



Stigma In Teachers' Speech: The Influence of Medical Terminology on Perception of Special Educational Needs

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ARTICLE INFO

Article History:

Received: 01 July 2024

Received in revised form: 01 November 2024

Accepted: 30 December 2024

DOI: 10.14689/ejer.2024.113.19

Keywords

social model of disability, special education needs teachers, inclusive culture in Kazakhstan, stigma

ABSTRACT

Purpose: The article explores teachers' understanding of special educational needs (SEN) in Kazakhstan. Through an analysis of the language used to describe children with disabilities, the study aims to identify underlying stigmas and stereotypes. **Method:** Recognizing the limitations of formalized questionnaires in revealing subtle biases, the researchers opted for semi-structured interviews. This method allowed for a deeper exploration of the participants' implicit beliefs and assumptions about children with disabilities. **Findings:** The results show that experienced teachers who were educated in a more traditional, segregated system tend to subscribe to the medical model of disability. However, novice teachers, while more aligned with the social model of disability, often emphasize students' disabilities over their strengths. **Implications for research and practice:** The study implies that the use of stigmatizing terms in

professional speech can contribute to discrimination against children with special educational needs and hinder the creation of an inclusive environment, since special education teachers play a key role in fostering an inclusive culture and promoting a positive image of children with special needs.

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Introduction

In the modern world, there has been progress in shifting from a medical to a social understanding of disability. The Preamble to the 2006 Convention on the Rights of Persons with Disabilities states that "disability is an evolving concept and that disability results

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from the interaction between people with disabilities and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others." This document is a guideline for all states that have ratified it, including Kazakhstan. In accordance with this ordinance, the country is transitioning from a medical understanding of disability to a social one, and the ideas of inclusion are actively promoted. Currently, there are two education systems for children with disabilities in Kazakhstan: special and inclusive. Special teachers actively work in both systems. Special pedagogical education in Kazakhstan can be obtained at a university, where they teach how to work with children with different educational needs. Since until recently a child with special educational needs (here in after SEN) in our country could only receive an education in the special education system, future special educators were oriented towards working in a special school.

The content of professional training for SEN was based on a medical understanding of disability and special educational needs, as evidenced by even the name of the specialty "Defectology". Despite the fact that currently, in Kazakhstan, 32,125 children are covered by inclusive education, who study in 3,289 schools, which is 44.45% of schools (Mendaliyev, 2021), the medical model of disability still influences how teachers perceive children with SEN and how they teach them. There are a number of studies devoted to the problem of understanding disability and perception of students with SEN (Adl-Amini et al., 2024; Lu et al., 2020; Moriña & Carnerero, 2022; Rodríguez-Izquierdo et al., 2020; Tarantino et al., 2022). But there is a gap in research on how widespread the medical model is in the Central Asian region, and among teachers with special education, in particular.

Heyder et al. (2020) found that in inclusion studies, teachers tend to give socially expected answers. Symeonidou and Chrysostomou (2019) in their study identified a gap between the conscious part of an inclusive culture (external agreement with inclusive values) and the unconscious part (understanding disability as the opposite of ability). Both of these studies highlight the pitfalls that inclusion research can face: results can be skewed by both the tendency of participants to give socially expected answers (Heyder et al., 2020) and by genuine misconceptions among respondents (Symeonidou & Chrysostomou, 2019). Thus, in the study of inclusive culture, as in other studies aimed at identifying beliefs, prejudices, cultural influences, attitudes towards certain social groups and topics, it is preferable to use qualitative methods, in particular narrative analysis (Macan & Merritt, 2011; Parrott et al., 2017; Petrjánošová, 2018). Stereotypes, attitudes, tendencies to give socially expected answers, which are often not realized by a person, can distort the results of such methods as formal surveys, but can be identified through narrative analysis, such as semi-structured interview analysis.

Our study focused on solving two problems: (1). What speech characteristics of Kazakhstani special educators reflect adherence to the medical or social model of disability? (2). Is there a difference between the verbal behavior of experienced teachers and novice educators? Little research has been conducted on how inclusive culture and understanding of disability manifest themselves in the everyday speech practices of teachers, especially those specializing in special education. Moreover, no studies on this topic have been conducted in the Central Asian region. This study focused on teachers for children with special education needs, as we believe that they play a special role in the development of an inclusive school culture. In an inclusive school, they become the

coordinator of work with a child with SEN, providing support to teachers without special education. It is the special educator who is the bearer of knowledge on how to meet special educational needs, he becomes the headliner of the implementation of inclusion, a model of inclusive culture for other teachers, students, and parents. We set a goal to identify what features of the description of children with special educational needs by Kazakhstani special educators indicate their understanding of disability and special educational needs. In addition, several questions formed the part of discussion such as whether special education teachers used incorrect terms; reasons not to use incorrect terms; classification of incorrect terms; who used incorrect terms; and what special education teachers pay attention to when describing children with special education needs.

Literature Review

A team of specialists, most of whom are teachers, provide support and assistance to children in regular schools. Teachers are at the forefront of the changes that the introduction of inclusive education brings to school life. It is teachers who bring the ideas of inclusion to life and interact most actively with children with SEN, and the effectiveness of training depends on them (Feng & Sass, 2013). This is an additional burden, as a result of which teachers can experience stress, feel disoriented in the flow of changes, and show insufficient readiness to work with children with SEN. Researchers have found that low teacher competence in working with students with SEN decreases motivation (Rodríguez-Izquierdo et al., 2020) and may even lead to a refusal to work with such students (Budiarti & Sugito, 2018). Many researchers talk about the need for informational and emotional support for teachers implementing inclusive education. Studies have shown that greater awareness of developmental disorders improves teachers' professional self-efficacy and attitudes toward inclusion (Lu et al., 2020; Tarantino et al., 2022).

One of the effective ways to improve the level of inclusive culture of regular teachers is to support special educators. Rodríguez-Izquierdo et al. (2020) believe that since there is a gap in the level of inclusive culture between teachers trained to work with children with special educational needs and regular teachers, collaboration between them significantly enhances the development of inclusive culture in schools. Other studies Taneja-Johansson et al. (2023) found that teachers without special education identified a lack of support from special teachers as one of the problems they face with inclusion at school. Thus, cooperation between regular teachers and teachers with special education is one of the drivers of the development of an inclusive culture of teachers and the school as a whole. This is important, since the inclusive culture of teachers working with children with SEN is of particular importance. Likewise, studies (Heller & Kern, 2021; Lu et al., 2020) found that teachers' attitudes and expectations affect the effectiveness of interaction with students with SEN and their academic achievement.

A recent study Bialka et al. (2024) has found that teachers' understanding of disabilities may inadvertently stigmatize their students or cause students to conceal their disabilities. Research results provide conflicting data regarding which model of disability teachers and bachelors in teacher education tend to adhere to, but most often it is the medical model (Adl-Amini et al., 2024; Moriña & Carnerero, 2022). In addition, such studies did not include teachers with special education. Understanding disability, as well as an inclusive culture in general are not always recognized by the subject. For example, in another

empirical study (Symeonidou & Chrysostomou, 2019), one of the participants only realized after completing a professional development program that his understanding of disability was based on a medical approach.

Inclusive culture is also manifested in speech. For example Siperstein et al. (2018) confirmed in their study that the use of stigmatizing language such as 'the r-word' highlights societal perceptions of intellectual disabilities and those affected. Likewise, several studies have identified the stigmatizing effect of everyday words and scientific terms used in communication with people with developmental disabilities, denoting their characteristics and themselves (Abdul-Chani et al., 2021; Dollinger et al., 2024; King et al., 2019; MacKenzie et al., 2020; Richard & Hennekam, 2021; Solaru & Mendonca, 2023). All these studies unanimously agreed that inclusive culture is reflected in the language used by educators, and that inclusive language promotes positive perceptions of students' abilities and potential.

Methodology

Research Design

The current study used a qualitative research design adopting a survey method to collect data. It was important to choose a method that would reduce the possibility of both conscious and unconscious distortion of information. Hence, the study touched on such an emotionally charged issue and based its questionnaire on the beliefs and past experiences of respondents. This helped in understanding the inappropriate behavior of specialists, teachers and classmates when communicating with children with special educational needs.

Sampling and Population

The study involved 20 teachers qualified in special education, with graduation in Special Pedagogy. These teachers significantly differed in the amount of professional experience, e.g., 10 teachers with experience ranging from six months to 3 years; and 10 teachers with more than 20 years of experience. This was done because we hoped to find differences between long-serving participants who were trained and formed as professionals in the context of the widespread dissemination of the medical model of disability and short-serving participants who received their professional education more recently, in the context of the dissemination of the social model of disability.

Instrument and Procedure

Semi-structured interviews were used to collect data, organized with open and reflective discussions while ensuring consistency. The interview guide focused on two primary topics. Terminology Use: How do teachers with special education refer to children with SEN during communication with colleagues, students, and parents? Perceptions of Inappropriate Terms: What terms used by teachers, students, or others do they find inappropriate when describing children with SEN, and why? Have they witnessed such usage? The interviews were designed to address sensitive topics, such as inappropriate behavior by teachers or classmates, while creating a comfortable environment for

participants to share their insights. Informed consent was obtained from all participants, and confidentiality was ensured throughout the study.

Data Analysis

The interview transcripts were analyzed using narrative analysis, a method effective for uncovering implicit biases, stereotypes, and cultural influences. The analysis focused on identifying patterns in language use, beliefs about disability, and attitudes toward SEN. Special attention was given to differences in responses between the two groups of participants, aiming to reveal how professional experience and training influence perspectives on inclusion. The study adhered to ethical guidelines for research involving human participants. Participants were fully informed about the study's purpose, and their consent was obtained prior to participation. Confidentiality and anonymity were maintained to ensure the privacy of the respondents.

Results

There were several revelations evident from the first-hand responses of the informants during the interviews. There were basically questions that referred to the usage of incorrect terms for SEN children. For example, it was sought whether special education teachers used incorrect terms; reasons not to use incorrect terms; classification of incorrect terms; who used these incorrect terms; and whether special education teachers paid attention to when describing children with special education needs. To understand the question whether special education teachers used incorrect terms, all respondents insisted that they do not use objectifying, devaluing, or incorrect terms to refer to children with special educational needs. Most participants said that at their school it is customary to call all children by their first and last names, and they do not make exceptions for children with SEN.

For instance, Participant 8 (less than 3 years of experience) admitted: "We don't divide children in any way, neither by diagnosis, no by categories, we call them by their first or last names and that's it." However, in the process of research, it was found that the teacher realizes that it is undesirable to use certain words and knows for what reason, but still used them during the interview. Participant 6 (more than 20 years of experience): "I had experience working with "downyata", that is with (children) with Down disease (syndrome). She's the same: "I call them (children with special needs). Unfortunately, the inclusive culture in society is very low and I hear from those around me called them "disabled", "sick" and so on. Sometimes they just say "not like everyone else", "different", "special", but, unfortunately, there are just insults. Even among teachers he meets with "disabilities", "with limited developmental opportunities" Considers "disabled" offensive, incorrect when they are called "down", "autistic" directly on the basis of their disabilities... I ... (feel) uncomfortable." She finds it acceptable "special child", "special educational needs" acceptable... Maybe "different child", "not like everyone else"

A similar situation arose with another respondent, participant 15 (more than 20 years of experience), who did not believe that she was directly in contact with inclusion and worked in an inclusive class, despite the fact that she was the class teacher of a class in which a child with a disability studied. She exclaimed, "For example, I have a girl in my

class, she has diabetes and she is not in the class (for children) with special needs..." At the same time, she classified children with disabilities as children with special needs: "In mostly these are children, mostly like this. Some diabetes... A child with diabetes is also very have heart problems... suffering from... disorders... with diseases such as vulnerable... I believe that these are not necessarily mentally retarded children, but children with special needs associated with various disorders ... of the organism."

In this study, we also found that one of our respondents found it difficult not only to choose words denoting children with SEN, but also to choose the correct words relating to certain aspects of interaction with them. Participant 4 (more than 20 years of experience): "We say: "You see", "Look". Even one teacher once made a remark to me: "Why do you say: "Look," they don't see," but how do I should have said: "Feel", or what? That's why we say: "Look with your hands". Just "look" means (pay attention), they (children) understand that "look" means "look with your hands"; (perceive) with your feet, somewhere with a cane... Why don't I should say "Look" ... to disadvantage the child and let him know that he doesn't see? ... Sometimes high school children ... say: "Why do you say "look," because I can't see?" but then you talk to this child and say: "Why? You can see with your hands, why can't I say this word?"

To another question, why not to use incorrect terms, all of the respondents interviewed believed that the use of objectifying, devaluing and incorrect terms to refer to children with SEN is unacceptable even in conversations "behind closed doors." For instance, participant 2 (less than 3 years of experience): "Personally, I do not use such (words) as deaf, deaf-mute in relation to children... I think that it is incorrect to use such words, even when working with specialists" Participant 4 (more than 20 years of experience): "I can't even say something like that about children (hurtful) even with myself... It's unacceptable (to talk about children like that behind their back) if you made such a decision (to work with such children)".

Arguing why objectifying terms should not be used, our respondents gave very strong reasons such as: it will negatively affect the status of a child with special educational needs in the class (teachers with extensive experience - 1 answer, novice teachers - 1 answer). An example would be the statements of Participant 6 (more than 20 years of experience): "Because... everything depends on your attitude and (it affects) the attitude (towards a child with special educational needs)... In addition, his peers listen to you, this is very strongly reflected..." Another reason given was the desire to minimize the possibility of conflicts (teachers with extensive experience - 1 answer, novice teachers - 1 answer). So, Participant 6 (more than 20 years of experience) answered: "(It helps) to avoid conflicts... and if it was not possible to prevent it, it helps to get out more painlessly for both students and parents". Another argument was having felt the need to spare the feelings of children with SEN (teachers with extensive experience - 4 answers, novice teachers - 6 answers). For example, Participant 18 (more than 20 years of experience) said: "Children are different, for some (incorrect words) may hurt... hurt, offend. Therefore, it seems to me, it's better to choose words, of course."

One of the arguments was the awareness that this is part of pedagogical ethics (teachers with extensive experience - 3 answers, novice teachers - 3 answers). An example was participant 10's response (less than 3 years of experience): "Because we are teachers, we

must explain everything correctly (about why it is necessary to use the correct terminology about people with special needs even in their absence)". Another respondent, Participant 1 (more than 20 years of experience): "The teacher should always be a cut above and not allow himself... to expose the child in some unsightly light... Teachers should lead by example". There was also a reason given that because this is part of an inclusive culture (teachers with extensive experience - 1 answer, novice teachers - 2 answers). For example, Participant 6 (more than 20 years of experience): "firstly, there is a certain inclusive culture, relationships, especially in institutions such as educational organizations, an understanding of what the status of a teacher is... A person who understands how inclusion works... this imposes a certain responsibility. I believe that even a simply educated person will never embarrass... anyone." Another reason claimed was the realization that this is part of universal ethics (teachers with extensive experience - 2 answers, novice teachers - 2 answers). Participant 3 (more than 20 years of experience): "People in general should choose words, not only when talking about children with special needs... In any communication situation, people must choose their words, this is basic ethics." Other, Participant 2 (less than 3 years of experience): "I would not like people to say things about me similar words, so I adhere to this principle". When analyzing the answers of our respondents, we were unable to identify a difference between the answers of teachers with long and short work experience. Such a large number of opinions on this issue is explained by the fact that only 12 teachers gave one reason, and the teachers gave 2-3 reasons.

To the question over the classification of incorrect terms, more than half of our respondents (6 teachers with extensive experience and 5 new teachers) reported encountering terms they deemed incorrect when referring to children with SEN. The terms used for children with special needs are diverse and can be categorized such as: (1) offensive, incorrect, devaluing (moron, imbecile, down, autistic); (2) objectifying, borrowed from medical terminology (deaf, deaf-mute, blind children, unseeing children, children with mental retardation, disabled, not normic, etc.) (3) disguised objectifying terms (e.g., downyata, autyata) involve attaching diminutive suffixes like '-onok/-enok' for singular and '-yata' for plural (e.g., downenok/downyata, autenok/autyata) to medical terms. This suffix is found in the names of children and young animals (rebenok/rebyata as child/children, telyonok/telyata as calf/calves). Because this is a diminutive suffix, it allows you to soften and "disguise" the objectifying meaning. In addition, like all affectionate diminutive suffixes, it gives the word double connotations: expressing love, caring attitude, but at the same time emphasizing belittlement, lower status, immaturity. (4) emphasizing isolation, separation (special children, correctional children) (5) disguised isolating (such children, inclusive children, inclusionists)

We also noticed that many respondents (parents of children with SEN, special teachers and students) avoided answering the question about what children with SEN are called, either directly refusing to answer, or diverting the discussion to another plane, refusing to give examples, or answer clarifying and direct questions. Hence, this was difficult to find out who and when used incorrect terms. Those of our respondents who witnessed the use of incorrect names and terms in relation to children with special needs usually encountered this at school. Many respondents observed incorrect terms being used by others, including teachers without training in special education and peers of children with special educational needs. An example would be Participant 3's statement (more than 20 years of

experience): ...Their... whatever they want, that's what they call it: inclusionists, autistics, autyata, whatever they are called, in principle... Teachers (that's what they are called), ordinary teachers who have such children in their class... And the administration". Other, Participant 4 (more than 20 years of experience): "We say "unseeing children, special children", I heard them say "blind children" ... Teachers, educators who work with them, we say to them (children with visual impairments) "our children" ", we use (the term) unseeing children... And people from the outside say "blind children", and so on, but this really offends (me)... Even those teachers who do not teach these classes... also say (to normo-typical children) "Give in the presence of (children with visual impairments, their teachers) the road, blind children walk!" ... they can shout like that... But they don't even understand that it can be offensive... Even me it hurts me a lot"

Our respondents were divided in their opinion about who used incorrect designations more often. Thus, Participant 6 (more than 20 years of experience) noted: "If in percentage terms, then approximately 70% are parents (of normo-typical children), 20% are teachers, and 10%, perhaps, are the children's team itself. However, according to Participant 20 (less than 3 years of experience), classmates of children with SEN use incorrect words more often: "... Children ... are normo-typical. But they call each other what they call each other, you should have heard... More often they call each other names, but everyone gets it. I can imagine what's going on in their closed chats... We don't know, we can't imagine... when they start openly bullying (then it comes to the surface).

Another respondent noted that classmates of children with special needs tend to ignore them rather than engage in direct conflict. So, she did not have to witness conflicts between children with SEN and their peers. Participant 7 (more than 20 years of experience): "I have not heard such a fact in our school that there were... some kind of conflict situations... It was children from, let's say, regular classes and children from classes where children with special educational needs study... When children they see... they just move away... don't contact them... If they meet such children, they simply... don't argue with them ... As they noticed that the child is not entirely adequate... with disorders ... they leave and don't get hung up... This is probably bad, because if a child knows that there is someone like that next to him... he should just understand this child... It seems to me that this is why today's children are more... tougher, so to speak... They are less friends (children with SEN and their classmates with each other) due to circumstances... Interests a little different... even playing games... A more developed child will always win and he is not interested in the one whose thinking... will be more like that... slow... A normal child knows more... than such children"

Participant 13 (less than 3 years of experience) believes that the attitude of peers towards students in special classes depends on the work of class teachers: "It is necessary to work with parents... because everything comes from the family... And to work with children, of course, and with teachers (subject specialists) ... a lot depends on the class teacher and his work" At the same time, two of the respondents noted that currently they are less likely to encounter situations of using incorrect and objectifying designations, and even violations of inclusive culture in general. Participant 6 (more than 20 years of experience): "No... colleagues who have special education... no longer allow incidents... Mostly, I hear this (incorrect designations) from teachers who are just beginning to understand what inclusion is, for example, 5-7 years ago this was much more common...

Thanks to many programs... mostly international, our community understands what inclusion is ... and it is already becoming much smaller, and among those teachers with whom I work, for example, the same subject teachers, they are, of course, already understand that this is a child who requires special approach... special attitude" Participant 4 (more than 20 years of experience): "I haven't heard this for a long time (when they say "blind children")... The last time was last year" The same respondent notes the importance of the administration's efforts in forming a correct attitude towards students with special educational needs at school: Participant 4 (more than 20 years of experience): "The director and head teacher explain all this at all planning meetings, at meetings, what classes we have in our school, what special children we have and etc."

Another question that was sought an answer was: What special education teachers pay attention to when describing children with special education needs. Speaking about children with special educational needs, some of our respondents indicated that these children are not responsible for who they are. Participant 7 (more than 20 years of experience): "(We) shouldn't even be allowed to think badly about such children (children with SEN), it's not their fault." On the one hand, this is a positive trend, as the child is not blamed for what is beyond their control. On the other hand, researchers are alarmed by the very relationship between guilt and developmental problems that arises in the minds of some respondents. This perspective can easily lead to assigning blame, as demonstrated by one respondent: Participant 19 (more than 20 years of experience): "I believe that such children... every year, according to statistics, there are even... more, because now, in general, people lead an unhealthy lifestyle... I am completely sure that such children (children of parents who leading unhealthy lifestyle) will be born unhealthy, especially given our environmental situation." Thus, linking special educational needs with blame risks stigmatizing parents.

Some respondents also associated special educational needs in children with negative connotations such as vulnerability and fragility. For example, Participant 7 (more than 20 years of experience) notes: "For me, these are children offended by God (when asked what such children are called) ... For myself, I make a tick that he needs very careful, very careful ... (treatment). To be treated as equals, but at the same time... to think that you are (communicating) with a very fragile child." One of the respondents believes that pity for a child with special needs is the same manifestation intolerance, as well as hatred: Participant 2 (less than 3 years of experience): "It seems to me that it's wrong to feel sorry for (children with SEN) ... There are 2 stages of acceptance: it's either pity or hatred, and after all this they begin to accept them." Some participants associated a child's special educational needs with inconvenience or discomfort for those interacting with them. For example, here are the words of Participant 1 (more than 20 years of experience): "All attention to this child, and the whole class should wait"

In addition, in some interviews, connotations appear related to emphasizing the special status of a child with special needs, his difference from others, and excessively emphasizing the idea that he should be treated like other children. For instance: Participant 15 (more than 20 years of experience): "I have to perceive him as an ordinary child" Participant 11 (more than 20 years of experience): "There are children (with SEN) ... quite ... normal." Participant 1 (more than 20 years of experience): "He (a child with special needs) should feel the same as everyone else, not deprived." In the responses of several participants there

were statements that directly indicated on the inferiority of children with special needs: Participant 18 (more than 20 years of experience): "... this is because of their (children with special needs) ... shortcomings... This is not possible for them." The responses of two of our respondents directly indicated their commitment to the medical model of disability: Participant 7 (more than 20 years of experience): "I believe that these are not necessarily mentally retarded children, but children with special needs associated with various disorders ... of the body" Participant 11 (more than 20 years of experience): "I don't think that this girl belongs to this group (OOP) ... she is a very developed child, I would classify such children as ... those who have developmental problems"

We decided to find out how often negative connotations are found in the description of children with special needs by teachers with different experience. Certainly, respondents' answers to the question "What do they and other participants in the educational process call children with special needs?" were excluded from the analysis, since when answering this question, the participants do not express their own beliefs and attitudes, but rather information received from others. The results are shown in Table 1.

Table 1

Frequency of occurrence of connotations in the description of children with special needs by teachers with different experience.

No.	Type of connotations	Quantity		Processing results using the Mann-Whitney U test		
		Teachers with less than 3 years of work experience	Teachers with over 20 years of work experience	U	Statistical significance at p < 0.01	Statistical significance at p < 0.05
1	Connotations associated with guilt	2	2	-	-	-
2	Connotations associated with vulnerability	1	23	17.5	+	+
3	Connotations associated with discomfort	0	4	35	-	-
4	Connotations associated with emphasizing special status	7	17	31	-	-
5	Connotations associated with inferiority	2	16	26	-	+
Total:		12	62	109.5	+	+

The data was processed using the nonparametric Mann-Whitney U test. Processing was conducted using SPSS Mann-Whitney U test (Mann Whitney, 2007). Statistically significant differences were Disability and Society found between teachers with short and long experience in two parameters: 'Connotations associated with vulnerability' (p < 0.01) and

'Connotations associated with inferiority' ($p < 0.05$). In general, teachers with extensive experience use more negative, objectifying language and tend to frame disability and special educational needs within a medical model. This difference is all the more significant since there were practically no differences in direct answers to the interviewer's questions between the answers of teachers with extensive experience and those of novice teachers. Among teachers with less than 3 years of experience, connotations emphasizing the special status of children with special needs and their dissimilarity from others predominate. In contrast, teachers with more than 20 years of experience often focus on connotations associated with vulnerability. Also, quite often in their speech there are connotations associated with inferiority, deficiency and emphasizing a special status.

Discussion

The results of this study demonstrate a strong consensus among teachers regarding the ethical imperative to avoid objectifying and devaluing language when addressing children with SEN. The main reasons given for avoiding devaluing language reflect teachers' multifaceted understanding of its harmful effects. Only one of reasons can be considered business-related: avoiding of a conflict. The remaining reasons include concerns about the emotional well-being of children with SEN and their relationships with peers, or consideration of the issue in the broader contexts of pedagogical or universal ethics. The study suggests that teachers recognize the role of language in fostering inclusivity and aim to adhere to ethical principles in their communication. Similar strategies were used by teachers in the studies (Lakkala et al., 2021; Pastore & Luder, 2021). The study found no significant differences in reasoning between novice and experienced teachers, indicating a shared understanding of the ethical and professional importance of inclusive language.

However, respondents reported a high prevalence of stigmatizing language in schools, particularly among the peers of children with SEN and their parents. They also observed a decline in its usage, reflecting the positive impact of efforts to promote inclusive education and respectful language. Also noteworthy is the respondents' avoidance and refusal to name words commonly used to refer to people with disabilities, which, in the authors' opinion, indicates high emotional tension associated with this issue. However, a more in-depth analysis of the language and speech patterns used by special education teachers when describing students with SEN revealed a gap between the teachers' conscious inclusive culture and their everyday speech practice. While respondents consciously avoided stigmatizing terms, their speech often revealed implicit biases through connotations of guilt, vulnerability, disadvantage, danger, and separation when describing children with SEN and their needs. Moreover, such connotations dominate in the speech of teachers with extensive teaching experience, which confirms the results of the study (Larios & Zetlin, 2023). The qualitative difference between the perception of children with special educational needs by special teachers with different lengths of service is that teachers with little experience in their perception of children with special educational needs primarily pay attention to their special status and dissimilarity from their peers, while teachers with more experience pay attention to their vulnerability.

During the study, we were able to record a clear fact of discrepancy between the conscious (or declared) and unconscious levels of inclusive culture, when one of the respondents used a name for children with special educational needs, which, as she stated,

she does not use, which confirms the results of the study (Symeonidou & Chrysostomou, 2019) and (Bialka et al., 2024). It was also possible to find evidence of difficulties in choosing words to denote not only children with special educational needs, but also other aspects related to them. For example, participant 15 did not consider herself involved in inclusive education, despite the fact that she taught a child with SEN. This reflects a broader systemic misunderstanding of the essence of inclusive education, when special educational needs are perceived exclusively through the prism of disability. The authors admit that this is typical for Kazakhstan, since before the introduction of inclusive education, students with disabilities were the most segregated group, and therefore the problem of introducing inclusive education is focused on the problem of their inclusion.

This study addressed the problem of the evolution of insults and stigmatizing words for people with mental disabilities and allowed us to confirm the results of the study by G.N. Siperstein et al. (Siperstein et al., 2018). They found that children's and adolescents' use of stigmatizing words for people with intellectual disabilities ("the r-word") sheds light on public attitudes toward the issue of intellectual disabilities and people with them. According to researchers, this word has replaced the previously used "moron" or "idiot"; recently it has been used less frequently by American teenagers, used simply as an insult without reference to a medical diagnosis. Some of our respondents noted similar trend. So, for example, participant 2 (less than 3 years of experience) said that among the children and adolescents she knows, words such as "autist" and "down" are now common as curse words, while 2-3 decades ago words such as "moron", "idiot", and the use of the word "autist" is not at all known to the authors. However, it is noteworthy that, despite changes in frequency of use, words denoting people with mental disorders are still used as curse words.

Participants 2, 5, and 20 observed that children without developmental disorders frequently use these words when addressing each other, often without understanding their true meaning. According to Participant 20, children use them more often towards each other than towards children with SEN. At the same time, the results of the interview with Participant 10 suggest that the evolution of swear words and objectifying words used between children is influenced by adults still have an impact. Participant 10 (less than 3 years of experience): "It's just that the children (from a special school for children with musculoskeletal disorders) said to each other, "I'm a normic, and you're not a normic"... Without understanding the meaning, maybe they just heard it somewhere".

Considering that the authors heard these words only during the study and in interviews with only one participant, it can be assumed that they are specific only to a special school for children with musculoskeletal disorders. Considering the principle of forming classes in this school, separate for children with normal and reduced levels of intelligence, it can be assumed that "normic" most likely means a child with a disorder of the musculoskeletal system and a normal level of intelligence, and "not normic" - a child with a reduced level of intelligence. Most likely, the children learned it from the speech of specialists: one of the teachers or other employees of the special school. Perhaps, using this case as an example, we can see the evolution of a word from objectifying to devaluing.

Conclusion

The study revealed that, despite external acceptance of inclusion – supported by the efforts of special educators, administrators, and state and non-state organizations offering training courses – the medical model of disability remains dominant among special educators. This is evident in the connotations of guilt, vulnerability, disadvantage, danger, and separation, which are prevalent in the speech of experienced teachers when describing children with SEN. The analysis of interview materials allowed for the classification of terms used to describe children with SEN, revealing differences in perceptions based on teaching experience. Teachers with extensive experience tend to use terms associated with vulnerability, while novice teachers emphasize the special status and uniqueness of children with SEN. These findings highlight the persistence of the medical model of disability among experienced educators.

Analysis of the interview materials made it possible to classify the terms used to designate children with SEN, which made it possible to identify a qualitative difference between the perception of children with special educational needs by teachers with different work experience, since connotations associated with vulnerability prevail among teachers with extensive experience, and beginning teachers – connotations associated with emphasizing the special status of children with special educational needs, their difference from other children, which once again confirmed the widespread medical understanding of special educational needs among teachers with extensive experience. The study examined the evolution of stigmatizing language, shedding light on how medical terms for mental disorders often become insults, are used without reference to their original diagnoses, and eventually become obsolete, only to be replaced by new stigmatizing terms.

The study has a number of limitations. The first limitation relates to the sample size and recruitment method. The study involved only 20 respondents, divided into two groups: teachers with less than three years of experience and those with more than 20 years. This small sample raises questions about the generalizability of the findings to a larger, more diverse population. While the main hypotheses were supported, it is unclear whether the results are applicable to teachers without special education training or to those from countries with significantly different historical and cultural contexts of inclusive education compared to Kazakhstan.

The study does not investigate whether unconscious stereotypes about children with SEN impact the effectiveness of their education. This area requires further study to better understand the interaction between implicit biases and educational outcomes for children with SEN. Research of Garrote et al. (2020) suggests that classroom management practices may influence inclusion more than teachers' conscious beliefs. However, the role of unconscious attitudes in shaping inclusive practices remains unclear and warrants further investigation.

References

- Abdul-Chani, M. M., Moreno, C. P., Reeder, J. A., Zuckerman, K. E., & Lindly, O. J. (2021). Perceived community disability stigma in multicultural, low-income populations: Measure development and validation. *Research in Developmental Disabilities, 115*, 103997-103997. <https://doi.org/10.1016/j.ridd.2021.103997>

- Adl-Amini, K., Meßner, M. T., & Hardy, I. (2024). A simulation game for placement decision-making: fostering reflection and belief change about inclusion in teacher education. *International Journal of Inclusive Education*, 1-17. <https://doi.org/10.1080/13603116.2024.2319095>
- Bialka, C. S., Hansen, N., Kan, I. P., Mackintosh, D., & Jacobson, R. (2024). From Deficit to Difference: Understanding the Relationship Between K-12 Teacher Training and Disability Discussion. *AERA Open*, 10. <https://doi.org/10.1177/23328584241245089>
- Budiarti, N. D., & Sugito, S. (2018). Creating Inclusive Culture of Elementary Schools. *Jurnal Ilmiah Peuradeun*, 6(2), 307-307. <https://doi.org/10.26811/peuradeun.v6i2.237>
- Dollinger, M., Ajjawi, R., Finneran, R., & O'Shea, S. (2024). Conceptualising responsibility and hostility within work-integrated learning placements for students with disabilities. *Disability and Society*, 39(9), 2217-2235. <https://doi.org/10.1080/09687599.2023.2209276>
- Feng, L., & Sass, T. R. (2013). What makes special-education teachers special? Teacher training and achievement of students with disabilities. *Economics of Education Review*, 36, 122-134. <https://doi.org/10.1016/j.econedurev.2013.06.006>
- Garrote, A., Felder, F., Krähenmann, H., Schnepel, S., Sermier Dessemontet, R., & Moser Opitz, E. (2020). Social Acceptance in Inclusive Classrooms: The Role of Teacher Attitudes Toward Inclusion and Classroom Management. *Frontiers in Education*, 5. <https://doi.org/10.3389/educ.2020.582873>
- Heller, V., & Kern, F. (2021). The co-construction of competence: Trusting autistic children's abilities in interactions with peers and teachers. *Linguistics and Education*, 65, 100975-100975. <https://doi.org/10.1016/j.linged.2021.100975>
- Heyder, A., Südkamp, A., & Steinmayr, R. (2020). How are teachers' attitudes toward inclusion related to the social-emotional school experiences of students with and without special educational needs? *Learning and Individual Differences*, 77, 101776-101776. <https://doi.org/10.1016/j.lindif.2019.101776>
- King, J., Edwards, N., Watling, H., & Hair, S. (2019). Barriers to disability-inclusive disaster management in the Solomon Islands: Perspectives of people with disability. *International Journal of Disaster Risk Reduction*, 34, 459-466. <https://doi.org/10.1016/j.ijdrr.2018.12.017>
- Lakkala, S., Galkienė, A., Navaitienė, J., Cierpiałowska, T., Tomecek, S., & Uusiautti, S. (2021). *Teachers supporting students in collaborative ways – an analysis of collaborative work creating supportive learning environments for every student in a school: Cases from Austria, Finland, Lithuania, and Poland* (Vol. 13). ResearchGate. <https://doi.org/10.3390/su13052804>
- Larios, R. J., & Zetlin, A. (2023). Challenges to preparing teachers to instruct all students in inclusive classrooms. *Teaching and Teacher Education*, 121, 103945-103945. <https://doi.org/10.1016/j.tate.2022.103945>
- Lu, M., Zou, Y., Chen, X., Chen, J., He, W., & Pang, F. (2020). Knowledge, attitude and professional self-efficacy of Chinese mainstream primary school teachers regarding children with autism spectrum disorder. *Research in Autism Spectrum Disorders*, 72, 101513-101513. <https://doi.org/10.1016/j.rasd.2020.101513>
- Macan, T., & Merritt, S. (2011). Actions Speak Too: Uncovering Possible Implicit and Explicit Discrimination in the Employment Interview Process. In G. P. Hodgkinson & J. K. Ford (Eds.), (1st ed., Vol. 26, pp. 293-337). Wiley. <https://doi.org/10.1002/9781119992592.ch8>

- MacKenzie, A., Bower, C., & Owaineh, M. (2020). Gratitude versus children's rights: An exploration mothers' attitudes towards disability and inclusive education in Palestine. *International Journal of Educational Research Open*, 1, 100001-100001. <https://doi.org/10.1016/j.ijedro.2020.100001>
- Mann Whitney, U. (2007). SPSS for windows (Release 9.0. SPSS Inc, Chicago, Illinois, USA) using chi square and. *The Neuroradiology Journal*, 20, 175-178. <https://rb.gy/i2apcc>
- Mendaliyev, B. E., & Ibragimov, A. Zh. . (2021). Development of inclusive education in Kazakhstan. In. <https://astanait.edu.kz/2021/11/30/развитие-инклюзивного-образования-в/>
- Moriña, A., & Carnerero, F. (2022). Conceptions of Disability at Education: A Systematic Review. *International Journal of Disability, Development and Education*, 69(3), 1032-1046. <https://doi.org/10.1080/1034912X.2020.1749239>
- Parrott, S., Carpentier, F. R. D., & Northup, C. T. (2017). A Test of Interactive Narrative as a Tool Against Prejudice. *Howard Journal of Communications*, 28(4), 374-389. <https://doi.org/10.1080/10646175.2017.1300965>
- Pastore, G., & Luder, R. (2021). Teacher-Student-Relationship Quality in Inclusive Secondary Schools: Theory and Measurement of Emotional Aspects of Teaching. *Frontiers in Education*, 6. <https://doi.org/10.3389/feduc.2021.643617>
- Petrjánošová, M. (2018). How to approach 'prejudice' and 'stereotypes' qualitatively: The search for a meaningful way. *Human Affairs*, 28(4), 429-442. <https://doi.org/10.1515/humaff-2018-0035>
- Richard, S., & Hennekam, S. (2021). Constructing a positive identity as a disabled worker through social comparison: The role of stigma and disability characteristics. *Journal of Vocational Behavior*, 125, 103528-103528. <https://doi.org/10.1016/j.jvb.2020.103528>
- Rodríguez-Izquierdo, R. M., Falcón, I. G., & Permisán, C. G. (2020). Teacher beliefs and approaches to linguistic diversity. Spanish as a second language in the inclusion of immigrant students. *Teaching and Teacher Education*, 90, 103035-103035. <https://doi.org/10.1016/j.tate.2020.103035>
- Siperstein, G. N., Albert, A. B., Jacobs, H. E., Osborne, K. J., & Stokes, J. E. (2018). A schoolwide approach to promoting student bystander behavior in response to the use of the word "retard". *Research in Developmental Disabilities*, 80, 142-152. <https://doi.org/10.1016/j.ridd.2018.06.016>
- Solaru, A. A., & Mendonca, R. J. (2023). Stigma, occupational injustice, and individualization of systemic issues: current issues faced by community dwelling adults with serious mental illnesses. *Disability and Society*, 38(6), 1076-1083. <https://doi.org/10.1080/09687599.2022.2164706>
- Symeonidou, S., & Chrysostomou, M. (2019). 'I got to see the other side of the coin': Teachers' understandings of disability-focused oppressive and anti-oppressive pedagogies. *International Journal of Educational Research*, 98, 356-365. <https://doi.org/10.1016/j.ijer.2019.09.012>
- Taneja-Johansson, S., Singal, N., & Samson, M. (2023). Education of Children with Disabilities in Rural Indian Government Schools: A Long Road to Inclusion. *International Journal of Disability, Development and Education*, 70(5), 735-750. <https://doi.org/10.1080/1034912X.2021.1917525>
- Tarantino, G., Makopoulou, K., & Neville, R. D. (2022). Inclusion of children with special educational needs and disabilities in physical education: A systematic review and meta-analysis of teachers' attitudes. *Educational Research Review*, 36, 100456-100456. <https://doi.org/10.1016/j.edurev.2022.100456>