and absent-minded children, if mistakenly labelled as having LD, are likely to face a tough life ahead of them.

Informal Implementation of Inclusive Education

"This informal integration is entirely driven by parents, and is carried out with little or no support from the Education Department, and with few extra resources given to the schools involved." – Pearson, Lo, Chui & Wong, 2003, p.490

I suppose that informal implementation of inclusive education is a major reason for medicalization. There are three forces leading to the informal implementation: individual parents, school authority, and government policies.

Referring to Pearson, Lo, Chui & Wong, integrated education is informal as the parents do not want to send their kids with LD to special schools, which are seen devalued, but only to mainstream schools (2003, p.490). Due to the exam-oriented education policy, or, the local exam-oriented education system in another words, studying in mainstream schools is seen as the only way to promote to university, which graduated from university is believed as the essential path for bright future. A father stated that if his LD kid could not continue studying at the mainstream school, he preferred him to quit studying (*Ming Pao*, 2008, September 28, A13). So, parents do all what they can to send and keep their kids in mainstream schools even it might not be suitable for them.

Because of the parents' actions, schools do not know who, amongst the students allocated to them by the centralized system, have "problems". As a result, some schools became involved in inclusive education involuntarily. As schools have no way to know the students' backgrounds if the parents remain silent, both normal students and those having LD go to the same schools, both prepared and unprepared ones. Students are often found to have LD after spending sometime in mainstream schools, or, they are already identified before they entered the school, but just that their parents did not disclose it. But some schools chose to get involved, as LD students become their main source of new students, so the schools may avoid the threats of being forced to close down by the government because of not having enough students.

Also, inclusive education does not apply to all the local schools. The public placed a heavy role on schools, as they see the latter as having the responsibility to equip children with knowledge and skills. Education and qualifications are important in the knowledge-driven economy as those might lead them to a better future with easier career path. Local schools, especially those prestigious ones, try very hard to keep and raise the academic performance of their students for better future of the kids and so as the schools. Though, at the same time, schools have to keep their reputation and standard in public exams, so many schools refused to take in students with certain disabilities, such as LD. Therefore, many local schools are not willing to have LD students who are likely to lower the academic standard. Therefore, this situation only happens in primary schools but not applies to the whole education system as students with poor academic performance are not likely to get into secondary schools with good banding.

However, the current government policies do not support the local mainstream schools for carrying out inclusive education. First of all, there is no policy to force all local schools to participate. When schools are involved, both voluntarily and involuntarily, the government does not grant them enough financial support or provide adequate trainings to teachers to deal with the special needs students. Only a small proportion of current teachers receive training to serve students with special needs, as the bachelor or post-graduate diploma of education programmes in the local universities only started to offer such a specialization in recent years. Also, there are not enough openings for on-job training classes as they are always full. Moreover, the exam-oriented education policies discourage mainstream schools from participating in inclusive education as well. Most of the students with special needs do not do

well in academic subjects which affects the schools' performance in public examinations and so as the schools' reputation, which may lead to the decrease in the number of incoming students and closure of the school eventually. It is therefore understood that there is an informal implementation of inclusive education with the current education policies.

Occurrence of Medicalization in Schools

"Does my daughter really have problems? The school told me she has LD." – One of the mothers told me in the parent session

With this informal implementation, both normal and LD students are in the same school, and so, school authority can make use of the condition, medicalize and categorize students with poor academic performance as having LD. On one hand, schools and teachers do not have the knowledge to distinguish LD students from the normal ones, especially there are no perfect ways to check it; LD students are discovered until they perform poor in academic (Pearson, Lo, Chui & Wong, 2003, p.496). On the other hand, since there is no standard, normal students may be categorized as having LD if they do poor in academic (Leung, Lindsay & Lo, 2007, p.328; *Sing Tao Daily*, 2008, September 19, p. F02). In which, short memories or laziness of the student may lead to the same result of doing badly in academic subjects. In this case, medicalization of laziness and short memory as LD is occurred.

Within the five categories of disabilities under the supervision of the inclusive education policy, learning disability is the only category can be identified without a medical process. Since there are no testing methods or checklists which can perfectly tell if someone has LD, there is at least one case that a student is told to be normal after being categorized as learning disable for certain years (*Ming Pao*, 2008, June 19, p. A12). Therefore, whether a student has LD is totally depends on the perceptions of the ones who teach and lead him in life – his teachers and parents.

Traditional Chinese culture plays an important role in the medicalization process. Teachers or scholars are respected and well recognized in the social ranking system ("Scholar, Farmer, Engineer, Businessmen"). According to the traditional Chinese belief, scholar is ranked the top in the society. Being educated is seen as the way of pursuing bright future and good prospects since the olden days. Doing well in school is then seen as the most efficient way of getting into the upper class of the society. Therefore, there has always been a high demand of "young generations should do well in school" from parents and also society.

Even though the parents nowadays are more educated than the previous generations, many parents still believe what teachers or school authorities told them without questioning much. It may be due to the long-established tradition of respect to teachers. And a lot of parents firmly believe schools would treat their children very well as the school authorities have to keep up the good performance and reputation of the school. So, if the school claims that their children have LD, parents seldom have doubts.

Incentive of Schools for Medicalization

Hong Kong's education system is highly competitive and weighted heavily towards academic subjects; schools and teachers are stressed out as they are evaluated by their students' performance (Pearson, Lo, Chui & Wong, 2003, p.492&503). Schools are worried of being blamed for not being able to help students to get good results. For example, the results of secondary school place allocation are often affected by the performance of students; students who have LD are blamed to lower school's overall performance and hence reputation, and in return, affect the quality and numbers of new income students (Pearson, Lo, Chui & Wong, 2003, p.490&492). This affects the future of the school. One extreme case is

that the school forced a LD student to leave the school as he may lead to the closing of the school (*Sing Tao Daily*, 2008, June 13, p. F02). And it is truth that a Band Three secondary school in Tai Po which has LD students is going to be closed down by the Education Bureau.

Schools act as an agent to medicalize students with short memories and laziness to LD, not only to lessen the stress from the public but also to gain some benefits from doing so. Because of the high demand from parents and also society of educating the young generations, this creates great pressure to schools. It is believed that schools try to lower the expectation from the parents and escape from the pressure from the society by generalizing real and fake LD students as having LD, and state that LD is very common nowadays. As LD is a sickness, people have LD are not able to do something, or, do not have certain ability to deal with learning tasks. If a student is categorized as having LD, it lowers expectations from their parents, family, and also the society. Therefore, students' unsatisfactory performance is no longer the burden of the school. At the same time, schools receive subsidies from the government according to the number of LD students the schools have.

Consequences of Medicalization

Students being medicalized and their parents are in the passive position in this situation. The LD label marks these children as deviants in school and society, and may lead to certain negative effects in their growth and development. The victims of this medicalization are those kids who are lazy or have short term memories, and do not score good grades in academic subjects, being said to have LD. No expectations and extra resources should put on them as they are problematic; they are always the losers, far from success. Webster-Stratton & Taylor argue that if students who are classified as LD but does not receive enough support, they may have failure in academic and also lead to conduct problems (Leung, Lindsay & Lo, 2007, p.328). And there are cases that these students have been physical abused and bullied in school and at home (*Take me Home*, 2009, June 12, p. 005; *Oriental Daily*, 2009, June 6, p. A12; *Ming Pao*, 2008, September 28, p. A13). The medicalization totally affects the children's personal growth and future development. So, it is understood that these students are being marginalized at schools, and there are cases of these students being bullied and even forced to quit.

Though parents do not have enough power to remove the label, they try to help their kids with the available resources they have. Many of them try to improve their kids' learning ability by sending their kids to tutorial schools or youth centers. This is one of the common ways as the parents believe that small group, or even one-to-one, tuitions and training classes can improve their academic results. Also, having special interest classes is believed to be a potential enhancer of their concentrating ability. Besides further assessments on whether their children are LD sufferers, one of the mothers I talked to was taking a year-off from work just to spend more time on doing revision with her kid. They told me even when they played games with their kids, they would try hard to "cultivate" their abilities in problem-solving and concentration. It is obvious that both parents and kids are suffering from the medicalization.

Conclusion

School is the most important and most influential agent of medicalization in this case, while media is the assistant agent implementing and spreading the wrong concept to the public. Besides enjoying incentives to have or even to "create" more LD students in schools, there is not yet a 100% accurate testing method that can prove if a child has LD. Teachers tend to see students who do poorly in examinations and tests as having LD. Also, through media, many local people have wrong perception of LD. The public does not actually have a clear concept about LD, and doing poorly in school becomes the first criterion on which their

categorization is based. The public is not knowledgeable enough and has been influenced by the wrong ideas spread around by the media, and the categorization and medicalization of having LD are almost a result of trust between parents and schools.

I believe the government should consider making some changes to inclusive education policy in Hong Kong. On the community level, they might wish to provide more resources in the community, such as, allocating more qualified psychologists and social workers to serve these students and their family, so as to help lower down cases of child abuse in these families. As for local schools, more training and resources can be given to prospective and current teachers as the current quotas and courses are limited, so they would know how to teach and help these students. Also, more educational psychologists should be trained so that the proportion of each psychologist to students can be reduced, and the number of visits to each school can be increased.

To alternate the situation, schools and community may play an important role to build up a correct understanding about LD. It is important to build up the right concept in society, so as to increase the acceptance of these unfortunate students, and then bring the atmosphere into schools. Vice versa, school authorities should help create an inclusive atmosphere in school. "Normal" and "LD" students know each others' abilities and learn to cooperate through interactions in schools, and so they can bring the concept home. By changing the perceptions of LD among the public, higher acceptance and inclusion can be generated, and harmony in society can gradually be created, which are exactly the ultimate goal of inclusive education.

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